

NOT FOR PUBLICATION

INSTITUTE OF CURRENT WORLD AFFAIRS

Washington, D.C.
August 28, 1954

Mr. Walter S. Rogers
Institute of Current World Affairs
522 Fifth Avenue
New York 36, New York

Dear Mr. Rogers:

The six newsletters enclosed are the first of a series based on my observations of the East Africa High Commission, an interterritorial organization which administers certain services common to Kenya, Uganda, Tanganyika and Zanzibar. This increment covers interterritorial medical research as it was being carried on during early 1953. I plan others covering Transportation, Communications, Agricultural and Veterinary Research, etc.

I am sending out this information on the agencies of the High Commission first - putting the cart before the horse - because my detailed description of the High Commission headquarters setup is not yet complete. The High Commission itself consists of the Governors of Kenya, Tanganyika and Uganda, with the Governor of Kenya being permanent chairman, and a staff of specialist Officers headed by the Administrator to the High Commission. This headquarters is situated in Nairobi. The High Commission deals with "services" and is not an interterritorial "government," though there is a Central Legislative Assembly with powers confined to the services administered generally subject to concurrence by the separate legislatures of Kenya, Tanganyika, and Uganda.

The newsletters emphasize factual description, are non-analytical, and may be cramped by adherence to the following sequence of description: (1) General, (2) History of Agency, (3) Administrative Organization, (4) Finance, (5) Functions and Operations, (6) External Relations, etc. The outline was adopted in the interests of uniformity for observations covering over thirty different agencies. The newsletters do, however, represent a digest of all the information available to mid-1953 on the agencies concerned.

Earlier I assumed this material would not be useful in newsletters, but a number of officials of the Foreign Operations Administration and other government agencies here have repeatedly asked for it. In my talks with them I learned that many of the people in Washington who are concerned with American aid to underdeveloped areas have had little opportunity to inform themselves on the details of development measures already in hand in such areas.

Sincerely,



John B. George

NOT FOR PUBLICATION

INSTITUTE OF CURRENT WORLD AFFAIRS

JBG-46
East Africa High Commission:
(1) Medical Research, General

Washington, D.C.
August 21, 1954

Mr. Walter S. Rogers
Institute of Current World Affairs
522 Fifth Avenue
New York 36, New York

Dear Mr. Rogers:

Five distinct High Commission agencies exist to carry out research on specific interterritorial health and medical problems - the East African Medical Survey and the Filariasis Research Unit, which are under a single Director, the Malaria Unit, the Virus Research Institute, and the Interterritorial Leprologist. Each unit is separately responsible to the Administrator, but all are coordinated as regards research through a central East African bureau of Research in Medicine and Hygiene. The Colonial Medical Research Committee in London monitors the purely scientific affairs of the Virus Research Institute, the Filariasis Research Unit and the Medical Survey, but administratively they remain charges of the High Commission.

Broad advice is made available in East Africa through the Annual Conference of Directors of Medical Services of the East African territories and an East African Standing Advisory Committee for Medical Research, both under the Chairmanship of the Administrator. The Annual Conference discusses interterritorial research, providing an opportunity for the voicing of territorial views and needs. The terms of reference of the Committee are:

"To advise on the needs for medical research in Kenya, Uganda, Tanganyika and Zanzibar; to advise on the means for ensuring that the results of research are applied in practice, and to keep under review the facilities for inter-territorial collaboration in medical research."¹

The Committee provides liaison between scientific bodies and interests in the UK and East Africa.

The Committee includes the Administrator as Chairman, two representatives of the Colonial Medical Research Committee, the Directors of Medical Services of the four East African territories, two representatives of the Makerere College Council, and two persons associated with medical research, appointed by the High Commission with the concurrence of the Secretary of State. The Director of the Bureau of Research is Secretary to the Committee ex officio. The creation of the Committee was proposed by the Secretary of State in 1951 following the visit to East Africa of the Chairman of the Colonial Medical Research Committee. The suggestion was discussed by the Conference of Directors of Medical Services in 1951

and approved by the High Commission and the governments concerned. Members were appointed toward the end of 1951. The first meeting of the Committee was held in Nairobi in March 1952 and the second in London in July 1952.

"The Committee passed under review the medical research services of the High Commission and made recommendations regarding the future of these services after the terminal dates of current Colonial Development and Welfare schemes made for their support. In addition, the Committee reviewed work in the medical research field which was being carried out by the territorial medical departments and by non-governmental institutions and individuals and endorsed the desirability of certain investigations, which should be undertaken as and when qualified research workers became available. Stress was laid on the importance for medical research of statistical and demographic studies."²

In January 1953 the Committee sponsored a three-day Scientific Conference in Nairobi on the subject "The African Child." Papers were read dealing with sociological and educational as well as medical problems regarding African children, and speakers came from the UK, territorial medical departments, High Commission research units, Makerere College, the Kenya Education Department and the Christian Council of Kenya. The Committee intends to hold further conferences on subjects of research.

The plans and operations of medical research in East Africa are also based upon regular consultation and collaboration with the Colonial Medical Research Committee. Periodical visits, as well as representation on the Advisory Committee, maintain this close contact. In 1949 the Director of Colonial Medical Research and Professor MacDonald had visited East Africa, the latter reporting in regard to the planning of the Medical Survey. The Director of the Bureau discussed in 1950 with appropriate agencies in United Kingdom the general programme for medical research and particular plans for the Medical Survey and the Filariasis Research Unit. In 1951 the Chairman of the Colonial Medical Research Committee visited the research organisations in East Africa and the Director of the Bureau visited London for discussions with the Committee and the Research Department of the Colonial Office. The Bureau, in its Digest of 1951, claimed the closest cooperation with the Colonial Medical Research Committee.

In earlier years the necessarily limited energies of medical science in East Africa had been focused on curative rather than preventive methods, largely because of shortage of staff and financial stringency. Only a little of the detailed knowledge of incidence of diseases and environmental conditions, prerequisite to long range planning and application of preventive means, had been built up.

Following recommendations of the Standing Committee on Medical Research, the late Professor B.A. McSwiney, F.R.S., was invited in 1946 by the Secretary of State for the Colonies to visit East Africa and to "review the general situation in regard to medical research and to make

detailed recommendations."³ His report of October of the same year noted the undue emphasis on curative measures, and the lack of adequate interest in preventive medicine, which is essential to a coordinated plan of development. He also reported a lack of fundamental statistics on the spread and intensities of various diseases, and an absence of unanimity of opinion as to which diseases were the most important. To attack these problems, he felt the first need was for field surveys of health conditions in various areas to distinguish between contributory factors, to suggest the most urgent needs for further research, and to indicate the problems on which the medical services should concentrate efforts, particularly in preventive medicine. He advised that a five-stage procedure be attempted.

- "1. To carry out large-scale medical and sanitary surveys in selected populations;
2. following thereon the application of required measures to improve health;
3. the extension of stage 2 to a larger area;
4. the maintenance of established conditions;
5. the review of conditions from time to time."⁴

Phases 1 and 2 were to be carried out by an East African Medical Survey and phase 3 was to be the responsibility of the territorial medical services. Also proposed was the setting up of a regional bureau "to keep in touch with all terms of medical research and health conditions, to serve as a projection, so to speak, of the Colonial Medical Research Committee in London, and also as an information centre on hygiene, preventive and curative medicine, to serve the whole area."⁵ He was opposed, however, to the setting up of a central interterritorial medical research institute, an idea advanced and much discussed in the past.

The acceptance of these proposals created the basis for the present organization of medical research in East Africa. As direct results of the report the Medical Survey and the Bureau of Research in Medicine and Hygiene were established in 1949. The Filariasis Research Unit was also established in 1949, and the High Commission assumed responsibility for the administration of the Virus Research Institute, the Malaria Unit and the Interterritorial Leprologist on 1 January 1950. The establishment of the Filariasis unit and the Virus Research Institute was at the initiative of the Colonial Medical Research Committee; the Malaria Unit and the Interterritorial Leprologist were initiated by the High Commission on advice arising from annual meetings of the Directors of territorial Medical Departments. The medical research organisations, perhaps the youngest group of services under the High Commission, had by the end of 1952 overcome a period of initial material difficulties and had recruited nearly full personnel and were carrying on their work at an accelerated pace.

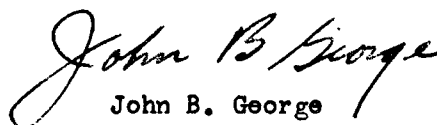
All capital expenditures of the High Commission medical units have been provided from C.D.&W. funds. Half to three fourths of recurrent expenses - except those of the Medical Survey which were provided entirely from C.D.&W. funds in 1949 and 1950 - have been met by contributions from

C.D.&W. funds, the remainder being met by equal contributions from the three East African territories, and, in two cases, by very small sums from other territories served by the unit concerned. All units except the Filariasis Research Unit are scheduled for assistance up to 1956.

Both the Bureau and E.B. Worthington, Scientific Secretary to the High Commission from 1947 to May 1951, have enumerated other problems, not covered by the existing units, which require fuller investigation on an interterritorial basis. The Bureau in its 1949 report stressed that specific research was most essential on nutrition, tuberculosis and malaria and stated that further investigation was also required into schistosomiasis and trachoma. Worthington suggested nutritional studies, investigations of the biological and medical aspects of schistosomiasis, on which work has been done by the Fisheries Research Organisation at Jinja and by territorial departments, investigation into silicosis and tuberculosis "perhaps on the lines of the present interterritorial leprologist's work," and a study of plague. He expressed the hope that it would be possible to initiate investigations into one or more of these problems during the next five years.^o

The problems already being investigated throughout the three territories, since the individual stations are often far separated, suggest a need for central means of occasional discussion and exchanges of information, even in the instances where any attempt at formal coordination would be resisted. As the programme develops and new nutritional studies, studies of schistosomiasis, tuberculosis, etc. are initiated, the usefulness of interterritorial organization may come to be more widely recognized.

Sincerely,


John B. George

F.S.

Footnotes

1. East Africa High Commission, Digest of the Annual Reports 1952 of the Medical Research Organisations, p. 3.
2. Ibid.
3. East African Bureau of Research in Medicine and Hygiene Annual Report 1949, p. 1.
4. Ibid.
5. E.B. Worthington, A Survey of Research and Scientific Services in East Africa, 1947-1956, p. 53.
6. Ibid., pp. 56-57.

Sources

East African Bureau of Research in Medicine and Hygiene Annual Report 1949.

E.B. Worthington, A Survey of Research and Scientific Services in East Africa, 1947-1956 (Muguga, Kenya, 18th December, 1951).

East Africa High Commission, Interterritorial Cooperation: Work of the East Africa Central Legislative Assembly, Despatch No. 1/52, 19th May 1952, from P.E. Mitchell, Chairman, East Africa High Commission to the Secretary of State for the Colonies.

East Africa High Commission, 1951 Digest of the Activities of the Medical Research Organisations.

East Africa High Commission, Digest of the Annual Reports 1952 of the Medical Research Organisations.

East African Medical Survey, Departmental Annual Report No. 1 (1949), by Lt. Col. Laurie, D.S.O., M.D., Director (Mwanza, Tanganyika Territory, East Africa)

Colonial Office, Annual Report on the East Africa High Commission 1949 (London: H.M.S.O., 1950)

..., Annual Report on the East Africa High Commission 1950 (London: H.M.S.O., 1951).

..., Annual Report on the East Africa High Commission 1951.

Various issues of East African newspapers.