

Small book, big history

Howard Phillips, *Plague, Pox and Pandemics: A Jacana Pocket History of Epidemics in South Africa*

Jacana Media, Johannesburg, 2012

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This review begins with two confessions: firstly, asking me to review *Plague, Pox and Pandemics* was something of an easy pick since, having taught a module “Epidemics and Social Change in Historical Perspective” for over a decade, I have long been a convert to the premise of and arguments put forward in this book. Secondly, reading it several times has not assuaged the chronic case of professional jealousy which it has induced in me, for Phillips has given us a powerful, punchy and poignant text that exposes some of the key forces shaping our region’s history over the last several centuries. Indeed, taking a “holistic, social history of disease perspective ... this book ... places epidemics firmly within the country’s past and treats them as something not extraneous to the mainstream of its history” (pp 9–10). It is therefore not only a history of epidemics in South Africa; it is a history of South Africa in the modern world.

As is shown in each chapter, epidemics both “real” and “constructed” are prisms through which we can see the dynamics, values and operations of societies at particular moments. Common responses to the eruption and spread of

a disfiguring, crippling, or quickly-killing disease include: fear, blaming, stigmatising, appeals to or questioning of religious and other authorities; quarantining, shunning, surveillance; medical innovation (albeit not always effective, or benign); and state intervention (or failure to act). To link incidences of these, as Phillips does, with key moments in South African history – the demise of the indigenous communities of the Cape; the roots of segregation; the rise and shape of racialised capitalism; apartheid; and the creation of the “perfect storm” of conditions on which the modern era’s most serious infectious diseases are still playing out, is no small achievement.

Such a book is long overdue. For, as Phillips remarks in the admirably brief introduction, despite the now long-standing international historiography of the importance of the impact of infectious disease, “epidemics ... loom small in accounts of South Africa’s past, almost in inverse proportion to the anxious attention they attracted when they raged” (p 9). In outline, each of the book’s five chapters focus on one infectious disease, which variously comprise several outbreaks, or waves, or manifest in one short, sharp and devastating visitation: smallpox in the eighteenth through to mid-nineteenth centuries; bubonic plague at the close of the nineteenth century; the deadly influenza of 1918–1919; polio in the mid-twentieth century; and, inescapably, HIV/AIDS from the 1980s through to today.

Most readers will immediately wonder why, given their vast significance and fairly substantial representation in the historiography – tuberculosis, syphilis, malaria, as well as cholera, and indeed “the rinderpest” (an epizootic, but one which had such an impact that in South African English at least, it has become a colloquial reference to a catastrophic event that marked the end of an era) are not covered, and why polio – an epidemic that affected a relatively small number of South Africans (most of whom were middle class and white) – has a chapter dedicated to it. Phillips’ answers to this are convincing, for his poxes, plagues and pandemics have been selected because they occurred during – and indeed perhaps gave rise to – “pivotal moments in the country’s past”, and each left “a mark both deep and wide on the fabric of society” (p 11). Moreover, some of the candidates for inclusion in the book have become long-term, endemic illnesses rather than occurring in epidemic form. This is most notably the case for tuberculosis, despite its newer, deadly synergy with HIV, and the recent scares surrounding MDR-TB and XDR-TB (multi-drug resistant and extensively multi-drug resistant tuberculosis, respectively).

The book is precisely written, accessible, eminently readable, and, as I have found out, can be effectively deployed as a valuable teaching tool. Indeed, I only wish I had had it for more than my final year of teaching my own course, for which students review a book, usually selected by them. In 2013, the module was taken up by 19 students: only three of whom were in any way acquainted with academic history, or with the history of South Africa, or were based in the humanities; and possibly only three of whom – and definitely not the same three – had any initial interest in the topic. None of them had any grounding in the medical sciences, or, indeed much understanding of the scientific method.

Moreover, despite living in a world where awareness of HIV/AIDS has perhaps dangerously become almost humdrum background noise, most of these students had never heard of the great 'flu pandemic of 1918-1919; nor, strikingly, of polio. They had never seen illustrations of a smallpox victim, nor did they have any inkling that the bubonic plague had ever struck anywhere outside of a Western European village in the 1400s – let alone any idea that southern Africa has been deeply affected by the eruption at times of these and other major epidemics of human disease. Fortunately, however, assigning *Plague, Pox and Pandemics* as the “default” review text vindicated Phillips’ hope that after finishing the book, “South African history should not look the same to readers” (p 11) and much of what follows draws (with their permission) on the reviews written by these students.

Given licence to include judging (briefly) a book by its cover, this is where most of the reviews began, and worthy academic publishing houses please take note – their comments bring home just how important clever design can be. As one student described it, “the book’s colour red signals danger; the human skull signifies death – these reflect the contents of his study.” Another amplified:

The drawing of the skull is normal at face value, but once you have the book in your hands, you start to notice the items that make up the skull’s “face”. First the eyes are made up of, one; the South African map, and two; of the rats that were believed to carry the ... bubonic plague. The teeth are made out of tombstones, and the mouth is drawn with [crutches] which were mainly used by patients with polio ... The ears have faces of a young boy and a girl; this could either represent the orphans that are left because of the HIV/AIDS pandemic or the fact that some of these diseases affect both young and old people. On the nose there are signs which look like hazard warning signs for a poisonous substance or chemical. The book cover is very graphic and the colour choice for red and white may represent the HIV/AIDS pandemic.

Since most students from outside of the discipline of History presented to the seminar class via amply illustrated power-point slides, and/or made reference to the many movies and television series that portray grisly and frightening epidemic diseases such as Ebola, some wished for more gore, however. “The author could include catchy pictures rather than dainty ones that he includes in the book”, said one. This prompted me to wonder whether Jacana might think of producing its Pocketbook Series as a series of short documentaries, although I remain convinced that the power of prose – especially as finely rendered as that in this book – is essential for nuance, texture and subtlety.

Despite their surprise at learning that “Othering” and racialised prejudice does not flow in one direction only (see pp 34-35, on smallpox in the nineteenth century: “Basters accusing Korana of bringing the disease to them in 1804, Hurutshe Tswana blaming Ndebele in 1835 ...”), my students were reluctant to loosen their grip on positive narratives of scientific progress and the march of modern medicine. Many sought – not unlike those caught up in the midst of a plague itself – meaning and lessons, and hope:

Technological improvements and love to care for one another were developed by epidemics. In hospitals caring for the sick, orphanage homes were built during the epidemic of Spanish flu, where most adults and [there is also the example] of

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breadwinners [who have] died and food supplements in the current time of HIV/AIDS.

Another wrote: "The important subject is that with this narrative approach, we as a nation learn to know the system of epidemics and to ensure that the next one does not terrify or tremble us."

Perhaps unsurprisingly, several struggled a little with the chapter on polio, which manifested in South Africa first in 1917 1918, and then "as a countrywide epidemic ... three more times, in the summers of 1944/5, 1947/8 and 1956/7, all as increasingly serious offshoots of broader global pandemics. In between, it smouldered in the background" (p 95). One of the readers commented: "The author included the most unlikely case of finding middle class people affected the most by disease during the polio epidemic of the 1950s; and mostly [it was] whites [who] were found to have the disease [rather] than Africans ...". This chapter is in no way less clearly written than the others, but the analysis proved challenging to stereotypes and the argument is probably the most complicated of the book, for it rests on a basic understanding of how the poliomyelitis virus adapts in and outside of the human body; and, in an apparent paradox, how immunity to polio was reduced with the proximity to sanitation, especially treated water facilities. Overall, the reviewers were in agreement that:

... the book was definitely interesting and worth the read. It was fascinating to see how ... disease does not only leave many dead, but that it has effects on societies far beyond that ... H. Phillips depicts how diseases can change leadership, can create hatred between different groups (religiously, culturally and racially), but not only does it have negative effects on a society, disease can help improve health care systems, they can show that some people that are in power are not doing their jobs properly (which may lead to better leadership) and it may bring people in different fields to work together.

Another student put it well: "The book can be recommended for both history and medical students and anyone who seeks to do research on the history of epidemics in South Africa. Overall the author did a great job." I can only concur, and salute a miniature masterpiece. This is big history in a small book.

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