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PHYSICIANS, COLONIALISM RACISM, AND DIASPORA IN WEST AFRICA. *By Adell Patton Jr.* Gainesville: University of Florida Press, 1996. Pp. xx, 43 pp, illustrations., fig., maps., tables, bibliography, index. \$ 49.95.

Every once in a while a reviewer comes across a book written with gusto, the theme of which is congenial, so much so that the reviewer is carried along, but finds it difficult to stick only to the paths beckoned by the author. In such cases, it is quite easy for the reviewer to fall into the error of criticizing the author not for the book he has written but for the book that (the reviewer feels) the author should have written. Adell Patton's history of the West African physicians is such a book. It is so rich and detailed one cannot help being drawn towards paths the author has sometimes implicitly hinted at but not sufficiently explored. Space will, however, make me unable to pursue these. The book under review is very well researched, it touches on several issues that contribute to the understanding of the rise of the medical profession in Africa. The nature of the medical health services, the principal characters who played leading roles in them, and their struggles for respect in their profession, are some of the themes the author situates in the context of colonial politics. These are dealt with in an engaging manner.

Adell Patton's book deals with this history of Western medicine in Africa. Four interrelated issues are covered in book: 1) the development of professional Western (scientific) medicine in Africa; 2) how African physicians used their medical training to introduce the principles of Western medicine into indigenous African communities; 3) racism, discrimination, and obstructions these physicians encountered as they sought to practice their skills, and strove for professional mobility in the colonial health services; 4) and strategies employed by the physicians in their attempts to counteract these impediments. The book's comprehensive range of themes, each of which would have been sufficient for treatment in a full length monograph, was attained through meticulous research, involving archival studies in England and West Africa, interviews with British doctors who had served in the Colonial Medical Service, and with African doctors residing in England. In what he describes as fieldwork, the author not only covered West Africa, but traveled as far afield as Tanzania to collect data.

All four themes mentioned above are given more than adequate treatment, but the third, racial discrimination that these physicians faced when they returned to their countries, runs through the whole book. Patton shows how African physicians found themselves marginalized in their own countries when they returned home. Not only were their qualifications sometimes not recognized by the colonial authorities, but they were barred from treating whites, particularly white females. Except where, of course, no European doctors were available. All the while their white brethren, alongside of whom these black physicians had trained, found it convenient to suspend their consciences and to gladly or tacitly

accept their new-found status in the colonies, as members of an elite race, legitimized by prevailing notions of what the author terms as "pseudoscientific racism." In the instances that African physicians tried to counter such attitudes, they found themselves fighting, as it were, a two front war: colonial authorities on the one flank, and their white professional colleagues on the other. The author documents many instances of such intraprofessional conflict in the book.

Yet another interesting aspect of intraprofessional conflict is that it was not always just between Europeans and Africans. The author documents some instances where African physicians in key positions tried to block the promotion of fellow Africans. For instance, Easmon, a Sierra Leonian of Nova Scotian descent, an outstanding doctor who was the first African to become CMO (Chief Medical Officer) in the Gold Coast, refused to promote Dr. B. W. Quartey-Papafio, a native, to the coveted post of senior assistant surgeon. Although Easmon acknowledged that Quartey-Papafio was better qualified (p. 108), he nonetheless appointed a British medical officer on grounds of loyalty.

The book is divided into two major parts. Part One deals with the historical background to colonial medical systems in both Francophone and Anglophone Africa. The author traces the origins of the medical profession in Africa from the earliest recorded instances to the present. Also covered in this part are the consequences of different kinds of certification requirements for Africans trained in Europe and the United States. In Part Two, intraprofessional conflict and professional struggles are described through a sensitive use of biographies of some of the physicians. On the issue of training and certification, itself a complex and confusing field, the author sees African physicians as falling into four categories: 1) those trained in Western Europe—mainly Great Britain and on the Continent prior to the Second World War; 2) those trained in the United States and Canada from the 1900s; 3) doctors trained in the former Soviet Union and other Eastern Bloc countries; and lastly 4) the African doctors trained wholly in Africa. The different sources of training imbued their recipients with distinct medical cultures. In effect these proved to be the underlying cause of conflict between the products of the different cultures. For example, the British mode of training eschewed early specialization and required the acquisition of a broad knowledge in general medicine including surgery. This was, of course, a system suitable to health care delivery in isolated parts of the world where the colonial powers had interests. In contrast, in the Eastern Bloc countries, to which some newly independent African nations began to send students for medical training from the 1960s, students were given shorter periods of training and specialized early. This "communist medical culture" required teamwork in which, as it were, a cocktail of skills were combined to deal with illness. In Africa where there were not sufficient doctors to go around, this type of medical culture was both impractical and not very valuable. The differences in medical culture became the underlying cause of conflict of another kind that paralleled the Cold War

competition between East and West. This, in addition to the fact that African doctors were sometimes recalled home before they could finish their residencies, caused some conflict between Western trained doctors and those trained in the Soviet Union and the Eastern Bloc countries. (It also served to contribute to general beliefs among Africans that doctors trained in the Eastern Bloc countries were lesser qualified than their Western trained counterparts. This reviewer recalls how in the early 1960s, it was generally believed that one should avoid "Communist doctors" in popular beliefs that they only received short training and were no more than "animal doctors," i. e., veterinary doctors).

It is a credit to the author that he has taken all these issues in his stride, and produced what is in effect a groundwork on colonialism and the African medical profession. But in that comprehensives also lies what seems to me to be the only weakness of this otherwise splendid and substantial piece of scholarly work. The author spends so much space on details not of central relevance to his theme, but exotica that only connoisseurs will find interesting. There are several examples of these in the book. Two will suffice to illustrate what I mean. We are told of how the widow of Dr. William Fergusson, the first Western trained doctor of African descent to rise through the ranks of medical services in Sierra Leone, and then to become governor of the colony, was denied a widow's pension after the death of her husband (p. 74). The manner in which the topic is introduced arouses the reader's curiosity as to the fate of this widow. One expects more, only to be told: "the pension fate of Mrs. Fergusson was, indeed, a saga in tragedy." True, a footnote is given for the curious reader to turn to. But the footnote only refers to some other writer who has, presumably, written about the tragedy hinted at. One more example. We learn that in 1874, British writers published no less than sixteen books on the Gold Coast. The books were versions of colonial historiography, the purpose of which was to legitimize colonial domination, since they "extolled the acquisition of English cultural skill, values, and knowledge" (p. 94), while implicitly or explicitly negating the past of the Gold Coast. The author informs us that the "African intelligentsia understood the need to dismantle the imperialist historiography and began to do so from the 1890s onward with the publication of their own books" (p. 94). The reader would like to know how the African intelligentsia hit back with books of their own, only to be offered another footnote that does not expound on the claim, but gives a further reference to one article which presumably deals with the topic. The persistent reader might be able to find the reference in order to find out more about such counterhistories. But the author would have done better to have given some indication as to the titles involved. This reviewer is, however, skeptical as to whether what was written could be considered effective counterhistories to the colonial historiography. It is rather a fact that whatever the African intelligentsia did—assuming that there was such a coherent group deserving of such a name—it was not able to produce anything that could serve as a counterhistory to imperial colonial historiography. In this instance, it seems to me that Patton's own book is a more powerful

corrective to the many facets of colonial historiography than what is purported to have been produced by the African intelligentsia.

The book ends with a thoughtful epilogue and detailed appendixes. The author concludes by listing research themes that others might fruitfully pursue in further contribution to the social history of medicine in Africa. Some of these include research on the social classes from which African medical doctors in private practice draw their patients, research on treatment seeking behavior to show the rapidity in the spread of Western medicine among, say, rural Africans, and research on traits of professionalism in Africa. It might interest the author to know that some changes have taken place since those days when black doctors were barred from treating whites. In 1995 I met a young white American who was traveling from the north of Ghana to consult a prominent African doctor in Kumasi. When I asked why she should have bypassed a number of hospitals with qualified doctors, many of whom were white, she said the doctor she was going to see was trained in America. It would seem, therefore, that the interprofessional divide between doctors trained in the East and the West has now been replaced by preferences for doctors trained in the medical cultures with which one is at home. The author is right in pointing out some of the interesting themes for research that still remain to be done. One can only hope that he will encourage some of his students to build on what he has started in such a successful manner.

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