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CAPE OF GOOD HOPE.

REPORT

OF THE

SELECT COMMITTEE

ON THE

Contagious Diseases Act.

Printed by Order of the House of Assembly.

AUGUST, 1906.

CAPE TOWN :
CAPE TIMES LIMITED, KEBROM STREET.

1906.



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AUGUST, 1906.

CAPE TOWN

CAPE TIMES LIMITED, KEEROM STREET :

1906

ORDERS OF THE HOUSE.

26th June, 1906.

ORDERED : That the Petitions presented to the House on the subject of the repeal of certain parts of the Contagious Diseases Act, and also the Petitions on the question of raising the age of consent, be referred to a Select Committee for consideration and report, with power to take evidence and call for papers, the Committee to consist of Messrs. Theron, Anderson, Hellier, T. Scarle and Wood.

29th June, 1906.

ORDERED : That the Committee consist of seven members and that Dr. Hewat and Dr. de Jager be members of the Committee.

ORDERED : That the Report and Evidence of the Select Committee on the Contagious Diseases Act, appointed in 1899, be referred to the Committee.

20th July, 1906.

ORDERED : That the Petition presented to the House on the 4th instant from E. Taylor and others, of Wellington, be referred to the Committee.

 ORDERS REFERRING PETITIONS TO THE COMMITTEE.

 (For Details see Appendix A).

26th June, 1906.	No. 72.	From Janet M. Angus and others.
"	No. 74.	Do.
"	No. 81.	.. Helen Davison and others.
"	No. 88.	.. Do.
"	No. 106.	.. Margaret C. Pringle and others.
"	No. 107.	.. Do.
"	No. 112.	.. Lilian Hutton and others.
"	No. 115.	.. Do.
"	No. 120.	.. Gertrude Edkins and others.
"	No. 121.	.. Do.
"	No. 123.	.. Louise Jackson and others.
"	No. 124.	.. Do.
"	No. 137.	.. Annie Pitt and others.
"	No. 140.	.. Gertrude Berrange and others.
"	No. 142.	.. Annie Pitt and others.
"	No. 149.	.. Rev. S. H. Ravenscroft & others.
"	No. 175.	.. Maria Phillips and others.
"	No. 179.	.. Do.
"	No. 191.	.. Helen C. Leith and others.
"	No. 194.	.. Do.
"	No. 203.	.. M. Abbott and others.
"	No. 213.	.. Elizabeth Hall and others.
"	No. 214.	.. M. H. Filmer and others.
"	No. 215.	.. A. Kidson and others.
"	No. 219.	.. Elizabeth Hall and others.
"	No. 220.	.. A. Kidson and others.
"	No. 221.	.. M. H. Filmer and others.
"	No. 226.	.. Maggie Helm and others.
"	No. 235.	.. Maria du Preez and others.
"	No. 236.	.. B. Sutherland and others.
"	No. 241.	.. Mabel Hyde and others.
"	No. 247.	.. Agnes Main and others.
"	No. 248.	.. Jean Simpson and others.
"	No. 250.	.. Do.
19th July, 1906.	No. 292.	.. E. Taylor and others.

REPORT

OF THE

SELECT COMMITTEE, appointed by Order of the House of Assembly, dated the 26th June, 1906, to consider and report on the subject of the repeal of certain parts of the Contagious Diseases Act, and also on the question of raising the age of consent; the Committee to have power to take evidence and call for papers and to consist of Messrs. THERON, ANDERSON, HELLIER, T. SEARLE, WOOD, Dr. HEWAT and Dr. DE JAGER.

Your Committee, having taken evidence and having considered the matter referred to them, beg to report as follows:—

1. Petitioners for the repeal of the first part of the Contagious Diseases Act advance the following against the Act:—

- (a) The degrading and humiliating effect upon women examined under the provisions of this Act.
- (b) That the Act recognises and therefore legalises prostitution.
- (c) That by giving a false sense of security in the minds of men, it actually encourages the vicious.
- (d) That the two sexes are unequally dealt with.
- (e) It does not encourage prostitutes to reform.

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- (f) That it deters many prostitutes from voluntary examination because they object to being registered as such, owing to the difficulty of getting their names removed from the list and the stigma attached thereto.

Evidence led went to show that it deters some from a voluntary submission to examination and to treatment because the mere fact of their having taken advantage of the provisions of the Contagious Diseases Prevention Act can be used as evidence against them under the Morality Act.

- (2) Your Committee find that there are two Acts dealing with prostitution brothels, etc., viz.:—The Contagious Diseases Prevention Act, No. 39 of 1885, and what is commonly known as the Morality Act (No. 36 of 1902). The former Act is divided into two parts: Part I. is at present in force only in eight centres, viz.:—Cape Town, Wynberg, Simons-town, East London, Port Elizabeth, Uitenhage, King William's Town and Umtata. Part II. applies generally to the rest of the Colony.

- (3) With regard to the second part of the Contagious Diseases Prevention Act there has been no complaint as to its working, and your Committee are of opinion that there is no need to alter it except in so far as to give power to the Resident Magistrate, after due inquiry, to order the consigning to and the detention in hospital for treatment of any syphilitic who is, in his opinion, a danger to others, and that clause 38 should be amended so as to provide a penalty for giving wrong information to the Magistrate as being under the treatment of a private

medical practitioner. In view of the great prevalence of syphilis throughout the Colony, especially amongst the coloured population, your Committee regret the action of the Government in closing many of the Contagious Diseases Hospitals in country districts; they are of opinion that some provision of this kind is essential in dealing with the spread of the disease.

- (4) Your Committee find that the Morality Act of 1902 is, in the opinion of all witnesses examined, in conflict with the Contagious Diseases Act of 1885, in so far, that while the former prohibits brothels and aims at the suppression of prostitution, the latter Act provides for examination and the hospital treatment of prostitutes with the object of preventing the spread of diseases resulting from vice. As a record is kept of cases examined and treated, an impression has unfortunately been created in the minds of some that the Contagious Diseases Act regulates the vice itself. If, however, provision is made in the Contagious Diseases Prevention Act to the effect that nothing done under it (Contagious Diseases Prevention Act), nor any information given under its provisions, shall render any person liable to proceedings under the Morality Act, the objections raised that Part I. of the Contagious Diseases Prevention Act serves as a deterrent on those who are sought to be beneficially served by its provisions out of fear of prosecution under the "Morality" Act will be done away with.
- (5) There is a consensus of opinion that a great deal of good has been done by the "Morality" Act of 1902, in so far that it

has reduced the number of European prostitutes, that it has cleared the streets of Cape Town generally of the vicious, and that it has markedly suppressed brothels and largely done away with procurators, pimps, and those who live on the proceeds of prostitution.

It is, however, also admitted that by the operation of this Act some prostitutes have been driven into seclusion and that while a large number of prostitutes, mostly of the coloured class, and extensively diseased, now carry on their trade on open fields, the mountain side, etc., others have gone into service, or migrate between service and prostitution. It is admitted that it is practically impossible to get these women under the operations of either the Contagious Diseases Prevention Act or the "Morality" Act.

- (6) In carrying out the Contagious Diseases Prevention Act, it has been found expedient by the officials to employ lay-inspectors. Your Committee would advise that the Contagious Diseases Prevention Act be so amended as to provide for an Administrator and lay-inspectors. The Administrator to be responsible for the proper and just carrying out of the Act, and to inspect or cause to be inspected all contagious diseases hospitals, and to inquire into the manner in which the duties of the medical officers and lay inspectors and others are performed. The Administrator should be the Medical Officer of Health for the Colony who shall report annually to Parliament on the working of the Act. If this be done, and the "Morality" Act applied by the Police authorities to deal with any recrudescence of the evil, which reached such scandalous conditions some

years ago, your Committee feel convinced that the Contagious Diseases Prevention Act will create less irritation and produce an appreciable diminution in venereal diseases not only among the vicious class of the communities, but also go a long way in preventing the serious spread of syphilis among the innocent and respectable, who are in divers way acidentally infected by servants, etc.

- (7) Your Committee have taken no evidence from other centres than the Cape Peninsula excepting the evidence of the Medical Officer of Health for the Colony and the reports of some of the District Surgeons (appended). Your Committee must strongly impress the serious spread of syphilis throughout the Colony and the necessity for proclaiming Part I. of the Contagious Diseases Prevention Act in mining areas, such as Kimberley, garrison towns such as Middelburg, and also in places where there are large collections of un-married labourers.
- (8) The Act should be further amended so as to provide that if any person, knowing that he or she is affected with a contagious disease, shall by means of illicit intercourse, communicate such disease to another person, he or she shall be guilty of a contravention of Section 33 of the Contagious Diseases Prevention Act, and shall be liable on conviction before the Resident Magistrate of the District, to the punishment therein provided.
- (9) Your Committee feel in duty bound seriously to remind the House of the terrible ravages of syphilis, the spread of which helped on by colored servants and by those of them who migrate between prostitution and service, constitute a most serious state of matters, which should engage the immediate attention of the State.

- (10) With regard to sub-section (e) of paragraph 1, your Committee wish to draw attention to the good work being done by the Societies whose representatives have given evidence before the Committee and recommend that these Societies and others doing similar work should receive every encouragement from the State.
- (11) With regard to the age of consent there is unanimous opinion that 13 years is too low an age. Your Committee are of opinion that the age of consent should be raised to 16 years.

THOS. P. THERON,
Chairman.

Committee Rooms,
House of Assembly,
15th August, 1906.

MINORITY REPORT.

The following members of the Committee are not prepared at present to pronounce an opinion upon the question of the retention or repeal of Part I of the Contagious Diseases Act, and, as far as the position is assumed in the Report that the retention of Part I of the Contagious Diseases Act is desirable, they hereby record their dissent.

THOS. P. THERON,
J. G. HELLIER.

Committee Rooms,
House of Assembly,
15th August, 1906.

SECOND MINORITY REPORT.

While agreeing fully with Paragraphs one, two, three, five, eight, nine, ten and eleven of the Report, and much of the other sections, I have no hesitation in recommending the repeal of that portion of Part I of the Contagious Diseases Act which provides for the compulsory examination of prostitutes. I believe that this part of the Act has failed almost completely in its objects, and that it merely prevents more efficient means such as recommended in the Report, and the extension of the voluntary treatment by means of free dispensaries, etc., of all diseased persons, being taken to combat the disease, while being repugnant to the moral sense of the Christian community. The evidence too, in my opinion, clearly shows that this method of dealing with the vice and its resultant disease, has not been a success in other countries.

THOS. SEARLE.

Committee Rooms.

House of Assembly,
15th August, 1906.

RAPPORT

VAN HET

GEKOZEN COMITÉ, aangesteld op lastgeving van de Wetgevende Vergadering, gedateerd den 26sten Juni 1906, om te overwegen en te rapporteeren over het onderwerp van de herroeping van zekere gedeelten van de Wet op Besmettelijke Ziekten, en ook over de kwestie van het verhoogen van den ouderdom van toestemming: het Comité de macht te hebben om getuigenis af te nemen en om papieren te vragen, en te bestaan uit de heeren THERON, ANDERSON, HELLIER, T. SEARLE, WOOD, Dr. HEWAT en Dr. DE JAGER.

Uw Comité, getuigenis afgenomen en de aan hen onderworpen zaak overwogen hebbende, hebben de eer als volgt te rapporteeren:—

(I) Petitionarissen voor de herroeping van het eerste gedeelte van de Wet op Besmettelijke Ziekten hebben het volgende tegen de Wet in te brengen:—

(a) Het verlagende en vernederende effect op vrouwen die onder de bepalingen van deze Wet onderzocht worden.

(b) Dat de Wet prostitutie erkent en op die wijze wettigt.

(c) Dat door het geven van een valschen denkbeeld van securiteit aan de gemoederen van mannen, de Wet inderdaad aanmoediging geeft aan de slechten.

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- (d) Dat de twee seksen ongelijk behandeld worden.
- (e) Dat de Wet aan hoeren geene aanmoediging geeft om zich te hervormen.
- (f) Dat de Wet vele hoeren terughoudt van zich vrijwillig te laten onderzoeken, omdat zij er tegen zijn als zoodanig te worden geregistreerd, ter wille van de bezwaren om hare namen verwijderd te krijgen van de lijst, en de schande die ermede verbonden is.

De ingewonnen getuigenis toonde aan, dat de Wet er enkelen terughoudt van zich vrijwillig aan onderzoek en behandeling te onderwerpen, dewijl het eenvoudige feit dat zij gebruik gemaakt hebben van de bepalingen van de Wet ter Voorkoming van Besmettelijke Ziekten, als getuigenis tegen haar gebruikt worden kan onder de Wet op Zedelijkheid.

- (2) Uw Comité bevindt dat er twee Wetten zijn, die betrekking hebben op prostitutie, hoerenhuizen, enz., n.l. :—De Wet ter Voorkoming van Besmettelijke Ziekten, No. 39 van 1885, en wat gewoonlijk genoemd wordt de Wet op Zedelijkheid (No. 36 van 1902). Eerstgenoemde Wet is in twee deelen verdeeld : Deel 1 is op het oogenblik slechts in acht centrums van kracht, n.l. :—Kaapstad, Wijnberg, Simonsstad, Oost Londen, Port Elizabeth, Uitenhage, King William's Town en Umtata. Deel 2 is in het algemeen van toepassing op de rest van de Kolonie.
- (3) Wat betreft het tweede deel van de Wet ter Voorkoming van Besmettelijke Ziekten, zijn er geene klachten geweest over de werking ervan, en uw Comité is van oordeel dat er geene noodzaak is om dat gedeelte te wijzigen, behalve in zoo verre dat de Resi-

dent Magistraat macht zal ontvangen om op behoorlijke navraag eenigen Syphilis patiënt naar een Hospitaal te verwijzen en aldaar aan te houden om behandeld te worden, die volgens zijn oordeel gevaarlijk is voor anderen, en dat de 38ste Clausule aldus zal worden geëmendeerd dat er eene boete zal worden ingesteld voor het geven van valsche informatie aan den Magistraat als zijnde onder behandeling van een privaten geneesheer. Met het oog op het erge heerschen van Syphilis door de geheele Kolonie en in het bijzonder onder de gekleurde bevolking, drukt het Comité zijn spijt uit over den maatregel door het Gouvernement genomen in het sluiten van vele van de Besmettelijke Ziekten Hospitalen in plattelands distrikten; zij zijn van oordeel dat voorziening van dezen aard onontbeerlijk is om het zich verspreiden van de ziekte tegen te gaan.

- (4) Uw Comité bevindt dat naar het oordeel van al de ondervraagde getuigen de Wet op Zedelijkheid van 1902 in tegenspraak is met de Wet op Besmettelijke Ziekten van 1885, in zoo verre dat terwijl eerstgenoemde hoerenhuizen verbiedt en zich de onderdrukking van prostitutie ten doel stelt, laatstgenoemde Wet een onderzoek en Hospitaal behandeling van hoeren verschaft met het doel om de verspreiding tegen te gaan van ziekten die uit deze ondeugd ontstaan. Daar er boek gehouden wordt van de gevallen, die onderzocht en behandeld worden, heeft zich ongelukkigwijze in het gemoed van sommigen een indruk vastgezet, dat de Wet op Besmettelijke Ziekten de ondeugd zelve regelt. Indien er echter voorziening gemaakt wordt in de Wet ter Voorkoming van Besmettelijke Ziekten de

uitwerking waarvan zal zijn dat niets onder die Wet gedaan (Wet op Besmettelijke Ziekten), noch ook eenige informatie onder de bepalingen ervan gegeven, eenig persoon zal blootstellen aan vervolging onder de Wet op Zedelijkheid, zullen de tegenwerpingen, welke opgebracht zijn als dienende Deel I. van de Wet ter Voorkoming van Besmettelijke Ziekten om degenen terug te houden die men door hare bepalingen zocht te bevoordeelen, uit vrees van vervolging onder de Wet op Zedelijkheid, wegvallen.

- (5) De opinie heerscht algemeen dat de Zedelijkheids Wet van 1902 heel was goeds gedaan heeft, in zoo verre dat zij het aantal Europeesche hoeren heeft verminderd, dat zij de straten van Kaapstad over het algemeen gezuiverd heeft van slechte karakters, en dat zij op opvallende wijze hoerenhuizen heeft onderdrukt en de meeste aanbrengrers, koppelaars en menschen die op prostitutie leven heeft opgeruimd.

Er wordt echter ook toegegeven, dat er door de werking van deze Wet eenige hoeren naar verborgen plekken gedreven zijn, en dat terwijl een groot aantal hoeren, meestal van de gekleurde klassen en erg door de ziekte besmet, nu hun bedrijf op open velden, aan den kant van den berg, enz., voortzetten, er anderen in dienst gegaan zijn of afwisselen tusschen dienst en prostitutie. Er wordt toegegeven dat het zoo goed als onmogelijk is om deze vrouwen onder de bewerking van hetzij de Wet ter Voorkoming van Besmettelijke Ziekten of de Zedelijkheid Wet te brengen.

- (6) Bij de uitvoering van de Wet ter Voorkoming van Besmettelijke Ziekten is het van nut bevonden door de Beambten om

leeken-inspekteurs in dienst te nemen. Uw Comité wenscht den raad te geven om de Wet ter Voorkoming van Besmettelijke Ziekten alzoo te emendeeren dat er voorziening zal gemaakt worden voor een Administrateur en leeken inspekteurs. De Administrateur verantwoordelijk te zijn voor de behoorlijke en rechtvaardige uitvoering van de Wet, en al de Hospitalen voor Besmettelijke Ziekten te inspekteeren of te laten inspekteeren en navraag te doen aangaande de wijze waarop de plichten van de Medische Beambten en leeken-inspecteurs en anderen volbracht worden. De Administrateur behoort te zijn de Medische Gezondheids Beambte voor de Kolonie, dewelke jaarlijks aan het Parlement rapporteeren zal aangaande de werking van de Wet. Indien dit gedaan wordt, en de Zedelijkheids Wet door de politie autoriteiten wordt toegepast tot onderdrukking van eenige nieuwe uitbreking van het kwaad, dat eenige jaren geleden tot zulk eene schandelijke hoogte werd opgevoerd, gevoelt uw Comité zich overtuigd dat de Wet ter Voorkoming van Besmettelijke Ziekten minder wrijving zal veroorzaken en eene merkbare afname bewerken van venerische ziekten, niet alleen onder de slechte karakters van de maatschappij, maar eveneens veel doen ter voorkoming van de ernstige verspreiding van syphilis onder de onschuldigen en respektabelen, die op verschillende wijzen bij ongeluk door bedienden worden besmet.

- 7 Uw Comité heeft geene getuigenis genomen van andere centruns dan het Kaapsche Schiereiland met uitzondering van de getuigenis van den Medischen Gezondheids Beambte voor de Kolonie en de Rapporten van sommigen van de Distrikts Dokters

- (aangehecht). Uw Comité moet in sterke bewoordingen spreken over de ernstige verspreiding van syphilis door de geheele Kolonie, en de noodzakelijkheid van Deel 1 van de Wet ter Voorkoming van Besmettelijke Ziekten in mijn-areas als Kimberley, garnizoenssteden als Middelburg, en ook op plaatsen waar er groote verzamelingen zijn van ongetrouwde arbeiders, te proclameren.
- (8) De Wet behoort verder gemendeerd te worden om erin te voorzien dat indien eenig persoon, wetende dat hij of zij behept is met eene Besmettelijke Ziekte bij wijze van verboden omgang zoodanige ziekte op een anderen persoon zal overdragen, hij of zij schuldig zal staan aan overtreding van sectie 33 van de Wet ter Voorkoming van Besmettelijke Ziekten, en bij schuldverklaring voor den Resident Magistraat van het District gestraft zal kunnen worden als daarin voorzien.
- (9) Uw Comité voelt zich verplicht, het Huis met ernst te herinneren aan het vreeselijke woenen van syphilis, de verspreiding waarvan, aangeholpen door gekleurde bedienden en door degenen die afwisselen tusschen prostitutie en dienst, een hoogst ernstigen staat van zaken te voorschijn heeft geroepen, die onmiddellijk de aandacht van den Staat vereischt.
- (10) Met betrekking tot sub-sectie (e) van paragraaf 1, wenscht uw Comité te wijzen op het goede werk dat gedaan wordt door de Vereenigen wier vertegenwoordigers getuigenis gegeven hebben voor het Comité, en aan te bevelen dat deze Vereenigen en andere die dergelijk werk doen, alle aanmoediging van Staatswege zullen ontvangen.
- (11) Wat den ouderdom van toestemming aangaat, is het oordeel eenstemming dat 13

jaren als ouderdom te jong is. Uw Comité is van gevoelen dat de ouderdom van toetsing behoorde opgebracht te worden tot 16 jaren.

THOS. P. THERON,
Voorzitter.

Comité Kamers,
Wetgevende Vergadering,
15 Augustus 1906.

MINDERHEIDS RAPPORT.

De volgende leden van het Comité kunnen voor het tegenwoordige geen oordeel uitspreken over de kwestie van het aanhouden of herroepen van Deel I van de Wet op Besmettelijke Ziekten, en in zoo verre het rapport de stelling inneemt dat het behouden van Deel I van de Wet op Besmettelijke Ziekten wenschelijk is, spreken zij hiermede hun verschil van meening uit.

THOS. P. THERON,
J. G. HELLIER.

Comité Kamers,
Wetgevende Vergadering,
15 Augustus, 1906.

TWEEDE MINDERHEIDS RAPPORT.

Terwijl ik het ten volle eens ben met paragrafen een, twee, drie, vijf, acht, negen, tien en elf van het Rapport en veel in de andere secties, gevoel ik geene weifeling om de herroeping aan te bevelen van dat gedeelte van Deel I van de Wet op Besmet-

telijke Ziekten, dat het gedwongen onderzoek van hoeren noodzakelijk maakt. Ik geloof dat dit Deel van de Wet bijna volkomen in deszelfs doeleinden is te kort geschoten en dat het de aanwending van meer doeltreffende middelen terughoudt, gelijk die in het rapport zijn aanbevolen, en de uitbreiding van de vrijwillige behandeling door middel van vrije apotheken enz. van alle personen die de ziekte hebben, genomen wordende als de ziekte te bestrijden terwijl het tegenstrijdig is met den zedelijken zin van de Christelijke samenleving. Ook toont de getuigenis naar mijn oordeel duidelijk aan, dat deze wijze van het behandelen van de ondeugd en de ziekte die eruit voorkomt, in andere landen niet gelukt is.

THOS. SEARLE.

Comité Kamers,
Wetgevende Vergadering,
15 Augustus, 1906.

PROCEEDINGS OF COMMITTEE.

PROCEEDINGS OF THE SELECT COMMITTEE, appointed by Order of the House of Assembly, dated the 26th June, 1906, to consider and report on the subject of the repeal of certain parts of the Contagious Diseases Act and also on the question of raising the age of consent; the Committee to have power to take evidence and call for papers and to consist of Messrs. THERON, ANDERSON, HELLIER, T. SEARLE, WOOD, Dr. HEWAT, and Dr. DE JAGER.

Thursday, 28th June, 1906.

PRESENT :

Mr. Theron.	|	Mr. T. Searle.
Mr. Anderson.	|	Mr. Wood.
Mr. Hellier.	|	

Clerk read Order of the House, dated the 26th June, 1906, appointing the Committee.

Resolved : That Mr Theron be Chairman.

Clerk laid upon the Table petitions Nos. 74, 81, 107, 112, 121, 123, 124, 137, 140, 175, 191, 194, 203, 219, 220, 221, 236, and 241, presented to the House, relating to the raising of the age of consent for girls; and petitions Nos. 72, 106, 120, 142, 149, 179, 226, 235, 247, presented to the House, relating to the repeal of the Contagious Diseases Act (Appendix A.).

The Committee deliberated and adjourned until Tuesday, at 10 a.m.

Tuesday, 3rd July, 1906.

PRESENT :

Mr. ANDERSON (Acting Chairman).		
Mr. Hellier.	|	Mr. Wood.
Mr. T. Searle.	|	Dr. de Jager.

In the absence of the Chairman,

Resolved : That Mr. Anderson take the Chair.

Clerk read Order of the House, date the 29th ultimo, appointing Dr. Hewat and Dr. de Jager as members of the Committee.

Clerk read a further Order, dated the 29th ultimo, referring to the Committee the Report and evidence of the Select Committee on the Contagious Diseases Act, appointed in 1899.

Clerk laid copies of the Report (A.31—'99) upon the Table.

Clerk laid the manuscript evidence upon the Table.

The Committee deliberated and adjourned until Friday, at 10 a.m.

Friday, 6th July, 1906.

PRESENT :

Mr. THERON (Chairman).

Mr. Anderson.	|	Mr. Wood.
Mr. T. Searle.	|	Dr. de Jager.

The Committee deliberated and adjourned until Monday, at 10 a.m.

Monday, 9th July, 1906.

PRESENT :

Mr. THERON (Chairman).

Mr. Anderson.	|	Mr. Wood.
Mr. Hellier.	|	Dr. de Jager.

Dr. Alfred Jasper Anderson, Medical Officer of Health for the City of Cape Town, Mrs. Lizzy Maxfield, Staff Captain, Salvation Army, and Inspector Richard Keast, Lay Inspector under Contagious Diseases Prevention Act, were examined.

The Committee deliberated and adjourned until Friday, at 10 a.m.

Friday, 13th July, 1906.

PRESENT :

Mr. THERON (Chairman).

Mr. Anderson.	|	Mr. Wood.
Mr. Hellier.	|	Dr. Hewat.
Mr. T. Searle.	|	Dr. de Jager.

Dr. Henry Clarke, J.P., District Surgeon, Simonstown, and Dr. Alfred John Gregory, Medical Officer of Health for the Colony, were examined.

The Committee deliberated and adjourned until Monday at 10 a.m.

Monday, 16th July, 1906.

PRESENT :

Mr. THERON (Chairman).

Mr. Anderson.	|	Mr. Wood.
Mr. T. Searle.	|	Dr. de Jager.

Dr. Harold Augustus Engelbach, M.B., Medical Officer, Lock Hospital, Cape Town, was examined and put in :

- (1) Table showing the working of the C.D. Act in Cape Town from the year 1900 to 1905, and for the half-year from 1st January, 1906, to 30th June, 1906.

- (2) Form for voluntary submission to examination under the C.D. Act.
 (3) Notice by Medical Inspector to females of times, etc., of examination.

The Chairman read and laid upon the Table a letter, signed by Mrs. Helen Davison, Superintendent Purity work for the Women's Christian Temperance Union and others, relative to the abolition of the Contagious Diseases Act and the raising of the age of consent.

The Committee deliberated and adjourned until Friday, at 10 a.m.

Friday, 20th July, 1906.

PRESENT :

Mr. THERON (Chairman).

Mr. Anderson.	|	Mr. Wood.
Mr. Hellier.	|	Dr. de Jager.
Mr. T. Searle.	|	Dr. Hewat.

Clerk read Order of the House, dated the 19th instant, referring to the Committee the petition presented to the House on the 4th instant from E. Taylor and others, of Wellington.

Clerk laid the petition upon the table.

Mrs. Helen Davison, representing the Purity Association and the Women's Christian Temperance Union; Mrs. Mary King, Matron of the Lock Hospital; and Mr. R. G. Ross, Agent for the Cape Town and Suburban Social Reform Association, were examined.

The Committee deliberated and adjourned until Tuesday, at 10 a.m.

Tuesday, 24th July, 1906.

PRESENT :

Mr. THERON (Chairman).

Mr. Hellier.	|	Mr. Wood.
Dr. de Jager.	|	Mr. Anderson.

Clerk laid upon the Table a letter, dated the 23rd July, 1906, from Medical Officer in Charge of Troops, Cape Town, giving report of number of men suffering from venereal diseases during the month of June, 1906.

The Committee deliberated and adjourned until to-morrow, at 10 a.m.

Wednesday, 25th July, 1906.

PRESENT :

Mr. THERON (Chairman).

Mr. Hellier.	Mr. Wood.
Dr. de Jager.	Mr. Anderson.

Clerk read and laid upon the Table a letter, dated the 23rd instant, from the Consul General for Germany, forwarding information as to the legislation of the German Empire with regard to the prevention of the spread of contagious venereal diseases.

The Committee deliberated and adjourned until Friday at 10 a.m.

Friday, 27th July, 1906.

PRESENT :

Mr. THERON (Chairman).

Mr. Hellier.	Mr. Wood.
Dr. de Jager.	Mr. Anderson.
Mr. T. Searle.	

The Reverend Dr. John James McClure, D.D., Minister of the Gardens Presbyterian Church, Cape Town, was examined, and put in :—

- (1) Copy of resolutions adopted by the Cape Town and District Social Reform Association.
- (2) Letters from Dr. A. Simpson Wells, of Cape Town, on the subject of the C. D. Act.

The Chairman laid on the Table memorandum by Mr. R. G. Ross, on the following subjects :—

- (1) The White Slave Traffic.
- (2) Procurement of Children for Solicitation.
- (3) Contamination of Children.

The Committee deliberated and adjourned until Monday at 11.30 a.m.

Monday, 30th July, 1906.

PRESENT :

Mr. THERON (Chairman).

Mr. Hellier.	Mr. Wood.
Dr. de Jager.	Mr. Anderson.
Mr. T. Searle.	

Lieut.-Colonel Heffernan, R.A.M.C., in charge of the Military Hospital, Wynberg, was examined, and put in :

Return of Cases of Venereal Diseases admitted to Wynberg Hospital during 1905.

Resolved that questions 890, 891 and 892 in the evidence given by Mr. R. J. Ross on the 20th instant be deleted.

The Committee deliberated and adjourned until Wednesday at 10 a.m.

Wednesday 1st August, 1906.

PRESENT :

Mr. THERON (Chairman).

Mr. Hellier	|	Mr. Wood.
Mr. T. Searle.	|	Dr. Hewat.
	|	Mr. Anderson.

Dr. Robert Forsyth, M.B., was examined.

The Chairman stated that Mr. Speaker had ruled that the resolution passed by the Committee at its last meeting in reference to the deletion of certain portions of Mr. R. G. Ross's evidence was *ultra vires*.

The Committee deliberated and adjourned until Thursday at 12 noon.

Thursday, 2nd August, 1906.

PRESENT :

Mr. THERON (Chairman).

Mr. Hellier.	|	Mr. Wood.
Dr. de Jager.	|	Mr. Anderson.
Mr. T. Searle.	|	

Mr. Robert George Ross, Agent for the Cape Town and Suburban Social Reform Association, was further examined.

The Committee deliberated and adjourned until Tuesday, at 10 a.m.

Tuesday, 7th August, 1906.

PRESENT :

Mr. THERON (Chairman.)

Mr. Hellier.	|	Mr. Wood
Dr. de Jager.	|	Mr. Anderson.
Mr. T. Searle.	|	Dr. Hewat.

Clerk read and laid upon the Table a letter, dated the 3rd instant, from the Medical Officer of Health for the Colony, forwarding information with regard to the working of the Contagious Diseases Act (Appendix B.)

The Committee deliberated.

Resolved: That a sub-committee be appointed consisting of Dr. de Jager and Messrs. Anderson and T. Searle, to frame and submit a Draft Report.

The Committee deliberated and adjourned until Thursday, at 10.30 a.m.

Thursday, 9th August, 1906.

PRESENT :

Mr. THERON (Chairman).

Mr. Anderson.	|	Mr. Wood.
Mr. Hellier.	|	Dr. Hewat.
Mr. T. Searle.	|	Dr. de Jager.

The Committee deliberated and adjourned until to-morrow at 11.30 a.m.

Friday, 10th August, 1906.

PRESENT :

Mr. THERON (Chairman).

Mr. Hellier.		Mr. Wood.
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The Committee deliberated and adjourned until Monday, at 10 a.m.

Monday, 13th August, 1906.

PRESENT :

Mr. THERON (Chairman).

Dr. de Jager.	|	Mr. Searle.
Mr. Hellier.	|	Mr. Wood.
Mr. Anderson.	|	

The Chairman submitted a Draft Report.

Resolved: That the Draft Report be printed and distributed amongst the members of the Committee.

The Committee deliberated and adjourned until Wednesday, at 10 a.m.

Wednesday, 15th August, 1906.

PRESENT :

MR. THERON (Chairman).

Mr. Anderson.
M. Hellier.
Mr. T. Searle.

Mr. Wood.
Dr. de Jager.

The Chairman submitted draft Report as follows :—

- (1) During recent years, many numerously signed petitions have been presented to the House praying for the repeal of Part I of the Contagious Diseases Act; but it does not appear to your Committee that any action has been taken on these Petitions by the House until the present Session, when a larger number than usual of these petitions having been received, the House ordered an inquiry which, with some reluctance, your Committee undertook.
- (2) Evidence has been given by some of the Petitioners in person; but the most trustworthy evidence, as was naturally to be anticipated, has been obtained from medical practitioners, especially the Medical Officer of Health for the Colony, and your Committee are necessitated to report that, for the purpose of checking the spread of contagious disease, as well as for the suppression of prostitution, both the Contagious Diseases Act of 1885 and the Morality Act of 1902 will require amendment.
- (3) The medical witnesses greatly favour the continuance of the whole of Act 39 of 1885, believing as they do that it gives medical practitioners more scope and power in dealing with contagious diseases, unhappily still largely prevalent in seaports and in the country generally, and diffused through illicit intercourse on the part of persons who cannot be reached by the Act. Your Committee find that other witnesses who have considered the question believe that the Act has a restraining effect on the spread of disease, though such witnesses are unable to say whether they attribute this to the operation of the whole Act or to any particular part of it. Here, however, your Committee believe that, to Part II of the Act, which is general in its operation, whatever of beneficial effect can be claimed for the Act, is to be attributed. And your Committee are the more inclined to this opinion for the reason that it is undeniable that only a limited number of prostitutes are submitted to periodical examination, whether such examination be voluntary or under compulsion; while your Com-

mittee find at the same time that the difficulties of bringing any considerably larger number, whether of the common prostitute class or of the illicit intercourse practising class, within the sphere of compulsory examination law are insuperable.

- (4) This being so, it seems to be as impossible to get away from the opinion that much of the benefit expected from the Act, in the prevention of disease not less than in the suppression of vice, has failed to be realized; under which circumstances it is, perhaps not to be wondered at if associations of women who form the bulk of the Petitioners should be found agitating for the repeal of a law, which, while being ineffectual in so far as its main object is concerned, is regarded by them with distrust and abhorrence. There is also much which deserves the consideration of the House in the contention of the Petitioners that, by the continuance of Part I. of the Act, the State indirectly legalizes vice by the provision which it makes for enabling men to indulge in vice, while running little risk of contagion: for it can scarcely be doubted that the dread of disease, following upon illicit intercourse, has a restraining effect on immoral habits.
- (5) It certainly appears from the evidence that the provisions of the Morality Act of 1902 have had some effect in lessening the frequency of soliciting in the streets. In this way, European prostitution is, perhaps less in evidence, though whether the number of women actually engaged therein is less than it was, your Committee are unable to say from the evidence. If there is any doubt on this point, there appears to be none that the number of low-classed coloured prostitutes has much increased, especially in this capital; and that, driven as both white and coloured women have been from the streets and from the brothels, immorality has betaken itself to hiding places out of the reach of the law and of the police. Such surreptitious prostitution has its own especial danger by the reception of a number of these women into private houses as servants, whereby the health of the inmates often suffers.
- (6) If the compulsory examination of prostitutes is a source of grievous offence to many in the land, your Committee are of opinion that every possible provision should be made for the medical treatment of those who contract specific diseases. The treatment of these diseases in the case of the poor is, your Committee find very inadequately provided for in our public hospitals. There is an ineradicable antipathy to all lock hospitals on the part both of the general public and of the prostitute class, and your Committee would strongly recommend that inquiry should be instituted with a view to seeing how far the proper treatment of such

cases is carried out, and of arriving at a knowledge of what may be necessary to supplement it in these general hospitals. The necessity of other administrative changes may in this way also be brought to light.

- (7) As far as the question of the age of consent is concerned, your Committee find that there is a very general agreement that it can be raised to 16 years.

The Committee proceeded to consider the above Draft Report. Paragraphs One to Seven put and negatived.

Dr. de Jager moved: That the following be Paragraphs in lieu thereof :—

- (1) Petitioners for the repeal of the first part of the Contagious Diseases Act advance the following against the Act :—
- (a) The degrading and humiliating effect upon women examined under the provisions of this Act.
 - (b) That the Act recognises and therefore legalises prostitution.
 - (c) That by giving a false sense of security in the minds of men, it actually encourages the vicious.
 - (d) That the two sexes are unequally dealt with.
 - (e) It does not encourage prostitutes to reform.
 - (f) That it deters many prostitutes from voluntary examination because they object to being registered as such, owing to the difficulty of getting their names removed from the list and the stigma attached thereto.

Evidence went to show that it deters some from a voluntary submission to examination and to treatment because the mere fact of their having taken advantage of the provisions of the Contagious Diseases Prevention Act can be used as evidence against them under the Morality Act.

- (2) Your Committee find that there are two Acts dealing with prostitution brothels, etc., viz. :—The Contagious Disease Prevention Act No. 39 of 1885 and what is commonly known as the Morality Act (No. 36 of 1902). The former Act is divided into two parts: Part I. is at present in force only in eight centres, viz. : Cape Town, Wynberg, Simon's Town, East London, Port Elizabeth, Uitenhage, King William's Town and Umtata. Part II. applies generally to the rest of the Colony.
- (3) With regard to the second part of the Contagious Diseases Prevention Act there has been no complaint as to its working and your Committee are of opinion that there is no need to alter it except in so far as to give power to the Resident Magistrate after due inquiry to order the consigning to and the detention in hospital for treatment of any

syphilitic who is, in his opinion, a danger to others, and that clause 38 should be amended so as to provide a penalty for giving wrong information to the magistrate as being under the treatment of a private medical practitioner. In view of the great prevalence of syphilis throughout the Colony, especially amongst the coloured population, your Committee regret the action of the Government in closing many of the Contagious Diseases Hospitals in country districts; they are of opinion that some provision of this kind is essential in dealing with the spread of the disease.

(4) Your Committee find that the Morality Act of 1902 is, in the opinion of all witnesses examined, in conflict with the Contagious Diseases Act of 1885, in so far, that while the former prohibits brothels and aims at the suppression of prostitution, the latter Act provides for examination and the hospital treatment of prostitutes with the object of preventing the spread of diseases resulting from vice. As a record is kept of cases examined and treated, an impression has unfortunately been created in the minds of some that the Contagious Diseases Act regulates the vice itself. If, however, provision is made in the Contagious Diseases Prevention Act to the effect that nothing done under it (Contagious Diseases Prevention Act), nor any information given under its provisions, shall render any person liable to proceedings under the Morality Act, the objections raised that Part I. of the Contagious Diseases Prevention Act serves as a deterrent on those who are sought to be beneficially served by its provisions out of fear of prosecution under the "Morality" Act will be done away with.

(5) There is a consensus of opinion that a great deal of good has been done by the "Morality" Act of 1902, in so far that it has reduced the number of European prostitutes, that it has cleared the streets of Cape Town generally of the vicious, and that it has markedly suppressed brothels and largely done away with procurators, pimps, and those who live on the proceeds of prostitution.

It is, however, also admitted that by the operation of this Act some prostitutes have been driven into seclusion and that while a large number of prostitutes, mostly of the coloured class and extensively diseased, now carry on their trade on open fields, the mountain side, etc., others have gone into service, or migrate between service and prostitution. It is admitted that it is practically impossible to get these women under the operations of either the Contagious Diseases Prevention Act or the "Morality" Act.

(6) In carrying out the Contagious Diseases Prevention Act it has been found expedient by the officials to employ lay-inspectors.

Your Committee would advise that the Contagious Diseases Prevention Act be so amended as to provide for an administrator and lay-inspectors. The Administrator to be responsible for the proper and just carrying out of the Act, and to inspect or cause to be inspected all contagious diseases hospitals, and to enquire into the manner in which the duties of the medical officers and lay-inspectors and others are performed. The Administrator should be the Medical Officer of Health for the Colony, who shall report annually to Parliament on the working of the Act. If this be done; and the "Morality" Act applied by the Police authorities to deal with any recrudescence of the evil, which reached such scandalous conditions some years ago, your Committee feel convinced that the Contagious Diseases Prevention Act will create less irritation and produce an appreciable diminution in venereal diseases, not only among the vicious class of the communities, but also go a long way in preventing the serious spread of syphilis among the innocent and respectable, who are in divers ways accidentally infected by servants, etc.

- (7) Your Committee have taken no evidence from other centres than the Cape Peninsula excepting the evidence of the Medical Officer of Health for the Colony and the reports of some of the District Surgeons (appended). Your Committee must strongly impress the serious spread of syphilis throughout the Colony and the necessity for proclaiming Part I. of the Contagious Diseases Prevention Act in mining areas, such as Kimberley, garrison towns such as Middelburg and also in places where there are large collections of unmarried labourers.
- (8) The Act should be further amended so as to provide that if any person, knowing that he or she is affected with a contagious disease, shall by means of illicit intercourse, communicate such to another person, he or she shall be guilty of a contravention of Section 33 of the Contagious Diseases Prevention Act and shall be liable on conviction before the Resident Magistrate of the District, to the punishment therein provided.
- (9) Your Committee feel in duty bound seriously to remind the House of the terrible ravages of syphilis, the spread of which helped on by coloured servants and by those of them who migrate between prostitution and service, constitute a most serious state of matters, which should engage the immediate attention of the State.
- (10) With regard to sub-section (*e*) of paragraph 1. Your Committee wish to draw attention to the good work being done by the Societies whose representatives have given

evidence before the Committee and recommend that these Societies and others doing similar work should receive every encouragement from the State.

- (11) With regard to the age of consent there is unanimous opinion that 13 years is too low an age. Your Committee are of opinion that the age of consent should be raised to 16 years.

Upon which the Committee divided.

Ayes, 5.	Noes, 1
The Chairman.	Mr. T. Searle.
Mr. Anderson.	
Dr. de Jager.	
Mr. Hellier.	
Mr. Wood.	

The motion accordingly agreed to.

Mr. Hellier moved to add at the end :—

“The following members of your Committee are not prepared at present to pronounce an opinion upon the question of the retention or repeal of Part I. of the Contagious Diseases Act as far as the position is assumed in the report, that the retention of Part I. of the Contagious Diseases Act is desirable, they hereby record their dissent.”

Upon which the Committee divided.

Ayes, 2.	Noes, 4.
The Chairman.	Mr. Wood.
Mr. Hellier.	Mr. Anderson.
	Dr. de Jager.
	Mr. T. Searle.

The motion accordingly negatived.

Resolved : That the Chairman report accordingly.

The Chairman and Messrs. Hellier and T. Searle signified their intention of submitting minority reports.

MINUTES OF EVIDENCE.

SELECT COMMITTEE ON CONTAGIOUS DISEASES ACT.

Monday, 9th July, 1906.

PRESENT :

Mr. THERON (Chairman).

Mr. Anderson.

Mr. Wood.

Mr. Hellier.

Dr. de Jager.

Dr. Alfred Jasper Anderson, M.A., M.B., Ph.D.,
examined.

1. *Chairman.*] You are the Medical Officer of Health for the City of Cape Town?—Yes.

2. Do you know the object of this Committee?—No. I do not.

3. We have certain petitions before us, which have been referred to this Committee with two definite objects. The first is for the repeal of the first part of the Contagious Diseases Act, No. 35 of 1885; and the second is with regard to the raising of the age of consent. We should like to have your opinion as far as possible upon these two subjects, which seem to these applicants to be very important. What is your experience in your practice with regard to the first part of this Act—the Contagious Diseases Act?—I may say I cannot help you at all in that respect. I have nothing to do with the administration of Part I. of the Act at all, and I am not in general practice, but devote all my time to the duties of the office of Medical Officer of Health for the City of Cape Town. I also attend to patients who are taken to the Smallpox

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Hospital, and to patients who are taken to the City Hospital, which is intended for infectious diseases such as scarlet fever and diphtheria. Therefore, practically, whatever I say about the matter will be more or less an opinion derived from evidence from other sources.

4. So really you have nothing to do with the first part of that Act?—Nothing whatever.

5. You never come in contact with such people?—It is very exceptional for me to come in contact with people who are prostitutes and who earn their living as prostitutes, but occasionally one gets a very bad case of syphilis into the Smallpox Hospital, which has been mistaken for smallpox; and then that is transferred to the Resident Magistrate to deal with.

6. Do you think, so far as your experience in town here goes, that there is still a good deal of prostitution going on?—Yes, so far as I can judge, in certain districts there seem to be a number of prostitutes. I am speaking more of the coloured people, and I have no knowledge whatever of anything else. Of course, when I came here in 1901, when the war was on, the number of brothels in the town was something enormous. That refers to white women and so on; but I do not think that is the case at the present time.

7. Do you think that the Municipal regulations, which, I believe, are very stringent now, have had something to do with the decreasing of that kind of evil?—I do not think so. The decrease is due, of course, to the troops having left; that is what it is due to chiefly, I think; and to the Immorality Act of 1902, which has driven it below the surface.

8. *Mr. Hellier.*] Below the surface?—Yes.

9. *Chairman.*] Is the Lock Hospital still in existence?—Yes, there is a Lock Hospital here.

10. Who is in charge of that?—I cannot tell you who is attending to that now. I do not know whether it is Dr. Ross, or whether someone else has been appointed.

11. So far as your work goes now, you really do not come in contact with these people?—No. Of course, we sometimes get complaints. For example, people will complain about their neighbours keeping a brothel or disorderly house. That is passed on to the police to deal with; it does not concern me at all.

12. You know the first part of the Contagious Diseases Act?—Yes, I am acquainted with the Act.

13. From your observation, would you agree with these ladies if they applied for the suspension of that Act?—My own opinion of that is that although I am personally very averse to any Act of this description, still I do not think in this Colony you could venture very well the experiment of abrogating it. My reason for that statement is this: it is the class of population you have to do with—the coloured population. If you take the statistics of the English Army, with regard to regiments stationed in England and those stationed in India, as to the effect of the repeal of the Contagious Diseases Act, you will notice distinctly that after the repeal of the Act in England there was an increase, but then that increase has gradually decreased until now the proportion of men sick from venereal diseases is perhaps slightly less than it was before the Act was repealed.

14. *Mr. Hellier.*] That is in England?—Yes; but in India it has had the contrary effect. It was decreased very much while the Act was in force, but when the Act was repealed it increased and has continued to increase. It has increased to as much, I think, as 571 per 1,000; out of a total of 1,000, there would be 571 men during the year sick with venereal disease.

15. *Mr. Anderson.*] To what do you attribute the falling off of the cases in England after the repeal of the Act?—I should think it was due to an increased moral tone of the population. By a gradual increase in the moral tone of the community, I should hope to gradually get prostitution done away with, more or less.

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16. But then, as a matter of fact, in those large cities, such as London, as a rule there is open solicitation going on which the law does not deal with?—Yes, it deals with it, but perhaps not so stringently as may be done under the Immorality Act. Solicitation is not allowed in England, and so far as I am aware it is an offence to solicit in the streets.

17. By an Act?—Yes.

18. But, as a matter of fact, is that not very laxly carried out?—Yes.

19. And is it not a fact that solicitation is a very common thing in the streets of London?—I should imagine so from what one sees in the streets, such as Picadilly and the Strand, and from what I have seen when walking about there when I have been in London.

20. You spoke just now of the repeal of the Act in India?—Yes.

21. Was the Act repealed in India?—Yes.

22. But is there not what they call the Cantonment Act in force in India, which is practically the same as the Act for the Prevention of Contagious Diseases?—No. I should say not, although I am not acquainted with the Cantonment Act as to what its provisions are. My statement was based upon the views of certain military authorities on this point—writers on the subject with regard to the repeal of the Act in India—and they certainly have pointed out that fact. And there is one writer, Browning, whose authority I could produce, who makes a very glowing contrast between the effect of the Act being imposed in Cape Town upon the health of the troops as compared with the effect of the repeal of the Act in India. (*Vide* Munson's "Military Hygiene," p. 835.)

23. You say you have nothing to do with the Lock Hospital?—No.

24. You mentioned just now that complaints were sometimes made about a brothel being carried on, and that in such cases the matter would be referred to the police?—Yes.

25. Did you make any investigation of your own, as Municipal Medical Officer, as to whether it was a brothel or not, or did you not go into that? —No: I avoid as much as possible interfering with matters of that sort, because I do not want the people to think that when our inspectors are going round to see that the places are in a sanitary condition and so on, that they are going prying about and spying for other purposes, because if we did that we should soon get very much suspected, and it would interfere very much with our special duties.

26. As a rule your duties are absolutely apart from anything connected with the working of the Act?—Yes.

27. You know there are two Acts at present in force here: the Immorality Act and the Contagious Diseases Act?—Yes.

28. What is the effect of the working of these two Acts, in your opinion?—It seems to me to be absurd to have those two Acts. They are diametrically opposed to one another. The one recognizes the existence of the vice and tries to regulate it. That is the Contagious Diseases Act. The other does not recognize its existence at all.

29. Then you think it is quite impossible for the two Acts to work together in the suppression of this sort of thing?—Yes.

30. What would be your suggestion as to a remedy?—Of course, it all depends how you are going to approach the question. There are two points of view from which it can be approached: the one as to the diminution of immorality, and the other as to the suppression of venereal diseases. Now, I do not think it would do very much good in the direction of the diminution of immorality just by passing an Act of Parliament. I feel that that will have to be a very gradual process. But the diminution of venereal diseases might be attempted in some way by notification, in just the same way as you have notification of infectious

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disease. Both ought to be notified to the authorities to be dealt with, and to see that precautions are adopted.

31. *Chairman.*] Is that not provided in the second part of the Act?—Yes, but it does not go far enough; it is only the District Surgeon who has to notify.

32. *Mr. Anderson.*] You said just now that, in your opinion, the repeal of the Contagious Diseases Act would act prejudicially in regard to the suppression or the diminution of diseases?—Yes, I believe so.

33. You think it would be a bad thing to have it repealed?—Yes, with the class of population we have here I do. That is the point: it is the class of population we have.

34. In your experience as a doctor, have there been any innocent cases brought before you; for instance, cases of syphilis?—You mean a respectable woman being infected?

35. Is it not a fact that some of these women who are diseased like that go out to service; they have the charge, we will say, of young children, and they may kiss these young children. Would that not in time communicate the disease, supposing they themselves were diseased?—Yes. There are many cases of that sort, especially in cases of those who are employed as wet nurses. I have not met with it here, but I have experienced it at Home, when in general practice. For instance, a lady has a baby which she cannot suckle, so the best thing to do is to get a wet nurse. They engage a wet nurse, and she has communicated the disease to the baby, and perhaps to other members of the household. Of course, that is one of the great objections to this Immorality Act. I understand that a number of these girls who were previously prostitutes are now going into service in houses. They sleep out and practice prostitution during the night. In such a way, there is a chance of the disease being brought into the household of respectable people.

36. Is it a fact that many prostitutes while they are carrying on their work of prostitution are also engaged as domestic servants?—I should think it was; but I have no distinct statistics to put before you.

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37. But it is your opinion that it is so?—Yes.

38. Therefore the suppression of the Act would be a distinct danger: that is to say, it would be the means of increasing this risk?—Which Act are you speaking of?

39. I am speaking now of the Contagious Diseases Act. The suppression of this Act would be the means of increasing this danger of coloured prostitutes carrying the disease into private families?—As long as you have the Immorality Act in force I should think it would. Part I. has some influence upon the state of venereal disease, but it only goes part way; it only applies to those who are common prostitutes, who are known to the police, and who practically voluntarily submit to examination—because I think you will find on investigation that there have been no compulsory cases of examination for some years. Therefore, there would be a tendency now for them not to be common prostitutes: they would simply be in domestic service, and there is no control over them whether they have venereal disease or not. So that there would be a likelihood, if you repealed Part I, to increase that.

40. Supposing the Immorality Act was suppressed in certain particulars, and the Contagious Diseases Act was maintained in all its force, that, I gather from you, would be better than the present arrangement of the two Acts working together?—Yes. I cannot see how the two can work together. They are diametrically opposed to one another, and it has practically meant the abrogation of Part I. of the Contagious Diseases Act.

41. One of the effects of the Immorality Act is that prostitutes are prevented from offering themselves for examination because of the danger of the proprietor of the brothel being run in?—Of

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course; if a prostitute goes to be voluntarily examined she has to give her name and address, and she would be afraid that the medical inspector might communicate that to the police. I believe, as a matter of fact, they work independently of one another, but you can understand that the prostitute and the people concerned do not know that, and they are afraid of giving the proprietor of the brothel away.

42. In which case they would be run in under the Immorality Act?—Yes; and, of course, the penalties are extremely severe.

43. You have no recommendation to make to the Committee then as regards the simultaneous working of these two Acts; how to make things better and more efficient?—No, I cannot see how the two Acts can work together. My recommendation would be that the Immorality Act be repealed. It was rather hasty legislation, in my opinion. It was adopted at the fag end of a session, as far as I remember, and it would be far better to repeal it and keep one enactment.

44. The Contagious Diseases Act?—Yes.

45. You would not suggest the repeal of the whole of the Immorality Act?—No; I mean with regard to the brothels.

46. And with regard to the examination?—No.

47. Tell us the clauses then?—The penalties for keeping brothels are provided for in sections 22, 23, and 24. The 27th clause might stand; a householder may lodge a complaint, and you do not want the people in the neighbourhood to be annoyed by having these places next to them. It is one of the most difficult and thorny subjects one could possibly have to deal with.

48. That is exactly what we feel, and we want to get the best medical testimony possible so as to deal with the prayer of the petitioners as presented to Parliament?—If it were not for the coloured population I should be very strongly in favour of repealing Part I. of the Act.

49. *Mr. Hellier.*] As in England?—Yes.

50. *Mr. Anderson.*] That is, the Contagious Diseases Act?—Yes.

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51. You would repeal Part I. of the Contagious Diseases Act were it not for the coloured population?—Yes. And, of course, Part I. only relates to about five towns, does it not? I do not know exactly how many are under it now, but I believe the towns are Cape Town, Port Elizabeth, Grahams-town, Uitenhage and East London.

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52. *Mr. Hellier.*] And Kimberley, I suppose?—No, unless it has been added. A town is added, of course, by Proclamation of the Governor.

53. *Mr. Wood.*] The nature of the petitions put before us only deal with the Contagious Diseases Act; the Immorality Act is not touched upon?—So I understand.

54. And when the repeal of the Contagious Diseases Act took place in England, greater advantages were at the same time offered; that is, kinder treatment was given to these unfortunate people, so that while they received treatment at the hands of the Government there was nothing of a forced nature. Any one of those women who had taken up this calling and who knew that she was diseased could go and receive treatment. Here many of them hide themselves. When Cape Town was so dangerously circumstanced the stringency of your Municipal laws drove them into the country, consequently, while there might have been a decrease in the town there was an increase in the suburbs. Is that not a fact?—I cannot say, but I should think that there is a great deal in that contention.

55. They did not immediately change from their one mode of life into another, but they removed—either from here or elsewhere. That is the evidence that is generally accepted. Do you know that?—No, I do not know that, because I am not acquainted with these people's movements; but I should simply be inclined to believe anybody who said what you have stated.

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56. Then, from what you have said, there is a greater danger to the families where these women are engaged in domestic service. They are not known as common prostitutes, but they are really engaged in that business and they are living in the home, by means of which the whole of the family may become contaminated?—Yes, certainly.

57. You are firmly convinced of that?—Yes.

58. Then, with regard to the ladies who have sent in these petitions, one of their arguments—although the petitions do not set it forth—is this: Why should women have to undergo a treatment which the men who are equally guilty are not subject to? One has a fine, and the other has imprisonment. You know that that is the result? The woman has not the privilege of paying a fine, but the man has?—I did not know that there was a difference in their treatment in this respect.

59. There is?—I do not know any reason why they should not be treated the same.

60. That is one of the contentions of the petitioners: if two persons are guilty, why should they not both come under the same law? If the one may pay a fine, and so be able to carry on his trade, why should the other be subject to punishment without the option of a fine? Therefore they say that it is an unjust Act?—I do not know which section they would come under. Is that section 33, where they are guilty of the offence of communicating the disease from one to another? I thought the argument was this—and it is a strong argument that has always been advanced by the persons who have been so strong with regard to the repeal of the Contagious Diseases Act in England. The argument is that it is unfair, that it is a sort of class treatment—or a sex treatment any way—that the females have to submit to be examined and to all those indignities, whereas the males go free. Then, of course, you see, the woman is practising a calling: that would be the answer to that argument. But I do not remember there

being any difference that you have mentioned. So far as I remember, under Part I. there is nothing whatever referring to males, and I have read it carefully.

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61. They are excluded?—They are excluded from anything, excepting the penalty for harbouring an infected person. Then, if it was a male person, he would be brought up, but he must know that the woman was infected with a contagious disease to be prosecuted.

62. Do you happen to know, Dr. Anderson, if after the repeal of the Act in Natal it was not proved by one of the commanders of the troops that there was less disease amongst the troops than before?—I believe I saw some statement of the sort in a Select Committee of the Legislative Council that sat in 1895.

63. *Mr. Hellier.*] Would you say that since the promulgation of the Immorality Act the number of brothels in Cape Town has decreased, that is the known brothels?—I should say yes; but you can get that from the police, can you not?

64. Your opinion is that they have decreased?—Yes.

65. When you used the phrase “under the surface” just now, I take it that there must be unknown places where prostitution is carried on?—Yes. What I mean is that I do not think you have suddenly altered the morality of the place, and that there is a certain proportion of immorality, though to a perhaps less extent.

66. Then I suppose the brothels were known to the police, and now the unknown places would not be so well known?—That would be correct; and the women would not be so well known either.

67. The women would be known under the one Act, and not so easily traced at the present stage?—The effect has been that there has been a greater amount of soliciting in the streets of Cape Town since the Immorality Act came into force.

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68. Then you would say that, in order to deal with the whole question of prostitution, the Contagious Diseases Act and the Immorality Act should be taken together to be looked at?—Yes. I should say the whole subject wants going into most thoroughly and most carefully.

69. At present they are so antagonistic that it is almost hopeless to effect a betterment?—It means that neither Act is carried out properly—not administered. Part I. of the Contagious Diseases Act is almost in a state of abrogation. There is no compulsion about it. If any woman likes to come to be examined, she is examined I suppose, but that part of the Act is to a very great extent no longer in existence so far as administration is concerned. And then there is another bad effect, through having that Act still in existence, that the administration of the Immorality Act suffers also.

70. *Chairman.*] What would you think of the first part of the petition, where it says: “False witness may be brought to bear upon the innocent and gross insult perpetrated where no vice exists, and that from fear an unprotected woman may be made to yield to the coercive power of a bribed official and be dragged down to an evil life.” Do you think there is anything in that?—Yes, I believe that such cases do exist and may exist; and that is why any Acts of this sort, if they are to be administered, will have to be administered by a higher class of officials than ordinary police constables. Even in England I have known of girls having committed suicide because of this.

71. *Mr. Anderson.*] Have you had any such cases in Cape Town?—No, but there was the notorious Zeeman case in Cape Town. Whether the officer in that case did it for a bribe, or whether it was purely a mistake, I do not know, but it seems to have been a greivous mistake. In an Act like this you must be guarded, because you never know who may be charged; it may be one of our own daughters innocently charged.

72. *Chairman.*] Would you give us some idea about the points raised in this petition from Grahamstown?—To take the first point: “It is more frequently regarded by the impure as a licence for immorality than as a preventative to the spread of disease.” I do not agree with the wording, but I think I know what is meant. By acting as a preventative to the spread of disease it would make the impure more inclined to go in for that sort of thing, because they are protected. That does exist, but, of course, on the other hand, you have to bear in mind that an impure person may go and contract the disease and afterwards give it to innocent people, say to his wife and children, and so on, and carry it elsewhere; so that statement requires to be qualified. “Where disease exists there is often a tendency to hide it for fear of being brought under the operation of this Act.” I do not agree with that; I do not think that would be a fact. “Where disease has been accidentally contracted, the discovery of it to those in authority leads to the persons affected being at once classed with persons of ill-fame and provided for as such by the Act.” I do not know of anything to justify that statement. If the disease has been accidentally contracted, a medical man would have to diagnose it, and I think he would recognize at once that it had been accidentally contracted, because the disease would exist elsewhere than the sexual organs. That is how I take it. The fourth point is, “The Act does not fail to retain for immoral purposes those who by their own fault or misfortune have been unable to prevent their names being placed on the town list.” One knows that the Act does not get at everybody who is indulging in illicit and promiscuous intercourse, but it is such a difficult subject that I should think it would be practically impossible for any Act to be framed so as to get at everybody who is indulging in that sort of thing. “Punishments under this Act are inflicted without fair and

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open trial." I understood under the Act, or so it is implied, that it is for the woman's own benefit that the case is heard *in camera*.

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73. *Mr. Wood.*] Does it not rest with the Magistrate?—Section 34 provides for this matter. It is in the female's own hands whether the case is heard in public or in private, and it is heard in private unless she thinks it should be heard in public. The woman is protected there. We do not want these things to be heard in public unless the woman has some special object in its being so heard. For instance, if she has been grossly libelled and wanted the public to know that she was innocent, then I understand clause 34 to mean that she would be able to have an open trial, where she could be represented by counsel. The next point is: "Where two parties are concerned in an offence, it is usual for only one of them to be dealt with and punished under this Act." That is, the man escapes from any punishment; the man who has intercourse and gives the disease to the woman would escape. I do not see how you are going to get over that unless every man is to be periodically examined to see whether he has the disease or not. "The Act provides that on the first offence the person, who, it may be, has been deceived by another, shall be immediately classed as a prostitute and subject for the rest of her life to frequent surgical examinations, no inducement being offered her to return to a pure and virtuous life." That is a rather exaggerated statement. I should think the person would have to be pretty well known as a prostitute before any one gave information, especially as there is a clause providing for any false information being given. The woman is protected that way. Of course, there is no doubt about it. Lock Hospitals, from what I know, have not been conducted in a spirit and manner perhaps which might lead to the return of a fallen woman who goes there to a "pure and virtuous life," as it is expressed here.

74. *Mr. Anderson.*] You said in the course of your examination that the effect of the Immorality Act was to lessen the number of brothels?—Known brothels.

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75. Do you happen to know whether the inmates of those brothels have proceeded elsewhere to carry on their work?—No, I do not know at all. I have not been able to follow them; I have not tried to follow them.

76. In regard to what you said just now, is it probable that a man suffering from disease would have his desires in reference to a woman?—It is quite correct that a man when he has the disease in an acute form is practically incapable of intercourse. A woman may have the disease and not know that she has got it; and, of course, a woman when she is earning her living by that calling, even if it does cost her a certain amount of pain, I suppose, would submit rather than starve. Then, of course, you must also acknowledge that a man may be still capable of intercourse whilst infectious. He can be infectious and still have intercourse after the acute stage of the disease has passed away.

77. *Mr. Wood.*] Is it not a generally accepted idea amongst these men, when they are in the worst stage of that disease, that if they can have connection with an innocent subject the disease is taken from that individual and given to the innocent woman; they believe that this is a means of cure?—I do not know whether that idea exists in the Colony, but I know it exists largely in England, and that is the cause of a great number of cases of rape of young children. They think that if they can have connection with a virgin it is going to take the disease from them and cure them.

78. That is a generally accepted idea?—Yes, amongst people of that description, principally the labouring classes.

79. *Mr. Hellier.*] You said a man would not be capable of carrying out his desires in those circum-

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stances?—Perhaps that statement ought to have been qualified to some extent, and I should have said that it would vary with the severity of the attack; but I mean to say that as a rule he would not be capable. Then, of course, a man, if he were actuated by a belief like that, would attempt intercourse and submit to the pain for the purpose of being cured. At any rate, I have very little hesitation in saying that I think it is a common idea amongst the labouring classes in England; but whether that belief exists here or not I do not know, because I am devoting myself to special work and have not been mixed up with that sort of thing.

80. *Chairman.*] What is your idea about raising the age of consent, which at present is 13 years of age?—I should say that that is too low.

81. What would you as a medical man advise raising it to as the standard age? The petitions say 18?—Of course, the argument adopted is that amongst the coloured people here the age of puberty is about two years less than it is in England. It is 12, I think, here, and in England 14. I should think, taking everything into consideration, that one ought not to fix it lower than 16 years.

82. Your idea is 16?—Yes. I believe it is 16 in England.

83. *Mr. Hellier.*] I think they are trying for 21 on the Continent and in England; that is, the same age as the legal majority?—Of course, they get married younger, or start living together younger—that is the coloured people—much below 21; but I think 16 would be a suitable age to fix.

84. *Chairman.*] Are you aware that in the warm climate we have here, we have young girls married at 16 and who become mothers before they are 17?—Yes, and that is one of the things I take into consideration. I suppose, even if the age of consent was raised to 16, if the parents were willing for the girl to be married at 15, the Act would not

interfere—but that is another matter entirely. And there is this reason why the age of consent should be raised. Seeing that the sexual organs develop so quickly, I think there ought to be some deterrent to illegitimate intercourse previous to the girl getting to such an age that she could understand the importance of it, and the seriousness of it.

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Mrs. Lizzy Maxfield, examined.

85. *Chairman.*] Do you belong to the Salvation Army?—Yes.

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86. What is your title in that Army?—Staff-captain.

87. Do you know the object of this Committee?—Yes.

88. Do you deal with that class of women that we have in town, called prostitutes?—Yes.

89. Are you aware that there are many in town here?—Of course, I am not now directly in touch with them. Until some few months ago I was matron at our Rescue Home, but since my removal I have not been in such close touch with them as I was previously. Up to then I was in constant touch with them, but I am now working outside the Home, with anything that may occur outside.

90. Had you many in that Home?—We have had a good number.

91. How are they brought to you; how do you come in contact with them?—I used to come in contact with them while at the Rescue Home by visiting the houses and by visiting the Government Hospital and the prisons, and in various ways. And they would be brought to the Home. Sometimes the police would bring us a woman, and sometimes from the surroundings we could see that girls were in danger and we would get them sent to us.

92. Have you thought about the Acts in operation that bring these girls to you or have brought them to your Home?—Yes.

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93. Are you aware that an innocent person was ever brought to you?—I am not quite clear. By “innocent” do you mean that their character was stainless?

94. Yes?—No. Of course, we have had young girls that have been in danger that were practically innocent, but they were brought away from surroundings that threatened them with moral danger. We deal also with preventive cases in our Homes.

95. There was nobody ever forced into your Home who you thought was innocent?—We never have anyone forced in. They all come of their own free will. Of course, influence is brought to bear on them, but no one is forced to come into our Homes or to remain there against her will. Our doors are open, and if a woman wishes to go she is free to go.

96. Do you know of the petitions that have been got up for the repeal of the first part of the Contagious Diseases Act?—I have only just heard of it. I am not really fully aware of what they are petitioning for, but I have an idea.

97. The petitioners, speaking of the Act, say: “It is more frequently regarded by the impure as a licence for immorality than as a preventative to the spread of disease.” Have you ever heard of that?—I have heard the matter spoken of, and there is no doubt that that is the case.

98. You agree with that statement?—Yes.

99. The second statement is: “Where disease exists there is often a tendency to hide it for fear of being brought under the operation of this Act”?—Yes, that is so.

100. Then: “Where disease has been accidentally contracted, the discovery of it to those in authority leads to the persons affected being at once classed with persons of ill-fame, and provided for as such by the Act”?—I have heard nothing direct with reference to that.

101. The next statement is: “The Act does not fail to retain for immoral purposes those who by

their own fault or misfortune have been unable to prevent their names being placed on the town list." You do not know of any innocent people who came into difficulty in that way?—No, I have not known of any.

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102. "Punishments under this Act are inflicted without fair and open trial." We know that if such a woman should ask to be tried in public her case is not tried in secret. "Where two parties are concerned in an offence, it is usual for only one of them to be dealt with and punished under this Act." The meaning of that is that there are really the two classes of punishment for male and female, or rather that the one escapes and the other is punished?—Yes, that is so.

103. "The Act provides that on the first offence the person, who, it may be, has been deceived by another, shall be immediately classed as a prostitute, and subject for the rest of her life to frequent surgical examinations, no inducement being offered her to return to a pure and virtuous life"?—I have had no experience of that.

104. You say that some of these people came to your Home?—Yes.

105. And you tried to show them the way to better their life, and to return to a pure and virtuous life again?—Yes.

106. But the petition here says that that is not done by the Government?—I have always found the Government very willing to help, and the authorities. Of course, when I had women I had occasion to suspect I had to take them when they came under my care, but I found that after they were with us I had no further need to take them, and if I got them into a situation or restored them to their friends, I had no further difficulty; neither had the women.

107. That is what is meant here; they mean if a way could be found to bring these people back to a pure life and to restore them it would be alright. Now, though that is done by you, it is never done

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by the Government, and these people have no opportunity, when once taken up by the police, to get back to a pure life again unless they go to your home. For instance, there is no reformatory attached to the Government Institution, is there? —No.

108. The petition really pleads for the suspension of the first part of the Contagious Diseases Act, under which these people are taken up and have to submit to examination and treatment and all that sort of thing. Have you ever thought of that?—No, I cannot say that I have particularly. Of course, there have been times when I have felt keenly the position the women are placed in, and I know that they have great objections themselves, and it very often leads them, I believe, into deeper sin. They get into a state of "Well, I don't care," and they go deeper and deeper, and, of course, it becomes harder then to reclaim them.

109. Have you ever tried to make people good by stringent measures?—No; we work by love and persuasion rather than by trying to force them.

110. And that is why you succeed?—I believe it is. We seek to win them rather than force them.

111. In that petition there is also included a prayer for raising the age of consent. At present the age of consent of a girl is 13. Have you ever thought over that?—I have felt that it ought to be raised. The age should be higher, and I would say as high as possible, because we have had some very sad cases to deal with.

112. And, according to your idea, what do you think the age of consent ought to be?—I would say as high as possible. I know that there are in the Colonies certain reasons, perhaps, why it should not be so high. For one thing, girls marry very young out here; but I certainly think it ought to be higher than 13.

113. What would you think?—I should say 16 would be a suitable age. Of course, if it could be raised to a higher age, all the better.

114. But you would agree to 16?—Yes, I believe that is the age in England and in Australia.

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115. And taking everything in this country into consideration, the climate and everything else, 16 is the age you would recommend?—Yes, I should say 16. I have a few figures here concerning the tender age of girls we have had to deal with. The figures range over the past four or five years. I am just taking the figures for our Homes in this Colony, and leaving out our Homes in the Transvaal and in Natal. We have Homes at Port Elizabeth and Kimberley, and two in Cape Town, and the figures I will give you are those of young girls we have dealt with. Of course, they go into hundreds of women of older years, but I have taken from the age of 19 as the figures appear in our records. There have been ten at 19, nine at 18, twenty at 17, ten at 16, four at 15, four at 14, one at 13, one at 12, and one at 7.

116. One at 7?—Yes, she passed through my own hands.

117. *Mr. Wood.*] If the repeal of the Contagious Diseases Act took place, what, in your mind, would be the result: good or bad?—I can hardly form a judgment. I have no doubt it would bring about good on the one side, but then there are other things to consider. I suppose there would be no provision whatever made for this disease. I have seen it in other Colonies where there has been no provision at all, and the women have practically died in hovels in a very terrible condition, with no one to do anything for them; and they have been brought and laid at our door, and we have had to take them in and make a shake-down for them and attend to them until they have died.

118. They have been thrown upon the world?—Yes, they have been thrown upon the world. I believe a general hospital will not take in these cases, and it seems to me that if the Act was repealed some provision should be made for a ward in some hospital where they can be taken, so that

Mrs. they will not be thrown upon the world and be a
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119. If proper treatment was provided for them, then the repeal of the Act would not be so great a danger?—No.

120. And kindness there would tend to reform them?—I believe it would.

121. *Mr. Anderson.*] In what you said just now, you are dealing only with cases that have occurred. You said, in reference to the repeal of the Act, that if it was repealed cases that have occurred should have proper treatment as in the way you suggested. But the point is this, if the Act was repealed, would disease spread more rapidly in our midst? Of course, I quite agree that there should be some remedial measure taken for those who are affected; but the point is whether the Act, if repealed, would have the effect of increasing disease or diminishing it?—I suppose that would be one of the things that would remain to be seen. It is rather difficult to answer that question.

122. *Mr. Wood.*] You are doing rescue work?—Yes.

123. And you do not limit the amount of your work so far as your means allow?—No.

124. So you would continue to do rescue work?—Yes.

125. And if the Government gave substantial help, you could do more?—Yes.

126. The morality of the people might, with education, be elevated?—Yes.

127. *Chairman.*] Do you take in the coloured prostitutes?—We have a Home here for coloured women; it is entirely separate from our white work. We have also a wing on our Port Elizabeth Home for the reception of coloured women.

128. Do you find that many have reformed?—Yes, we have had some very good cases.

129. From experience you find, when they have returned from you and taken employment, as you said in the case of the white women, they really try to lead a better life?—Yes.

130. You have succeeded in that respect?—Yes.

131. *Mr. Wood.*] In which class of the people, the white or the coloured, do you find there is a greater tendency to immorality?—I suppose in the case of the coloured, but then there is this to be taken into consideration, that their circumstances and their up-bringing very often have been very much against them, whereas the white people have had enlightenment and education. So that I should say that proportionately it was more in the white, according to the light that the white person has compared with the up-bringing of the coloured one, taking it from childhood. In the latter very often the surroundings and the home circumstances are the very opposite to those which would conduce to morality; they are practically brought up in immorality, and some of them know nothing else; whereas with the white it has generally been through being deceived and being dragged down.

132. *Mr. Anderson.*] The fact remains that the larger portion reform?—Yes, though we are dealing with a larger number of whites, because we have more Homes for their reception.

Mr. Richard Keast. examined.

133. *Chairman.*] What is your position, Mr. Keast?—I am lay inspector under the Contagious Diseases Prevention Act.

134. Do you know the object of this Committee?—Yes, so far as I have read in the papers.

135. Are you acquainted with the working of the Contagious Diseases Act in Cape Town?—Yes, I have had a little over 16 years' experience in Cape Town; almost ever since the hospital was opened.

136. Then you are connected with the Lock Hospital in Cape Town?—Yes.

137. There is a petition for the repeal of the first part of the Act; what is your opinion upon that?—My candid opinion is that they would make a very great mistake.

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138. How so?—If they were to repeal the first part of the Act, servant girls who are now deterred, as it were, from going on the streets or going into brothels on account of having to go to the Lock Hospital or of being found out and having eventually to go to the Lock Hospital, would migrate between service and brothels, brothels and service, more than they do now. They do now to a certain extent, but I am afraid if the Act was repealed you would scarcely keep a servant more than a month. Of course, we have a great difficulty even now in keeping them.

139. With regard to the Immorality Act, in how far does that help you to suppress that vice?—The Immorality Act of 1902, I am prepared to say, has done more harm than good.

140. You mean to say that the two Acts cannot work together?—They cannot work together; one or the other must be repealed.

141. One must be repealed?—Yes. Of course, I have had practical experience of it, and I have come to that conclusion long ago. When the Immorality Act was in full force, the Contagious Diseases Act was practically repealed automatically, as it were, simply because the police who were working the Immorality Act tried to close the houses, and prosecuted the women. But that did not stop prostitution. It drove the women into secrecy and into some of the best hotels in Cape Town. I am speaking now of what you might term the better-class women, but nevertheless it drove the majority of them into secrecy, and in very nearly all the best hotels in Cape Town some of the registered prostitutes were to be found.

142. Registered?—Yes, women that were on the books at the Hospital.

143. *Mr. Anderson.*] Were they in service at the hotels?—Resident there; they had a room there. They did not do what they termed their business in the hotels. They went there out of the way of the police, and had rooms outside in private houses,

and some had as many as three rooms as well as their residence.

144. But for what purpose?—To get away from the police.

145. *Mr. Wood.*] They were boarders at the hotels?—Yes.

146. *Chairman.*] And were still carrying on prostitution?—Yes; not at the hotel, but outside. Then the moment the police might happen to find the room outside where they did their business they would move from there immediately and go to another.

147. *Mr. Wood.*] And still retain their residence at the hotel?—Yes, until they were suspected there, when they would move along to somewhere else. And numbers of private houses were harbouring these women, I suppose unknown to the tenants. These women were going about from the one place to the other, migrating from the one house to the other; whereas before the Immorality Act was passed we knew more or less where to put our hands on them. During the operation of the Immorality Act they were scattered all over the town, and, to my mind, to the detriment of everybody in the town.

148. *Chairman.*] And now they make use of the field and all about, do they not?—They always did that; that is the lower class of coloured women.

149. You would not agree to the repealing of the first part of the Contagious Diseases Act?—It would be said at once that I am prejudiced, but taking a broad-minded view of it, I certainly think that it should not be repealed.

150. *Mr. Anderson.*] Why should you be prejudiced; in what way would prejudice come in?—Seeing that I have been working the Act.

150. You are here to give evidence as to facts?—Those are facts.

152. *Chairman.*] How do these women come to the Lock Hospital now; are they brought there by the police, or do they come there voluntarily?—

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They come voluntarily. I may say that now and again there has been a case that has been reported, and in former years one or two were placed on the register by the Magistrate; but that has not happened for the last eight or nine years.

153. Are you aware that innocent women were ever brought to that hospital under force and compelled to come in?—No; I have heard of such, but that has not taken place.

154. Not here?—Not here; not in Cape Town.

155. *Mr. Anderson.*] You say you have heard of such cases?—I have heard it reported outside.

156. As having taken place in Cape Town?—Yes, of cases having been forcibly taken to the Lock Hospital, but it was incorrect.

157. You would know yourself that it was incorrect?—Yes.

158. Is it within your knowledge that many of these women carrying on prostitution enter domestic service?—Numbers of them do; and they leave domestic service for brothels again.

159. What is their habit in this way; do they remain a certain time in domestic service?—Yes; some remain a month, some six months, and some twelve months. The time varies, but they do not remain in service very long before they are back in their old haunts again.

160. What is their object in going into service?—Their object is hard to define. I think I could mention one reason, and that is they get into debt outside with the Jews, and hawkers get them to buy certain things, and perhaps they have not got the money to pay for the things, and then they go back to service. Or there may be other causes why they go back to service. But they go back to the brothel again. I might also mention that a few have got married from time to time.

161. *Mr. Wood.*] The girl coming into the Lock Hospital has a number?—No, it is merely a consecutive number in the register; she is not known by a number.

162. So that the same girl may come over and over again?—Yes, and the numbers may change.

163. But it would be the same patient?—Yes.

164. *Chairman.*] Every time she comes in there she gets a new number?—No, she does not get a number, but she is registered; their names are placed on the register in consecutive order as they are put on the books.

165. *Mr. Wood.*] Supposing you gave a return of 100 patients, in that 100 there might be one who had been in ten times?—Yes, quite so.

166. It would not be separate patients?—No.

167. So that if there was a distinct number you would be able to identify that particular patient as having come in so many times?—Yes.

168. Is the number of these prostitutes increasing?—They are on the increase now. That is to say, women that were in hiding from us, owing to the operations of the Immorality Act, are now being found and are again placed on the register.

169. With all your powerful restriction, or whatever it may be?—Yes.

170. What would be about the number to-day?—Roughly, I should say that there are about 170 on the register. I think I am correct in saying that, although I have not the numbers with me; I am speaking roughly.

171. That generally would be the case?—Yes.

172. Are these white or coloured women?—White and coloured.

173. What would be about the proportion between them?—I should say there would be about 45 white out of that number. I think I am correct in saying 45.

174. And would they be women of years?—Some of them seem to be elderly women. Some are over 50. They range, I should say, from 21 and 22 to 50.

175. Are the white women Colonials?—Not all. There are a few Colonials, and the rest are French, German, Belgian, Italian and English.

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176. Are these a means of decoy for others?—I do not think so, because they do not want to see too many in the field, as it were. They are not in the habit of decoying other women into the same life that they are leading.

177. Unless there is a benefit?—I do not see where the benefit would come in for them.

178. *Dr. de Jager.*] There would be too many competitors. That is what it comes to?—Yes; I do not think they do that.

179. *Mr. Wood.*] That would be the action of the brothel?—Yes, of the brothel-keeper, you might say.

180. You said that in your opinion the Immorality Act has done more harm than good?—Yes, I think so.

181. And is it your experience that the two Acts now on the Statute Books, the Contagious Diseases Act and the Immorality Act, cannot be administered with any efficiency together?—That is so; they cannot.

182. What remedy would you suggest?—I would suggest the repeal of the Immorality Act.

183. The entire repeal?—Yes.

184. And leave matters to be worked on the Contagious Diseases Act solely?—As they were before.

185. Do you think that matters would then be better?—I do; I certainly do think so.

186. Has not the carrying out of the Immorality Act been the means of closing up a lot of brothels?—It was the means of closing brothels, but at the same time driving, as I said, the women formerly resident in those brothels into secrecy; and since the suspension, as I may take it—I do not know that it has been officially suspended, but since they have more or less suspended operations—these women have come back again into public houses, if I may so call them.

187. What do you mean by “suspending operations”?—At one time the Immorality Act was

worked with all the forces of the police, but latterly it has not been so worked.

188. Why not?—I could not say. At one time they tried to close every house—all brothels.

189. But according to the Act it is illegal to have a brothel?—That is so, according to the Immorality Act.

190. Still you say there are known brothels existing in Cape Town now?—Yes.

191. And known to the police?—Yes, I take it that they are known to the police.

192. In the number of patients you speak of, you are referring to Cape Town?—Yes.

193. You do not know anything beyond Cape Town?—No, just as far as Woodstock and Observatory.

194. That comes within your area?—Yes, we do not go beyond that.

195. There may be double the number beyond that?—There may be.

196. And you know nothing about it?—Yes.

197. *Mr. Anderson.*] As far as your information goes, has the application of the Immorality Act had the effect of reducing solicitation on the streets?—Yes, I believe it has.

198. It has cleared the streets of the class of women that used to stand about?—Yes.

199. What has become of them. If they cannot go into brothels, and cannot go on to the streets, where have they gone?—Some are still here, and some have left.

200. Have many left?—Yes, a large number has left.

201. What kind?—Foreigners. But I may as well say that these foreigners came in during the time of the war in great numbers, without any intention of staying, only while the war lasted. Of course, when the country resumed its normal level, naturally some of them would go away again, and they have done so. Some, I believe, have been deported; so I am told, though I have not had it officially.

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202. Do you not think that the fact of many of these prostitutes going into service brings a great risk on the inmates of the household where they go?—Yes, I am certain of it.

203. In what way?—They may be diseased and the members of that household may contract the disease. I may as well go back to some years ago and give you an instance. I cannot say what medical man was at the hospital at the time, but a little child of, I should say, not more than four or five years of age was brought in there suffering from syphilis. She had contracted that in some way or other from the servant. And that was not the only one; there had been one or two others, but older than that, though certainly not of the age of maturity.

204. You have known of a good many cases?—I will not say a good many, but several cases from time to time.

205. The only way you see out of the difficulty is to repeal the Immorality Act?—That is the only way I should have.

206. *Mr. Wood.*] You know the condition of things prior to the passing of that Act?—Yes.

207. And you have seen the condition of things since the two Acts have been in force?—Yes.

208. *Mr. Anderson.*] And you say they cannot work together?—No, they cannot work together.

209. *Mr. Wood.*] Whenever a subject comes into the hospital, is that case sent away perfectly cured?—I believe so.

210. If they go away before, it is their own doing?—They cannot go before they are cured if they are under Part I. of the Act; that is to say they are admitted into the hospital and they are compelled to stay there, unless they apply to the Magistrate, or come in under Part II. of the Act. Those suffering from a venereal disease who come voluntarily, for instance servant girls and others—married women, too, sometimes—and who apply at the door and request to be taken in—that is

under Part II. of the Act—are at liberty to leave the hospital when they like and when they express a wish to do so. Under this part of the Act they cannot be detained against their will, but under Part I. of the Act they can be. If there is any question, and if they consider that they are illegally detained, they can appeal to the Magistrate, who will inquire into their case.

211. Coming in under Part II. of the Act. they may be as badly diseased as those coming in under Part I. ?—Yes.

212. And they can go abroad ?—Yes.

213. *Chairman.*] Are there any number of them attending under Part II. of the Act ?—Yes, several come in each month.

214. That 170 you gave us just now are inmates of the hospital ?—Not inmates of the hospital, but on the register.

215. Among that 170 are there any who have come in under Part II. of the Act ?—No, they are all Part I. cases. In Part II. cases, the moment they leave the hospital they leave our jurisdiction and we have nothing further to do with them, unless, of course, they find their way in under Part I.

216. *Dr. de Jager.*] Do you think that the administration of the Immorality Act has driven the prostitutes just beyond your sphere—just beyond Woodstock, for instance ?—I do not think so. There is not the same means of livelihood there for them as there is in Cape Town—not in such numbers. I have not the slightest doubt but that there are a few out there—in fact, I know there are a few there—but they are taken care of by the Inspector for Wynberg ; and occasionally we get patients from Wynberg and also from Simon's Town sent to this hospital.

217. *Chairman.*] Have they no Lock Hospital at Simon's Town ?—There was one formerly, but it has been closed.

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218. *Dr. de Jager.*] How do you find these women under Part I. of the Act?—They may have been reported by inmates of another house, or I may see them in a house. Perhaps I might see them there for a week before I take any action, and then if there is any suspicious circumstance in connection with such a woman I would make inquiries before speaking to her, and then if to my mind she was there practising prostitution I would speak to her. I may say that I am always very satisfied before I do speak to her, because I know the penalty, and I have not misjudged myself yet. When I am satisfied that she is there practising prostitution, I ask her about it, and invariably she agrees to go to the hospital. Of course, if she will not go, then there is nothing for it but to obtain an affidavit, which is a most difficult thing to get, because who will make it? In the first place, her clients will not make it, and you cannot get it from other women; in fact, we do not want it as a rule from them, because they may be prejudiced.

219. *Mr. Anderson.*] You say when you notice anything of that kind going on in any particular house you investigate?—Yes.

220. Is that part of the duty you are charged with?—Yes.

221. It is part of your duty?—Yes. I might further add to that that when a woman whose case has been so investigated comes before the doctor, she has to sign, or is requested to sign, a voluntary submission. This paper is written out sometimes by myself and sometimes by the doctor, and then she is asked if she has any objection to signing it. The paper is read to her, and the meaning of it is explained to her, and she is told that if she signs it she will be required to come every two weeks for medical examination; and if she has any objection to signing it—but so far I do not know that we have any who object; they invariably sign.

222. It is part of your duty to find out houses in which this kind of thing is carried on?—Yes. I frequent the houses—when I say “frequent” them, I mean I go to the houses for the purpose of serving notices and on occasions a summons. Then, if I see a stranger there, I might at once speak to the landlady, or I might not—it depends who the landlady is—or I might endeavour to get the information outside; but it is only after I am satisfied that I speak to the woman herself.

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223. *Mr. Wood.*] Do they know you?—Yes, the landladies know me, and the women who are already on the register know me. Of course, strangers coming would not know me probably.

224. You said just now that your remedy to prevent the conflicting of the two Acts of legislation at present on our Statute Books would be to repeal the Immorality Act?—Yes.

225. Would you repeal the whole of it; you have read it, have you not?—I cannot say that I have read the whole of it; I have not had it to read.

226. You know that there is a clause in the Immorality Act which provides for the infliction of lashes on the man convicted of living on the proceeds of prostitution?—Yes, and that part of it I certainly should not repeal. There are men in Cape Town now doing that kind of thing, but it is very difficult for the police to get hold of them.

227. Then you are not in favour of repealing the whole of that Act?—No, that part I certainly should not repeal. But I must say that I have not read the Act; I have only read a very small portion of it.

228. Are there any other things you wish to tell us which you think the Committee ought to know so as to assist it in arriving at a decision on the subject of its inquiry?—I do not think so.

229. What is the charge made for these patients who come into the Lock Hospital?—They are admitted free.

230. All free?—Yes.

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231. *Chairman.*] Have you thought about the question of the age of consent? What is your experience in the hospital; perhaps that may guide you?—I may say that to my knowledge only one case under age has submitted herself for examination, and that quite voluntarily; but she was not examined. We knew the woman—or girl rather—previously. I had known her for some time before that and had seen her in different houses. She was just a mere child, and she came up to Dr. Dixon on one occasion and requested him to put her on the register and to allow her to submit herself to medical examination. The doctor asked her age, and I think she said she was 18. We knew she was not that age, and we said we would not put her on the register and that she had better go back home. Then she came again the next day with a similar request, but we sent her away again. I believe she had been locked up previous to that for soliciting. That is the only case under age that came to my notice.

232. But she said that she was 18?—Yes, but it was a fact that she was not 18; I do not know that she was 16 even.

233. You know that the age of consent under the Act is 13?—Yes, I know, but Dr. Dixon would not put her on the register. She was over 13, however. That is the only case that has ever come under our notice—for the last 16 years at least.

234. So that, judging from your own experience, if they are now asking for the raising of the age of consent, you would not have any objection to it?—I should think it a very wise plan. I may also say that the women who are the brothel-keepers are very particular in that respect. They are undoubtedly afraid under the Act of taking girls in under age. They are generally over 18; there are very few under that age.

235. *Mr. Anderson.*] What would be your idea; what age would you suggest?—I should certainly make it 18 if I had my way.

236. You think it ought to be made 18?—I think so. I do not think anyone could go very wrong in making it that. The older the better.

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237. *Mr. Wood.*] There is a chance of wisdom then?—Yes.

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PRESENT :

MR. THERON (Chairman.)

Mr. Anderson.

Mr. Hellier.

Mr. T. Searle.

Mr. Wood.

Dr. Hewat.

Dr. de Jager.

Dr. Henry Clarke, J.P., examined.

238. *Chairman.*] I believe you are district surgeon at Simons' Town?—Yes.

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239. You are also medical inspector under the Contagious Diseases Prevention Act of 1888?—Yes. I have worked the Act at Simon's Town ever since it was promulgated.

240. Will you give the Committee generally your opinion regarding the Act?—From my experience at Simon's Town, I hope to be able to prove to the Committee that the Act there has been a very great success indeed. A short time ago, Dr. Thornton was sent down by the Colonial Office to Simon's Town to report upon the best place where prostitutes could be examined, because they had transferred the Lock Hospital at Simon's Town to a Board of Management to be converted into a Cottage Hospital. When Dr. Thornton was coming down, he wrote to me that he had gone very fully into the matter, and he thought Simon's Town had probably shown the best results of the operation of the Act. That was what he wrote when he was coming down, and I believe that was the opinion in the Colonial Office. When the Act was put into force in Simon's Town, I may say that I have

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lived there for 18 years—the condition of the place was deplorable. It was a seaport town, and when the Act was brought into operation, we started with 68 prostitutes of the very lowest type. At the first periodical examination, I should think about 40 per cent. of these women were found to be diseased. Before the Act was promulgated, a Select Committee of the House of Assembly went into the question whether it should be promulgated or not. I have the report published in the blue book at the time, and I remember well that the principal medical officer of the Imperial forces said that the form of syphilis prevalent at the Cape was much worse than anything he had ever seen in India, and that was my experience too. I remember once—I think it was in 1887, a Dutch man-of-war could not proceed to sea from Simon's Town as the men were nearly all down with venereal disease: the condition of the whole place was deplorable. I have some extracts here from the statistical reports on the health of the navy, published by the Admiralty in London, and the Director-General said in his report for 1888, the year when the Act was promulgated, that Simon's Town and St. Helena were stated to have caused the greater part of the disease, especially the former place, Simon's Town. That was a very startling announcement because that was out of the whole of the South African command. "There, however," he said, "at the end of the year the Colonial Government put into operation the Contagious Diseases Prevention Act, which it was hoped might lead in the future to a reduction in that year's statistics of venereal disease." The beneficial effect of the Act was at once apparent, and it could not be otherwise—there was a marked decrease for 1889 as compared with 1888. There has been during the present year a marked decrease in all the forms of venereal disease. This is doubtless due to the re-establishment at Simon's Town of the Con-

tagious Diseases enactment. This Act, he says, appears to be carried out at Simon's Town with great care and assiduity. In 1890, he said, "the good effect of the strict regulations at Simon's Town, as mentioned in the returns for last year, is still maintained." In 1891, he said "the marked immunity from venereal disease arising from the Contagious Diseases Act in force at Simon's Town seems to be fully maintained." In 1893, the Director-General of the Naval Medical Department, reported, "the medical officer of the 'Thrush' remarks that although the ship was nearly four months at Simon's Town no disease whatever was contracted at that place, owing to the vigilant supervision and examination of prostitutes which is carried out. This statement is confirmed by other medical officers." In 1894, he reported that "In the comparatively few cases contracted at the Cape the disease was of a mild nature and bears striking proof of the good effects of a Contagious Diseases Act carried out in an efficient manner as it undoubtedly is at the Cape." In 1895, he said that "Simon's Town still enjoys comparative immunity from these diseases." and the medical officer of the "Blonde" reported "that not one case of venereal disease had been contracted there" and the medical officer of the "Thrush" said "owing to the Act in force Simon's Town was almost entirely free." In 1897, he stated in the blue book presented to the Imperial Parliament, that "the majority of these cases were contracted at Cape Town or Zanzibar. Simon's Town was singularly exempt from venereal disease." The medical officer of the "St. George" stated that he considered the improved condition of affairs was entirely due to the careful way in which the regulations of the Contagious Diseases Prevention Act were carried out. After that, the Director General of the Naval Medical Department issued his report in a different form; he left off making comments, and I find

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only a mass of statistics. I would like to direct attention to a letter written to me last year entirely unsolicited, by the Fleet Surgeon in charge of the Fleet, and I think it shows that the Act is still being carried out carefully in Simon's Town and is still beneficial. "I have much pleasure in testifying to the complete success of the working of the Contagious Diseases Prevention Act in Simonstown, in proof of which I wish to bring to your notice the fact that between the date of the arrival of the "Crescent" at Simon's Town on the 18th April and the end of last quarter, there has not been a single entry on the sick list due to venereal disease contracted at that port. As a contrast, before leaving Portsmouth with 763 officers and men at the commencement of the commission, there were six entries on the sick list for syphilis primary: eleven secondary; five gonorrhœa, and four sequelæ of gonorrhœa, and one of the last, after a severe illness, had to be invalided home, as his constitution was ruined." Dr. Hoskyns, Fleet Surgeon, again wrote on the 12th of February, 1906, that he thought it only fair to let me know the result of the Contagious Diseases Prevention Act with regard to three cruises of the "Crescent" from Simon's Town, lasting three months. The average daily strength of the crew was 616. Twenty-four cases of venereal disease were put on the sick list, and only two of these were contracted in Simon's Town. The fact that two prostitutes were found and dealt with almost as soon as the cases were reported, reflected, he said, great credit on the working of the Act in Simon's Town. During the whole time the ship had been on this station, almost two years, these were the only two cases that could be traced to Simon's Town. He congratulated me heartily on the brilliant success, and said that if other districts would only follow the Simon's Town lead, a great deal of sickness, invaliding and deaths would be avoided. I consequently affirm that the Act has been an absolute success at

Simon's Town, and I have taken great interest in the matter myself, and spared no trouble and no time, although the work, of course, that I have done has been more or less of a thankless nature. The other day, when the Colonial Government agreed to shut up the Lock Hospital at Simonstown and transfer it to a Board to be converted into a cottage hospital they reduced my pay to £50. I now get £100 a year in all for running the Act in Simonstown. I should like to point out that laymen do not always grasp the real facts of the case. I had the honour to give evidence before a Select Committee on this very Act in the Legislative Council in 1895, and I pointed out at that time that a woman who diseases a man does not always know that she has got primary syphilis, owing to the nature of the parts. I have even known cases where married women have been infected by their husbands and they have not known it. The first thing that a female knows is, she breaks out all over the body in secondary sores, and if the thing is neglected, she gets tertiary symptoms. That is my experience with regard to prostitutes, and therefore it becomes necessary to examine these women. I should like to say that I know for a fact that many prostitutes in London go to the Lock and other hospitals voluntarily to be examined. Dr. James Lane, surgeon to St. Mary's and the Lock Hospitals, London, and one of the greatest authorities on prostitution, has stated that "the system of compulsory inspection of women known to be prostitutes is of the greatest advantage to them and exercises the most beneficial influence over the character and duration of the disease, and saved many of them from mutilation and many from permanent loss of health. On the other hand, women of this class, when left to shift for themselves, do not for the most part apply for relief until the disease has assumed serious proportions, or until it interferes with their means of obtaining a livelihood. In slight cases of syphilis.

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both primary and secondary, and in cases of uterine and vaginal discharges, they can follow their profession for a very long period without any considerable pain or inconvenience. *Many of the patients at the hospitals have professed to be quite ignorant that there was anything the matter with them till it was discovered by examination.*"

241. Among the petitions which have been presented to the House in regard to this matter, there is one which states that the Act is more frequently regarded by the impure as a license for immorality than as a preventative to the spread of disease; further, that where disease exists, there is often a tendency to hide it for fear of being brought under the operation of the Act. What do you say as to that?—I state that the disease is not so virulent now as it was when the Select Committee of the House of Assembly investigated the matter in 1888. The Act, so far as my district goes, has been an absolute success.

242. Why was it necessary to pass the Act of 1902—the special Act?—Something had to be done because of the state of the streets at that time. Numbers of prostitutes flocked down from Johannesburg, and the streets were in a disgraceful condition. Girls were walking up and down the public thoroughfares, and it was necessary to do something.

243. *Mr. Anderson.*] What is your experience of the two Acts? We have now two Acts, the special Act, and the Contagious Diseases Prevention Act, what do you say as to their working?—I believe they clash and conflict one with the other. My idea, in the interests of the public and in the interests of these women, if you want to keep syphilis under control in the Colony, if you have to repeal one of the Acts, I say repeal the Morality Act, or else amend or alter it; that is my idea. I say that when these women are diseased, they ought to be examined periodically. I know that it is treading on delicate

ground, and it is opposed to certain religious ideas, but I consider it is hopeless. It is a mistake to hope that by prosecuting these women you will put an end to prostitution. At Simon's Town the Morality Act has never been stringently enforced as far as the women go. I do not know about Cape Town, but I have an idea that even in Cape Town it is not very stringently enforced either at present, and I think that is wise. These women certainly should not be permitted to annoy people in the street, but if you have a Contagious Diseases Act you want to get the women up for examination. If the Act is to be worked satisfactorily, you must know where they live. It is no use hunting them out on to the hill side. A medical inspector in Cape Town told me when the Morality Act was put in force, the women were all well in hand, and if a woman did not come up for examination the inspector knew that she was probably diseased, and he could lay his hands on her and bring her up, but as soon as the Morality Act was enforced, these women were drawn out of their usual place, and went all over the town, and to Woodstock, and Sea Point.

244. *Chairman.*] Suppose it were known that this Contagious Diseases Prevention Act was withdrawn and that there was no supervision over these women, would it be a deterrent as far as men were concerned?—I do not think so. Human nature is very bad, I am afraid. There is an enormous amount of venereal disease in England where the Contagious Diseases Act has been suspended. Some people say that it is diminishing, but I have my own ideas about that. Men have always gone with these women and they always will. We know very well that before the Contagious Diseases Act was passed, soldiers and sailors knew the great risk they ran, yet they went with prostitutes and they did not seem to care.

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245. Is there a similar act in operation now in England?—I believe not, but I heard the other day that the Admiralty was contributing largely towards the maintenance of the lock wards of the Portsmouth Hospital where women could be treated, but there is no such thing as compulsory periodical examination in England. Do not ask me about England, that is a country of faddists, they want to abolish vaccination there, and all sorts of things.

246. Do you think the state of things in England now is worse than it was before the repeal of the Act?—I am not prepared to say that, but I was talking to an officer the other day, a very intelligent elderly subaltern, who had risen from the ranks, and he said that if venereal disease was not so bad in the Army, it was due to the fact that they had done away with so many of the slums, and the women seemed to be cleaner, and the men were certainly a better class, better educated and kept themselves cleaner than they did formerly. There may be a good deal in that, but I know the service people still complain very bitterly. I am sorry I cannot give you any figures. Venereal disease is very bad in England still—very bad.

247. If respectable women in this Colony look upon this Act as practically licensing vice, do you think they are wrong?—I do not see why they should take that view at all. I cannot see it. I know various exceptions are taken to the measure, and that is one of them, but I ask, how does it license vice. The women do not mind being examined, not a bit of it; that is a mistake that some people make. I have heard this periodical examination described as a dreadful thing “instrumental rape,” but a woman will submit to from 10 to 15 blue jackets in one evening, whether she is amenable to the Act or not. I have known that. It does not license vice I say.

248. Do not you give them a certificate?—We used to do that, but the opinion of the Attorney-

General was taken on the matter. The Act says that when a woman has to be examined, a notice must be served on her stating the time and place where she has to be examined. They used to take that notice and hold it up and say, "I have been up to be examined." Then the Attorney-General ordered that that should be done no longer, so now the notice is read to the woman and on the back of it is a printed acknowledgement that it has been read to her, so she is not given the certificate at all ; it is filed by the medical inspector.

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249. Has it ever come to your notice that seducers and young men make use of threats sometimes that they will report women to the police? No. I have never known a case of abuse such as that under the Contagious Diseases Prevention Act. I say that it is impossible to abuse the Act. A woman may be brought under the operation of the Act in one or two ways, either she may voluntarily submit to medical inspection, or she may be tried for practising prostitution. The Act says that when information on oath is laid before a resident magistrate, the magistrate may, if he thinks fit—it is entirely optional—take no action upon the affidavit or he may order the woman to come up for trial. He is obliged to try the case *in camera* privately in his office, or he may tear up the affidavit and say nothing more about it. If he considers the woman very badly diseased or something of that sort, the woman and her accusers are brought up and the case is tried. Even after trying the case it is entirely optional with the magistrate whether he gives an order for periodical examination. I have never known a case of abuse. I am a Justice of the Peace at Simon's Town and consequently take affidavits on oath, but I have never yet taken action in a case where a decent woman has been accused—never. What I do is this; suppose I am told there is a common woman say out at Glencairn carrying on prostitution and that she is diseased. I say, tell her to come in next

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week, and if she does not turn up, I have a lay inspector and I tell him to go and investigate the case. He thereupon goes and reports to me all about the matter. Perhaps he says she is a common Hottentot girl from the Paarl or Wynberg, or Cape Town, and if of that class he goes to the woman and tells her she must come up for examination. If she refuses, then I take an information on oath, setting forth that the woman is a common prostitute, and probably diseased, and that I send on to the Resident Magistrate, and he may take action or not, just as he thinks fit. If he orders the woman to come in, the chances are she submits before she is tried. I never take action with regard to women who are not low class common prostitutes, and the lay inspector knows the Act and is very careful.

250. Is there not a possibility under that part of the Act that someone may report to the police or to a doctor against a woman just from hearsay or spite, and she may be subjected to all sorts of indignity, she be placed under surveillance, and looked upon with suspicion. Is not that possible?—At Simon's Town I have never known such a case. The police at Simon's Town have nothing to do with the Act, it is left to me and to my lay inspectors and the Resident Magistrate.

251. It is reported to you, is it not?—If it were reported to me I should be very careful in the matter. If I knew she was a low common class of girl, I might direct the lay inspector to watch her. I only take action with regard to girls that I know are not respectable, but the police have nothing to do with the working of the Act. I know that formerly a policeman could run in a woman and have her examined, but that was under the old English Contagious Diseases Act, which has been abolished.

252. Could not that happen under this Act?—No, it is impossible; the only official who can compel examination is the Magistrate.

253. Do you remember the Zeeman case in Cape Town?—I heard of it.

254. So that there is a possibility of such a thing happening: a woman may be watched and even be compelled to be examined?—I do not think it is possible under the Contagious Diseases Act.

255. With respect to the petition that has already been referred to, the first clause says, "It is more frequently regarded by the impure as a license for immorality than as a preventative to the spread of disease." Is that so?—That is not true. The Contagious Diseases Prevention Act has stamped out venereal disease at Simon's Town.

256. You mean to say you do not agree with the statement in the petition?—No.

257. The second clause says, "Where disease exists there is often a tendency to hide it for fear of being brought under the operation of the Act?"—They cannot hide it. For instance, if a soldier or a sailor gets the disease, the woman is pointed out, and she is not only saved from her own misfortune but she is brought under treatment in a properly equipped Government hospital and examined, and prevented from giving the disease to others.

258: *Dr. de Jager.*] For treatment?—Yes, certainly.

259. *Chairman.*] The petition goes on to say, "Where disease has been accidentally contracted, the discovery of it to those in authority leads to the persons affected being at once classed with persons of ill-fame and provided for as such by the Act"?—As I have said already, the women do not mind being examined, but they do not like being shut up in hospital instead of being free. If you allowed men to come to them at the hospital and give them liquor, it would be all right, but they do not care about going into hospital, because they are deprived of their liberty and brought under treatment. But I would ask you, suppose a woman has a chancre on her

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parts, and she is carrying on this trade, should she not be put under some restriction and submit to medical treatment? I may say that I was district surgeon at George, and if I may be pardoned the expression, I can tell you that Oudtshoorn was "rotten" with venereal disease, and I think it is very bad there still. I may say that I have seen syphilis introduced into lots of respectable families, and even children used to get it all over the place through contact with diseased servants.

260. The fourth clause of this petition states: "The Act does not fail to retain for immoral purposes those who by their own fault or misfortune have been unable to prevent their names being placed on the town list." Is that so, that their name remains on the list after discharge?—No.

261. But she is a known inmate of the hospital, is she not?—A woman can only be on the list for periodical examination, if she is a common prostitute. She must have been tried by a magistrate on sworn information or else submitted voluntarily before a magistrate or a medical inspector.

262. Has it never been brought to your notice, after a woman has been examined in that way, that she has become a virtuous woman again and left her old way of life?—Yes. There are women married at Simon's Town who were prostitutes there when I started the Act, several of them, and it is a common thing for prostitutes to get married in England.

263. They return to a better life?—Yes.

264. Still, the fact remains that she was a prostitute?—Yes.

265. *Mr. Anderson.*] The point is this, suppose a woman reforms and wishes to lead a good life, her name still remains on the list of prostitutes, does it not?—No. The medical inspector may put a woman on the list if she voluntarily submits, but he cannot take the name off; the magistrate

does that. All a woman has to do is to go to the magistrate and show him that she is about to lead a better life, and he takes her name off the list without the slightest hesitation. As medical inspector I have often had very strong cases, where women got off by false pretences though still prostitutes.

266. *Dr. de Jager.*] May a woman get her name put on the register without being a prostitute?—I have never known such an instance.

267. *Chairman.*] Then the petition goes on to say: "Punishments under this Act are inflicted without fair and open trial." So far as you know, is that the case?—I have never known it. Prostitutes are brought up at Simon's Town, and the only two punishments are for not coming up for periodical examination, and for breaking the regulations of the hospital. On one occasion, in the hospital at Simonstown, a woman went behind the matron with a chopper, and when the matron stooped down, she aimed a murderous blow which split the panel of the door in two. Could anyone have any sympathy with such a woman if she were punished? Those are the only two punishments; they are for breaking the regulations when in hospital, and failing to come up for periodical examination. A woman must be punished for not coming up for periodical examination; they stay away sometimes when they are diseased.

268. The petitioners say further: "Where two parties are concerned in an offence, it is usual for only one of them to be dealt with and punished under the Act." What do you say in regard to that? In what way is a woman punished?—I say that a woman does not always know when she is diseased, and surely it is no punishment if she is carrying on as a prostitute and is diseased to take her and shut her up in a properly equipped Government hospital, and save her from herself so to speak. Sometimes they get a chancre in the initial stage and we bring her under treat-

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ment and save her from getting secondary symptoms; that is not punishment. In the case of soldiers or sailors, the moment they see they have venereal disease, they are clapped into hospital and put to bed.

269. *Dr. Hewat.*] With regard to that, in your experience, when a man gets diseased, what does he do as a rule?—That is just it. I think that men as a rule place themselves under medical treatment.

270. And a woman?—A woman will not.

271. *Chairman.*] There is another point here in this petition: "The Act provides that on the first offence, a person, who it may be, has been deceived by another, shall be immediately classed as a prostitute, and subjected for the rest of her life to frequent surgical examinations, no inducements being offered her to return to a pure and virtuous life." Is that so?—Who is to offer the inducement; the officials concerned with the administration of the Act? I have often found this, that when women are shut up in hospital, clergymen can get at them, and people from the rescue homes, whereas they never seem to do any good when these women are outside.

272. With regard to rescue homes, have you ever seen women, after having passed through rescue homes come back to you?—Yes, often. I should like to refer to what Dr. Waterston said before a Select Committee of the Legislative Council; she said, "the girls are hopeless."

273. Where did she say that?—Before a Select Committee of the Legislative Council in 1895.

274. *Dr. Hewat.*] Do you find that many servants come to you with contagious disease?—I know they have it: they conceal it, however, sometimes.

275. If there were no Contagious Diseases Act, there would be nothing to prevent these servants going into a clean peaceful home and probably spreading the disease?—They do it very often now;

there is no doubt about it. We do not always get hold of them, and I say that the Act is too liberally worded altogether. Some magistrates will not subject a woman to periodical examination unless they have the very plainest evidence she is a "common prostitute" and that evidence you cannot always get.

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276. What I want you to tell me is this—many of these coloured servants are virtually prostitutes, are they not?—Yes; there is no doubt about it: they are virtually prostitutes.

277. And under the Contagious Diseases Prevention Act you have an opportunity of fully tracing them and keeping them under observation, have you not?—Particularly when they get diseased; that is one of the strongest proofs that you can bring. Say that a soldier has contracted syphilis from a servant, you can get at her very often and bring her up.

278. Therefore, by virtue of the Contagious Diseases Prevention Act, you can protect probably an innocent family from one of the most dreadful diseases that exists, namely syphilis?—Yes. It is too prevalent at the Cape. I had a letter the other day from Dr. Russell, the District Surgeon at Oudtshoorn, saying that he had seen some of my reports in a blue-book, and that it was the intention of the Oudtshoorn Municipality to ask the Government to have Part I. of the Act, referring to periodical examinations of common prostitutes, proclaimed in the district of Oudtshoorn.

279. With regard to men and women being punished, in the case of a man as you stated, he as a rule gets his treatment at home, but a man does not sell his body for lust, does he?—No, he does not.

280. And secondly, a man, if he has syphilis, does not as a rule continue connection?—Not as a rule; it is too painful.

281. In the case of a woman, she continues selling her body, although even she has to suffer?—Undoubtedly.

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282. And the chances are that unless she was stopped, she might go on for months and months giving syphilis to men?—Yes, she does it sometimes when not controlled by the Act.

283. *Mr. Anderson.*] I understood you to say that you have no experience with regard to the condition of affairs in England now, owing to the repeal of the Act?—I have often talked to service men about it, and they are always delighted to see the C. D. Act in force at Simon's Town, and they invariably tell me that venereal disease is very bad in England. I have referred to the letter I had from Dr. Hoskyns, of the "Crescent."

284. Do you know whether the Act has been repealed in India?—Yes, but I believe it is very rotten there, I have heard so.

285. Is not their Act there called the "Cantonment Act"?—Yes, in India.

286. Is not that practically the same thing?—It is, somewhat, and it does a lot of good I believe.

287. *Mr. T. Searle.*] I suppose soldiers and sailors are not necessarily worse than other people in this respect, it is only that they are more under supervision and the disease is discovered sooner than it is in the ordinary way?—Yes, that has probably a great deal to do with it. I do not think they are worse than civilians.

288. So that Simon's Town, having so many soldiers and sailors, makes people think that it is worse than other places?—Do they think that it is worse than other places?

289. I understand so from what was said before the Committee?—Soldiers and sailors are subject to supervision, and the medical officer knows when men get the disease, because they never conceal it in the navy, their shipmates would not allow it; if a man gets a chancre, he has to go and give himself up, so that it is known. I do not say that soldiers and sailors are worse than others.

290. There are a good many soldiers and sailors who are quite pure I suppose?—Undoubtedly, and

the number is largely increasing. They have got a much better class of men in the service now than they had formerly, at least the officers say so.

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291. You say that you cannot abolish prostitution?—I do not think so.

292. Why not?—Human nature is very bad. A couple of years ago I remember reading a statement made I think by the Rev. Mr. Neethling at one of the Synods. He was speaking of the immorality in the district of Stellenbosch, and I took a note of it at the time. I think he said that there was hardly a girl above the age of 14 who was not a mother there, or something to that effect. It is very bad everywhere, especially among the coloured girls.

293. Do you consider prostitution a legitimate trade?—Yes, though that is hardly a fair question. There may be of course religious scruples, but I think it is a trade that must be faced by the community and by the public, and regulated, because it is a most dangerous trade as it is carried on, and a terrible trade.

294. Do not you think you can prevent vice by legislation to a certain extent?—You do not acknowledge vice by legislation. I cannot see for the life of me the force of your argument that the Contagious Diseases Act in any way recognizes vice. It does not do that.

295. But still, you start on the presumption that there must be prostitution?—I do not see how you can help it.

296. And those people who do not agree with you, you call faddists? What do you mean by "faddists."—I say that prostitution is a dangerous trade, and I think it ought to be regulated, and I cannot see that by having a C. D. Act for the purpose of checking the spread of venereal disease you are doing anything improper, because it may be carried even into innocent families. I cannot see how you are in any way recognizing vice. That is my idea. I cannot see it.

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297. *Dr. Hewat.*] Do you think that illegitimate connection exists where men and women mix?—It always will.

298. That being so, you hold that the C. D. Act is necessary to control it?—I do not say it controls it, but it controls the spread of venereal disease undoubtedly.

299. *Mr. T. Searle.*] You said it was only these girls whom you knew were not decent that were subjected to periodical examination?—I said that I only took action in the case of such girls.

300. If a girl came before you for the first time, how could you know whether she was decent or not?—These women are known at Simonstown; you can see them knocking about.

301. Information must be laid about them, must it not?—Yes. Information must be laid on oath before a Justice of the Peace.

302. I understood you to say that you do not take that information?—No, not always. I would not take the information if a decent and respectable white woman was accused.

303. How do you find out whether a person is decent or not?—We can tell as a rule, and sometimes information is given me by the prostitutes themselves when they come up for periodical examination. A coloured girl for instance, comes to me after examination and says that such and such a person is carrying on prostitution, at the lower north battery. I ask what she is like and where she comes from and other particulars, and the chances are she eventually comes and submits to examination. If she does not do so, I send my lay inspector to investigate the case, and he exercises tact. If I thought she was a decent girl I would not send him. Then perhaps he speaks to the woman and asks her whether the report is true, and she generally says yes. Then he says she had better come up for examination. If she refuses, and I find that she is still carrying on prostitution, I take an information on oath from the woman

and send it to the magistrate, when he takes action or not as he thinks proper. Dr. H. Clarke, J.P.

304. If she says no to the inspector, what do you do then?—Then I try to get information about her, I have no power to use compulsion. July 13, 1906.

305. You admit, do you not, that there is a possibility of mistakes being made?—No. I have never made one myself yet, I can honestly say.

306. How do you know that?—I have never made a mistake yet.

307. In a number of cases you would not know when you had made a mistake, would you?—If I accused a woman wrongly, I should find it out. I think I may say this, that in sending a lay inspector to investigate cases in that way, I do not act strictly in accordance with the Act. because the Act says simply a woman may submit either voluntarily or on trial before a magistrate; the magistrate may order her to do so. According to the Act, the thing to do is to take an information on oath and summon the woman before a magistrate; but I find it saves all that, if a woman is known by me to be a common prostitute, by the inspector going to her and saying that she is carrying on prostitution and she had better come to the hospital. I have never known of any abuse at all.

308. You said that sometimes servants are a source of danger to families?—They are a great source of danger.

309. Do you warn families when you find such a thing?—I am not going to do that; it is not my work.

310. What help is this Act in the direction that Dr. Hewat suggested?—You must remember that a woman must be a common prostitute before she can be examined. I may tell the Committee that I had a servant girl in my own employ, and not very long ago she got out of the window one night. It was near the Queen's battery at Simon's Town, and she went and had connection with a

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gunner. She gave this man the venereal disease. She got half a crown, and then returned and went back to bed. A few days afterwards the man was found to be suffering from disease and he informed against the girl. My lay inspector found it out; the girl submitted to examination, and she was found to be suffering very badly indeed from syphilis. She went into hospital and was treated there and afterwards she went into service again. That girl has very cruelly lapsed since and has been in hospital twice for gonorrhœa.

311. With regard to the reports that you referred to from the Naval medical department, do the officers generally in the army and navy hold the same view with reference to prostitution that you do?—Yes. These reports are published in the blue books every year, from time to time, but latterly the character of the Naval reports has been altered somewhat. They are nothing more now than a mass of figures and statistics, and reports from individual medical officers serving in different parts of the world.

312. *Mr. Wood.*] The Contagious Diseases' Prevention Act in your judgment really means the regulation, inspection and mitigation of the disease?—Yes.

313. That is as far as you indicate it?—Yes.

314. When you get a warship in, you have 500 or 600 men in Simon's Town?—That is the case very often, sometimes many more.

315. Do you have an influx of visitors from Cape Town and elsewhere?—Prostitutes do come down sometimes when diseased, and servant girls are picked up by the men, sometimes giving disease to the men.

316. So that the Act is absolutely necessary for a seaport town?—Yes, there is no doubt about it.

317. *Dr. de Jager.*] I think you said something about not literally following out the Act?—I thought you would pick me up on that point. The Act says that a woman may submit voluntarily or

be tried by a magistrate. I have no authority to go to a woman and say "you are a prostitute, come and be examined." nor have I authority to send my lay inspector, but from experience I have found that my system works very well, and saves the woman from going before the magistrate as well as a lot of bother. She comes up and simply submits, and signs a voluntary submission paper to attend the periodical examination.

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318. Would you advise the amendment of the Act in that respect. or should it remain as it is, in your opinion. You really anticipate an improvement in the Act?—Yes.

319. You work the Act in a way you think best and do not carry it out literally?—I do not see why a medical inspection should not be authorised by the Act and treat with the woman before any action is taken, for she may voluntarily submit to come up.

320. You said that some women were inclined to stay away when they had the disease and keep out of the way?—Yes; you have to watch them very closely; that is speaking of the generality of the women. I know that in London there are women who go voluntarily to the Lock hospital and other hospitals for examination, particularly if they think there is anything wrong.

321. Do the coloured women mostly stay away?—Yes.

322. Your experience of white women is, that they are rather inclined to see that they keep well?—I have not had much experience of white women at Simons Town; they are nearly all coloured there; there are very few white prostitutes indeed.

323. *Dr. Hewat.*] Have you had many cases where probably four or five men have become infected from one woman before you got her under observation?—Yes.

324. Have you had many cases?—I knew a woman once to have connection with 13 men in

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one evening, I heard of three men she had infected with syphilis.

325. Do you know of any cases where women on your books have been in the employ of families and have given syphilis to one or more members?—I have never known a case.

326. Do you know any cases of women who are not on your books giving syphilis in families?—There are lots of cases.

327. In your private capacity you have attended children for syphilis that has been contracted from servants?—Yes, lots of cases undoubtedly. I should like to say that from time to time an amending Bill has been introduced into the House. I remember the late Honourable Mr. Van Rhyn. I think it was, introduced a Bill some time ago. I cannot see, however, that a Bill like that could be of the slightest use, when the principal clause says that when a district surgeon knows that a woman is suffering from venereal disease and she is not under treatment, he may order her to put herself under treatment; that would not do any good, for in the first instance I think he would hardly ever know it, and secondly if she was under treatment by a private practitioner she might go free and carry on her business as a prostitute. With reference to question 253 asking whether I remembered the Zeeman case in Cape Town, I beg to point out that Miss Zeeman was arrested under the Morality Act and not the Contagious Diseases Prevention Act. The former measure makes prostitution a crime, the latter does not, and any policeman under the Morality law may arrest any female whom he believes to be soliciting. It seems to me some confusion exists between the two Acts. As I have already pointed out, a woman no matter how common she may be, cannot be arrested under the Contagious Diseases Act before she has been tried on sworn information by a Magistrate and refused to obey his order to submit herself to periodical examination, when he may issue his warrant for her apprehension.

Dr. Alfred John Gregory examined.

328. *Chairman.*] You are Medical Officer of Health for the Colony?—Yes. Dr.
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329. Do you know the object of this Committee? July 13, 1906.
—I am not quite certain about it.

330. Certain petitions have been presented to the House for the repeal of the first part of the Contagious Diseases Prevention Act, and for raising the age of consent?—Yes.

331. We should like to hear your opinion upon the first part of the Act and its working in the Colony?—My opinion is that it has been a very beneficial Act, and it has undoubtedly saved the public from a considerable increase of syphilitic disease. Of course it is only in operation in certain parts of the Colony, and in that respect its operation is limited.

332. You refer to the first part of the Act?—Yes. I only speak of the first part. It formerly did more good than it has been doing at present.

333. Why so?—Because in 1902 the Government brought in the Morality Act. I think it was promulgated in December, 1902. From that time a very large proportion of the prostitutes on the register absconded, and, furthermore, new prostitutes refused to register, or they kept out of the way. In working Part I., the administration was always most careful not to associate or identify itself in any way with the police, and, as far as could be possibly done, the women themselves were assured that any information they gave would not be communicated to the police for the purpose of instituting proceedings under the Morality Act; but nevertheless, a very large proportion of the women did not care to believe it; but, as a matter of fact, on no occasion that I am aware of has any information ever been given to the police, and although in Cape Town, when the Act came into operation, the police applied for information to the medical inspectors, it was

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refused, and they have always kept their operations separate from ours, but of course the two Acts are a ridiculous contradiction of one another. It seems rather absurd that one Government department should be doing all it can to find out everything about these women and bring them to book, while the other Government department is, I will not say recognizing the thing, but not taking any active measure in regard to it, in fact tacitly recognizing it.

334. Do you think that prostitution has decreased in Cape Town from the information that you have got from the officers?—That is a matter there is some difficulty about answering. I mean it is difficult to obtain definite information on it, but the opinion I have formed from various quarters is, that certainly prostitution has not decreased, and it has made a very large amount of what you may call illicit prostitution. I think it has caused a good deal of increase of prostitution among servants and that class, the lowest kind of women who have connection with men out in the open, on the Woodstock beach and so on, and these are the women who are more likely to spread the disease than women under proper supervision.

335. *Dr. Hewat.*] Do not you think that the present Municipal Morality Act has a good deal to do with it?—I am not aware that the Municipality work their Morality Regulations now; my impression was that they dropped their operations as soon as the Morality Act came into force, or even before that. I think the Cape Town Municipality passed some rather stringent bye-laws relating to brothels, and I think they were virtually found to be *ultra vires*; at any rate, the Cape Town Council ceased working them.

336. *Chairman.*] What is the reason, do you think, of these women disappearing from the streets and stoeps, where they were soliciting before. Is that due to the Municipal regulations?—That relates simply to the prevention of solicitation; that is all right.

337. *Dr. Hewat.*] That falls under the Morality Act, does it not?—Yes, indirectly, but under the Police Offences Act also; that is since 1882. That gives full power to deal with solicitation.

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338. You stated that prostitution is carried on among servants and that class; would not that be greatly due to the present Municipal Morality Act, which does not recognize or punish prostitutes; hence these women are driven into situations, and they are ostensibly servants instead of common prostitutes?—There is no Municipal Morality Act that I know of; there are regulations prohibiting brothels, which are practically on the same lines as the Morality Act. The Municipal regulations sought to place the onus of a brothel on the owner of the house and his agent, and I think their regulations came to grief; it was found that they were *ultra vires*. I am only speaking from recollection; it was a good many years back.

339. What Act gives power to a policeman to arrest a prostitute?—That is under the Police Offences Act, which prevents solicitation.

340. *Mr. Anderson.*] It is said that the two Acts cannot be worked satisfactorily and that they are in conflict; is that so?—Yes; they are in conflict.

341. What would you suggest as a remedy?—It is remedying itself now. The Morality Act came in in 1902, and the number of women under examination in 1902 was 809; in 1903 it fell to 512.

342. *Chairman.*] Is that the whole Colony?—In the districts in which the Act is in force; it is only in force in Cape Town, Wynberg, Simon's Town, East London, King William's Town, Port Elizabeth and Uitenhage, and more recently it has been brought into operation in Umtata, the headquarters of the C.M.R. In 1902 the total number of women presenting themselves for examination was 809; in 1903, 512; in 1904, 356; and in 1905, 321; but since that, in Cape Town at anyrate, the number is increasing again, owing to the fact that the police have virtually ceased working the Morality Act.

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I understand that now they never take action themselves, but they leave it to the householders under section 27, so that practically the prostitutes feel more secure. That happened in October last year; the police began to cease taking proceedings, and the women have gradually begun since then to come back, so that whereas in Capetown, for the last half-year, 96 had already been placed on the register—it is now 105 if we take up to the present date.

343. *Mr. Anderson.*] There has been a gradual diminution, has there not, in the cases of examination of women?—Yes.

344. As regards that, is it within your knowledge that cases of disease are on the increase or decrease at the present time?—On the whole, probably there is an increased proportion of disease among the women. A table which I have here shows the number of diseased cases during each year in Capetown. In 1902, it was 20·2 per cent. of the number of women examined; in 1903, 13; in 1904, 25·4; and in 1905, 33·8 per cent. That is, all these women were found to be diseased, but some were found diseased more than once in the year.

345. Outside of those cases of disease, consequent upon the examination of women, do you know whether in general, disease is on the increase in Cape Town?—The reports seem to show that it is on the increase, for the Dispensary has reported specifically that there is among the patients presenting themselves there a very great increase in the number of syphilitics, and they have called the attention of the Government to the fact, because they say that is not the class of cases which they should be called upon to treat. And I think there are a larger number of women under treatment at the Lock Hospital under Part II. of the Act.

346. What is that increase attributable to?—It is generally attributed to the fact that there is more illicit prostitution, which is not under medical control.

347. You said just now that since the Morality Act came into force, many of the women had absconded: where do they go to?—We call it “absconded” when they do not turn up for examination and cannot be traced. It is impossible to say where they go to.

348. Do they go away from the district altogether?—Some probably do, and they may go over to Wynberg: probably the majority simply hide themselves and do not turn up, so they cannot be traced.

349. In the same district?—Yes. With regard to the European prostitutes, it is difficult to say what happens. A certain amount of diminution has probably been caused by the operation of the Immigration Act, owing to the ruling of the Supreme Court, that living here in the Colony and even possessing property does not constitute domicile. The European prostitutes are mostly foreigners, and they are regarded as aliens, and if it is clearly proved that a woman is a prostitute then the Immigration Department will step in and remove her, and of course although the actual removals are not so very many, it deters a good many others from remaining in the place, and they clear out.

350. *Dr. de Jager.*] I suppose a great number would have gone away after the war?—Yes: a great number did go away, but the chief diminution has been amongst the Europeans, although not the whole diminution, for example, if we take Cape Town in 1902, the number of Europeans was 244; in 1903 it fell to 87; in 1904 it was 60; in 1905 only 18, whereas the coloured women were in 1902, 231; in 1903, 151; in 1904, 58; and in 1905, 100, clearly showing that the operation of the Act has diminished the European prostitutes, and that, as I say, has thrown prostitution back on to the low class coloured girl, who is uncleanly and very largely diseased. For example, in the Contagious Diseases Hospital in Roeland Street at the present

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moment, there is only one European under treatment, and I think there are about 47 coloured women. A great amount of the diminution of the whites has probably been due to the decrease in the population; very many cleared out after the war, and then there is the operation of the Immigration Act, so that you cannot put it all down to the Morality Act.

351. *Dr. Hewat.*] You are strongly of opinion that the Contagious Diseases Act has kept down the spread of venereal disease?—It certainly controls it, undoubtedly. I have no doubt about that. You have only to take this fact into consideration: let us say, for the sake of argument, that you have 47 patients now in the Roeland Street Hospital, and those 47 prostitutes will be under treatment on the average say 30 or 35 days each. If they were out and about, they would be plying their trade, and if you take the lowest computation that they go with a man once in a night, which would be a very small computation among that class of women; if you multiply 47 by 35, you arrive at the number of 1,645 opportunities of conveying infection; but quite apart from that, if a woman did not go into hospital she would not be treated, and therefore not cured at all, and she would remain a source of infection perhaps for months, until she got so bad that nobody would go with her.

352. In your opinion, is there any necessity to apply the Act to the male section?—In my opinion you could not apply it to the male section very satisfactorily, but I see no reason why a clause should not be inserted in the Act similar to a clause that was suggested by the Select Committee of the Legislative Council in 1895, making it a penal offence on the part of anybody who had illicit intercourse, knowing him or herself to be suffering from venereal disease. As far as males are concerned, it would amount to nothing in practice, but such a clause would remove the

objection which is held by so many that the Act applies to the female sex and does not touch the males.

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353. *Dr. de Jager.*] Is this the clause you refer to: "If any person, knowing that he or she is affected with contagious disease, shall by means of illicit intercourse, communicate such disease to another person, he or she shall be guilty of a contravention of this section, and shall be liable, on conviction before the Resident Magistrate of the district, to the punishment provided in the last preceding section"?—Yes; that is the clause that I refer to.

354. *Dr. Hewat.*] The Contagious Diseases Act is as much to prevent the spread of disease "as to cure disease," is it not?—Undoubtedly.

355. In the case of men, there is not the same tendency to spread the disease; he is not a centre of disease, whereas a woman is?—Yes; and that is one strong reason why the Act should apply to women. The man does not spread the disease to the same extent. The woman, of course, gets it from the man in the first instance; but still he does not spread it to the extent that a loose woman does; but the real reason why women that are prostitutes should be subjected to the operation of the Act is that it is a practicable thing to do, whereas in the case of men it is not practicable.

356. At the present moment, if the Contagious Diseases Act were repealed, is there any Act whereby you can compel a person to go under treatment for venereal disease?—None whatever, if you mean also Part II. of the Act.

357. There is nothing to prevent a servant from going into a family when she was suffering from syphilis?—Nothing whatever.

358. Under the present Contagious Diseases Act you have the power to remove a woman and put her under compulsory treatment, have you not?—Only if she is a proved prostitute.

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359. *Mr. Anderson.*] Do you know of any cases of disease being introduced into families by means of servants?—Yes, a large number, but that is Part II. of the Act. I could instance a considerable number of reports of the district surgeons where they have known this to be the case. In the Oudtshoorn district there was the case of a child who contracted the disease from a nursemaid who had syphilis, probably through kissing the child. The mother got it, probably from suckling the infant and she transferred it again to the father, and when the family came under treatment there were two other children found to be affected, so that in all, five members of this family were affected with syphilis through a nurse girl, but that comes under Part II. of the Act: she was not a proved prostitute.

360. Do you know it is a common thing for prostitutes to seek admission into families as domestic servants?—Undoubtedly. At Wynberg and also in Cape Town there are a number of girls who are under examination periodically, and yet are in actual service at the time. Their mistresses moreover know it, and they let them go to be examined. That is due to the state of the labour market. In his last report the district surgeon at Wynberg reported “Although the women who are examined are *bona fide* prostitutes and do not try to evade the examination, there is a number who are of the mixed servant and prostitute class, who are difficult to lay hold of. They are in domestic situations during the day, but proceed to their homes at night, and occupy the interval in the prosecution of prostitution. Some of these women are on the register, or rather some on the register are domestic servants, that is to say, they take situations and remain in them until their mistresses discharge them at the end of a month or so, during which time I do not strike them off the register, for the reason that they would have to be put on again as soon as they lose their situa-

tions. In some instances, mistresses give their servants permission to attend for examination, as I always inform them by letter so soon as I know they have taken them into their service. In this case, so long as they remain in service, I examine them only once a month, and then chiefly in the interests of the family, as I explain to them. They are only too glad to adopt this course, but it shows to what lengths the community are put for labour of a domestic character to be compelled to engage women of this character." The same thing exists in Capetown, and I ought to say, that I am strongly of opinion that the Act should be continued, indeed I think it should be extended in its area of operation. There is one place in the Colony where, undoubtedly in my opinion, it should have been applied years ago, and that is Kimberley. On a number of occasions I have reported on that. Of course, the Act was brought in to protect the Imperial forces, and that is why it was put in force at the different ports, and at Wynberg and King William's Town, and has been extended to Umtata, but although I have reported very strongly with regard to Kimberley, the Government has never yet brought it into operation in any place that is not a military station or a port. There is no question about Kimberley being a centre of infection for the whole of the native territories, and the Green Point Location there, harbours hundreds of coloured women, who are all prostitutes for the natives employed on the mines. These women are largely diseased, and the natives contract syphilis and take it back to their kraals, where it is spread.

361. *Dr. Hewat.*] As a medical man, you recognise that prostitution is an evil that exists in all large towns?—Not only in large towns, it exists everywhere in some form or another.

362. Do you think that legislation can prevent it?—You cannot prevent it.

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Dr. 363. You think the best legislation can do is to
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uly 13, 1906. 364. Under the least harmful conditions possible?
—Yes.

365. *(Chairman.)* With regard to the petition that has been presented to the House. It states “It (the Act) is more frequently regarded by the impure as a license for immorality than as a preventative to the spread of disease.” What do you say as to that?—That is not the case. As I have pointed out in former reports, a man who goes with a prostitute does not stop to think whether Part I of the Contagious Diseases Act is in force in a particular district; he probably does not know it nine times out of ten, and you must not confuse the working of this Act with the question of preventing open solicitation: that is prevented by the Police Offences Act. Solicitation should be put down of course, but this Act does not countenance solicitation in the least.

366. The second section of the petition says. “Where disease exists, there is often a tendency to hide it, for fear of being brought under the operation of the Act.” What do you say to that?—A prostitute comes under the Act, not because she is diseased, but because she is a prostitute, and in the working of the Act, the intention of the administration is to discover known prostitutes; and we have in the larger towns such as Capetown, a lay inspector who goes round and makes enquiries and finds out these women. As a matter of fact, the majority of the information comes from one prostitute in regard to another, who says “there is another prostitute in our house,” but the majority when they come, are not found to be diseased; they come quite voluntarily, and it is very rare that we have to force a woman on under the Act; as soon as she is aware that you know she is a prostitute she says “Yes,” and she comes quite voluntarily, and the effect of the Act has been found to be that it has given an improved

tone among these women, they keep themselves cleaner and they respect themselves more and they come up quite willingly and are thankful for the treatment.

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367. The third clause of the petition says "Where disease has been accidentally contracted the discovery of it to those in authority leads to the persons affected being at once classed with persons of ill-fame, and provided for as such by the Act," what do you say as to that?—I do not quite follow that; that is the whole intention of Part II. of the Act to treat the disease as a disease which is contracted in a very large majority of cases quite innocently. The only thing you can apply that clause to would be Part II. of the Act.

368. Section IV. of the petition says "The Act does not fail to retain for immoral purposes those who by their own fault or misfortune have been unable to prevent their names being placed on the town list"—No, that is not the case, if she is no longer a prostitute. she is struck off; if a prostitute gets married her name is struck off the register on account of the marriage.

369. *Dr. de Jager.*] Is it a private register?—Absolutely private; the police are not even allowed access to it.

370. *Chairman.*] The next paragraph of the petition says "Punishments under this Act are inflicted without fair and open trial"—As a matter of fact there is no punishment inflicted. If the magistrate comes to the conclusion that a woman is a prostitute he says "You must be placed on the register and come up for periodical examination"; if she fails to come up for periodical examination then she is liable to a penalty, but that can only be inflicted by the magistrate after holding an inquiry.

371. *Dr. de Jager.*] That inquiry ought to be held with closed doors, ought it not?—It would not be wise to have it in open Court where the public could come in; it is better for both parties that the inquiry should be held privately?—Yes.

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372. (*Chairman.*) When the petition says, "The Act does not fail to retain for immoral purposes those who by their own fault or misfortune have been unable to prevent their names being placed on the town list" it is not correct?—That is not correct.

373. *Dr. de Jager.*] Men who contract venereal disease generally submit themselves to medical treatment do they not?—Yes, they do not necessarily go to a medical man; they frequently go to a chemist, but they are subjected to treatment.

374. In the case of a woman, she does not generally know it at the commencement, does she?—She may not know it, but she has to get her living, whereas a man with a chancre feels very unhappy, and is very careful for his own sake not to go with any female for a long time afterwards; the woman has to get her living, and continues her trade to the last moment.

375. (*Chairman.*) Clause Seven of the petition says, "The Act provides that on the first offence a person who it may be has been deceived by another shall be immediately classed as a prostitute, and subjected for the rest of her life to frequent surgical examinations, no inducements being offered her to return to a pure and virtuous life." What do you say as to that?—It is practically impossible for any woman who has been merely seduced to be put on the register. She is put on the register, not because she is not a virgin or is impure, but because she lives in a brothel. Of course, that is prostitution for profit, but the mere fact of having illicit intercourse is not prostitution, if it is not done for open profit and if it is not done in a recognised brothel. I may say, as far as I can recollect, there has never been any allegation of a woman being put on the register who was not a prostitute, with the exception of one allegation in regard to a case at Port Elizabeth.

376. Do you remember the Zeeman case in Cape Town here?—That girl was not put on our regis-

ter : that was a different matter altogether and had nothing to do with our register : that occurred under the working of the Morality Act by the Police. The case that I refer to was that of a girl at Port Elizabeth, and the thing is dished up from time to time ; it was alleged that she was not a prostitute, but the girl was a prostitute although in service at the time ; subsequently she was on the register as a recognised prostitute.

377. There is a second point in the petitions which have been presented and that is with regard to raising the age of consent. Will you give us your opinion upon that?—It seems to me that it would be utterly unreasonable to raise the age of consent to 18, which I understand is the age proposed : out here, there is no question that girls become women at a very much younger age than they do at home ; this is quite common knowledge, but to give you an example, I may mention that the other day we had a case of a youngster who was suffering from small-pox at Wynberg and we could not find out how he contracted it till he admitted that he must have got it from a girl of 15, with whom he went and who was sick, and it was found subsequently that a number of other boys went with this girl of 15 ; that sort of thing is going on constantly.

378. I may say that the age of consent in England is 16, in France 21, in Belgium 21, in South Australia 17, in Victoria 16, in Tasmania 15, and here we have it only 13?—(No answer.)

379. *Mr. Anderson.*] Do not you think that 13 is a very low age?—Undoubtedly. I thought it was higher than 13 : it should be raised, I think, to 16.

380. *Dr. de Jager.*] If it was as low as 13, the thing would defeat itself, because hardly anyone would attempt to rape a girl of 13 ; if you make it so low, you defeat your object?—I am not prepared to say that nobody rapes a child under 13 : we have had a number of such cases come to our knowledge.

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381. Do you think there has been an increase in the number of prostitutes who have gone into service as servant girls?—My impression is that in the Cape Peninsula a very much larger proportion of coloured servants are prostitutes than used to be the case a few years ago. That is my experience of the servant class generally. From what I see going on I think a large number of coloured servants are prostitutes.

382. Is it that the prostitutes have gone more into service or that the servant girls have taken more to prostitution?—I am not prepared to say that prostitutes have gone more into service. I do not think they have to any extent, it is rather that servants have become more often prostitutes, but you must remember that a large number of coloured girls are of recent years employed in factories and work of that kind, which gives them better opportunities for prostitution; they work in cigarette factories and have their evenings to themselves.

383. The Police Offences Act is really an Act intended to put down soliciting in the streets, is it not?—Yes, among its other objects.

384. And the C.D. Prevention Act is an Act to regulate prostitution with a view of minimising the spread of disease?—No, not regulating prostitution, but controlling and preventing disease.

385. The Morality Act was really one to crush prostitution, was it not?—Yes, prostitution and gaming.

386. Can you give us any suggestion as to an amendment of the Act which would make it more workable. Do you think the inspectors should be given more latitude?—Possibly the Act would be better received if it were placed under a definite administrator, who would be responsible for seeing that it was properly worked. At present there is very little cohesion about the matter. Furthermore, Part II. of the Act is most defective, for there is no provision for compelling a person to

remain in hospital and kept under treatment : that is the difficulty we have up-country.

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387. *Mr. Wood.*] Seeing that prostitution apparently is being practised more by the lower orders, is it not owing partly to a want of education, because the higher class prostitutes, the white women, seem to a certain extent to protect themselves and keep themselves healthy. The lower orders perhaps have gone into this class of business without really knowing to what extent it may prove their ruin?—The lower classes supply the prostitutes all the world over, for which there are a number of good reasons, but no doubt the coloured person has a very much lower sense of morality than the white, and this is more plainly seen in the native districts where the degree of morality is in inverse ratio to the extent of their civilisation ; because when the native becomes Christianised and the native checks to immorality are removed, they become very much more immoral. This is also seen in Bechuanaland among the Baralong natives. If you ask the native Resident Magistrates, they will tell you that an enormous amount of immorality goes on at what are called “tea meetings.” Native “Dances” and similar ceremonies have been stopped in some places, as they are considered immoral ; but at the “tea meetings” and so-called civilised religious functions a great deal of immorality is stated to go on.

388. That is one of the reasons why you think at present the Contagious Diseases Act could not be repealed?—On general grounds neither part of the Act should be repealed, but with regard to Part I it is in force in so limited a number of places, that in my opinion it should be extended rather than repealed.

389. That would mean the suppression to a certain extent of the evil that is so rampant, would it not?—In the larger centres yes. There is no doubt that the pure native is becoming rapidly

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390. *Mr. T. Scarle.*] I have a letter here from Taungs, Bechuanaland, written in Dutch, in which it is stated that syphilis among the natives there is something awful. The writer says that he has spoken to the magistrate at Taungs on the subject, as from 50 to 75 per cent. of the natives are infected with syphilis, which to the Europeans living among them is a positive danger. He asks if nothing can be done. I should like to know from you whether this is the case?—It is undoubtedly the case. I had a medical inspector to enquire into it a few months ago, and he came to the unhesitating conclusion that taking the very minimum, one in every ten persons was infected among the natives, but persons living there, like the magistrates, put it down at anything up to 80 per cent., and if you go to Gordonia, the difficulty is to find anyone among these bastard natives who is not infected with syphilis. The thing is so gigantic that it is difficult to know how to deal with it.

391. Unfortunately it is also spreading among our white families on farms, is it not, who may contract the disease quite innocently?—Yes.

392. We isolate people who are infected with small-pox and other diseases: is it not possible to make some law by which there should be compulsory treatment of all people suffering from syphilis?—That, as I say, is where Part II. of the Act is defective; it does provide for compulsory medical treatment, but it does not provide the necessary machinery for enforcing the Act; that is to say, you can order a person to place him or herself under medical treatment, and if he or she does not, you can say you must come under the treatment of the district surgeon, but it is found that in operation is very ineffective. At the most, you can compel a person to come up once a month for treatment, but you do not know whether the

medicine is taken in the interval, and, as a matter of fact, many do not take it, and the only thing is to bring them into hospital and keep them there. The Government did have at one time contagious diseases hospitals all over the Colony, but they were wretchedly administered, most terrible shanties, and virtually the people—the lowest coloured paupers—were only just gathered in there, without any supervision whatever over them. The gaoler was paid £1 a month, as a rule, to look after them and issue their rations, and many of these hospitals were an eyesore in the place—as, for example, at Beaufort West. The municipality there was always petitioning Government about the condition of the Contagious Diseases hospital there. Then in 1904, mainly, I think, on account of the necessity for retrenchment, the Government, by a circular instruction, shut them up right through the Colony, and the reports are now almost universal that syphilis is on the increase, due partly to that fact. Nearly all the district surgeons report that the want of hospital accommodation is a tremendous drawback. Of course the Government did have a very large number on the list, and it was felt that a large number of the patients actually in the hospitals were in a late tertiary condition, horrible to look at, but not dangerous in regard to spreading the disease. Personally, I have always contended that there should be two or three contagious diseases hospitals at the main centres of the Colony, properly conducted, in which infectious cases not under proper medical treatment or a danger to the public, could be drafted in. The Government is now running at Klipdam, for example, a big scurvy hospital, as there is a good deal of scurvy in the district, whereas they are running no contagious diseases hospital.

393. *Mr. Anderson.*] You said you thought Part I. of the Act ought to be applied to Kimberley?—Undoubtedly.

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394. Should it not also be applied to the district referred to just now by Mr. Searle?—There are no particular prostitutes there; there are some village prostitutes in Bechuanaland, but not common or public prostitutes in the sense that the Act implies.

395. Are there other centres in the Colony, besides Kimberley, where you would suggest that Part I. of the Act should be enforced?—It would probably be effective in most of the larger towns like the Paarl and Stellenbosch, but it is not of so much moment there as at a place like Kimberley, where there are thousands of single young natives coming in month by month, and earning very fair wages, and they go with these women and contract syphilis, and then they go back to their own homes in the Territories where again intercourse is very promiscuous, and thus disease is spread all over the place.

396. The natives employed at the De Beers mines are not subject to the danger, I take it, because they are in compounds at Kimberley?—They are in the compounds certainly, but there is a large number of natives outside, and I am informed on good authority that a large number go up to the Green Point Location, which is pretty nearly supported in that way by these women.

397. *Mr. T. Searle.*] There is a good deal of ignorance with regard to the disease, is there not, in the country districts?—There is, although we have issued widely a circular in Dutch and English and Kafir, describing the disease and indicating how necessary it is for people to come up for treatment.

398. Have you ever heard of the superstition that is very prevalent, that if anyone affected with syphilis can have sexual intercourse with a virgin the disease leaves him and is imparted to the female?—That is not so much the idea with syphilis as with gonorrhœa. I know that it is a very common idea, even in England. They say

that if a man has an obstinate gleet, if he can have connection with a virgin it will cure him, and this is often the cause of rape and improper intercourse with children.

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399. *Chairman.*] Does the man communicate the disease?—Yes: he communicates the gonorrhœa to the female, but he does not cure himself.

400. At the large hospitals do you get a number of children who have got gonorrhœa?—Yes, in England infants sometimes.

401. The idea referred to by Mr. Searle is very prevalent in the country, is it not?—I daresay it probably would be. I have not heard of it in connection with syphilis so much. There is no doubt about it, that syphilis is spreading all through the Colony, but it is difficult to get statistics.

Monday, 16th July, 1906.

PRESENT:

MR. THERON (Chairman).

Mr. Anderson.

Mr. T. Searle.

Mr. Wood.

Dr. de Jager.

Dr. Harold Augustus Engelbach, M.B., examined.

402. *Chairman.*] What is your position?—I am Medical Officer of the Lock Hospital, Police Medical Officer, Medical Officer of the Breakwater Convict Station, Medical Officer of the Cape Town Gaol, and Medical Officer of the House of Correction.

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403. Do you know the object of this Committee?—I do.

404. Certain petitions have been sent to us, in which two requests are made, the first is for the suspension of the first part of the Contagious Diseases Act, and the second request is for the raising of the age of consent. Do you agree with these petitioners that it would be safe to suspend the first

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part of the Contagious Diseases Act?—No, I do not.

405. What are your reasons for saying that?—I think that the Contagious Diseases Act is a safeguard against the spread of venereal disease.

406. Do many cases of women affected by disease come to your notice?—A great many.

407. Is the number increasing in your opinion?—It is.

408. Do you find the increase among the white women or is it more among the lower classes?—More among the lower coloured class. I may say that I only took over the Lock Hospital about two years ago—I think two years next October.

409. And since then, your opinion is that the number has increased?—Yes. I have brought with me a table showing the working of the Contagious Diseases Act from 1900 up to 1905, and then for the half-year beginning the 1st of January this year up to the 30th of June.

410. Do you put that in?—Yes. [*See Appendix.*]

411. With regard to the Act of 1902, the Morality Act, has that been a help in preventing these women practising their vice?—No, I think it rather drove them into secrecy than otherwise.

412. It drove them away from the streets, you think?—Yes.

413. Do you think that in practice the two Acts harmonize?—No; they are in direct opposition to each other.

414. Suppose you were to comply with the request of these petitioners, which of the two Acts would you rather lose?—The Morality Act would be the one, but I do not know that I should repeal it altogether.

415. Parts of it?—Yes.

[At this stage Mr. THERON left the room, and Mr. ANDERSON took the chair.]

416. *Acting Chairman.*] Have you anything to suggest with regard to the alteration of the law so as to make these two Acts work well together simul-

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taneously?—I do not think they would work well together; I do not see how they could.

417. Have you any suggestions to make as to an amendment in the latest Act, the Morality Act?—I certainly think that it ought to be done away with, with the exception of the part relating to men living in brothels and on the proceeds of prostitution.

418. That, of course, you would wish retained?—Yes.

419. Which is the part that you wish repealed, then?—As regards doing away with brothels.

420. You said just now, in answer to Mr. Theron, that the effect of the Morality Act was to drive these women away from the streets?—To drive them into seclusion.

421. You said from the streets?—One does not see so many about the streets.

422. As a matter of fact, has it driven them away from the houses?—Yes, from where they used to live; but they have gone to other places.

423. What other places?—They live secretly, and have gone to other houses.

424. Is it within your knowledge that the present Morality Act is not strictly carried out?—Yes.

425. The provisions of it are not strictly carried out?—So I believe; I cannot say so officially.

426. But they were, were they not, in the first place, after the Act was first promulgated?—Yes; they were very stringently carried out then, I believe.

427. The same stringency in carrying out the provisions of the Act is not observed now, is it?—I believe not.

428. *Mr. T. Searle.*] In what particular do not these two Act harmonize and work well together?—The Contagious Diseases Act recognizes prostitutes, whereas the Morality Act does not.

429. Do you think that prostitutes ought to be recognized?—They are a necessary evil, I think.

430. Would you advocate having recognized brothels?—I would.

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431. And you would legalize them?—Yes. I think it would be a very good thing.

432. But in that respect, you know, you express an opinion which is quite contrary to the opinion of the religious world, or the Christian world, we will say?—Yes, but I cannot help that. I speak from a medical point of view. In France the brothels are licensed.

433. I suppose you know that public opinion in this country would never agree to that?—Yes; I know that public opinion is against it.

434. Consequently it is almost useless advocating that?—Yes.

435. The next best thing is, while recognizing the the sentiment which would not allow brothels to be countenanced, to find some other practical means of dealing with the evil?—Yes.

436. Taking that view of it, do you think the Morality Act is unworkable?—I think it is.

437. In what way would you suggest an alteration then; it is no good our recommending that brothels be recognized and legalized, it would be only so much waste of time, so we must get something more practical than that?—I think before the Brothels Suppression Act came in, the way the law was carried out was satisfactory, but at the same time one ought to be able to keep these women off the streets.

438. *Dr. de Jager.*] You would like to see some proviso in the Contagious Diseases Act which would keep the women off the streets?—Yes.

439. *Mr. Wood.*] You said just now that you would certainly prevent men being in any way connected with brothels?—Yes; I mean living on the proceeds of prostitution.

440. Can a brothel be carried on under female supervision entirely?—That I cannot say. I have not any knowledge of brothels. What I mean is this. There are men who live on what these women get, and take practically all the money from them, and that I would certainly put a stop to.

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441. In your experience with these women who come to the Lock Hospital, you have had all classes and conditions, I suppose?—I have.

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442. Have they ever spoken to you with regard to their mode of life?—No, I cannot say that they have.

443. Have they never pointed out that they are in that condition because they have been seduced or from some other cause?—Never.

444. From what you have told us, it would seem that the bulk of the women who come under your treatment are the lower coloured class?—Yes, the lower coloured class.

445. A medical officer the other day told me that the German women who have taken up prostitution are more expert and care for themselves, and in that way prevent the disease which is so rampant among the more ignorant: is that so?—My experience is, that the white women here in Cape Town are clean, as a rule; you get very few with venereal disease, during the last two years, or not quite two years. That is my experience. At the same time, I must say that the white prostitute has gone down tremendously in numbers. It is just within the last three months that they are beginning to increase again.

446. These white women who are prostitutes, are they colonial as far as you know?—No; the majority of them are foreigners.

447. Do they come of their own accord, or are they imported?—I believe they have been in Cape Town for some time; they come of their own free will.

448. Your evidence to-day is that prostitution is more on the increase?—I do not know about that, because, of course, we could not get at a lot of these women before.

449. Those who do come up. So far as your numbers are concerned there would be an increase?—Yes.

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450. Would you be able to say from your own knowledge the age of those who come to you; are they young or middle-aged?—I should think that they were all, without any exception, over 16.

451. *Dr. de Jager.*] Are you of opinion that the Morality Act has drawn a number of these prostitutes away from the street into seclusion?—Yes, there is no doubt about it.

452. Has it driven prostitutes on to hill side or the veld?—Yes.

453. From your knowledge as to cases coming under observation, would you be able to say that prostitution was on the increase, whether the number is larger?—Our numbers are larger.

454. You do not know whether that is due to the Morality Act being in force or to some other cause?—I think the increase is due to the slackening, as it were, of the working of the Morality Act.

455. You have two classes of prostitutes coming to the Lock Hospital: do you lodge them together?—Yes.

456. You do not find anything unfavourable in that?—No; we have separate wards for the whites, but I find that when a white patient comes in she always prefers to go into the big ward.

457. Have you much of what is called "privateering" in connection with prostitution?—Yes, I think a good deal does go on.

458. I understand you are of opinion that these low-class coloured women are certainly more diseased and filthy than the Continental or the European women?—Certainly.

459. We have had evidence here to the effect that a good number of these prostitutes migrate between domestic service and prostitution: is that your experience. We are told that at one time a person is a prostitute and at another time a domestic servant?—Yes, there are cases.

460. I should like a little information on that point if you can give it me. Is the number of prostitutes taking service increasing?—I could not say definitely.

461. You do not know whether the number of servants who have taken to prostitution is increasing?—My experience is that a servant is more likely to become a prostitute than a prostitute is to become a servant.

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462. Others have told us that although the Morality Act has driven off a great number into secrecy and even on to the veld and mountain side, prostitutes have actually been forced to take service, and in this way a servant girl is a distinct danger to the public and to private respectable families?—I do know, of course, that some of these prostitutes do go into service, because at the end of each month I have a return made out, and so many of the women are put on that return as not having come up for examination, and inquiries have been made as to what becomes of these prostitutes, so many cannot be found; perhaps they have left the district, so many have gone to gaol, and so many have gone into service, but I cannot say that that is increasing.

463. The fact of their having gone into service would not necessarily imply that they were diseased women, would it?—No.

464. Of course, you recognize that a prostitute taking service, should she have syphilis or gonorrhœa, must be a distinct danger to the public at large and private families?—Certainly.

465. Are there any dancing brothels in Cape Town?—No; not now, that I know of.

466. In your experience with these prostitutes, have you ever found that they complain of the examination as a cruelty or a degradation?—No, they never have complained to me.

467. They submit quite freely?—Yes, it is all voluntary.

468. As a matter of fact, the lower coloured class do not look upon it as anything degrading to undergo examination?—No, not at all. I can tell you our practice if you like. My lay inspector reports to me when he hears that a woman is a prostitute. I give him orders to make inquiries and find out if

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she is, and he comes to me and reports that he has made inquiries and found that such and such a woman is a bad character carrying on prostitution. I then send him to see her and ask her if she will come up and see me, and in no case has a woman ever refused to do so; they all come up, and I have questioned them, and asked them if they were willing to be put on the register. At the same time, I have always told them that if they had any objection to be put on the register they were to say so, but in no case have they ever had any objection; they have always signed their voluntary submission. Of course, there is nothing provided in the Act, so far as I know, to allow me to send my lay inspector to these women, but I do so, and in no case have they ever refused to come up. That is a blank form of voluntary submission. [Document put in.]

469. If a woman refuses to sign this form, does that not give you a chance of bringing her up before the Magistrate?—Yes; and if she does refuse, then I should have an affidavit taken and put before the Magistrate, and she would then be brought up.

470. Then she is practically forced to come, is she not?—Yes, but in my time we have never had to do that: they have all submitted freely. I do not see the white women and the coloured women on the same day. On Monday at a quarter to 11 I ask the white women to come.

471. Does the Act give you power to send out your lay inspector?—No.

472. Would you like the Act to give you that power?—Yes, I think it would be a very good thing.

473. Simply as a sort of scout?—Yes.

474. Have you any idea why the Morality Act is not applied so vigorously now?—I cannot say.

475. You do not deal with men in any way, do you; there is no provision for dealing with men, except in the case of those who live on the proceeds of prostitution?—No provision.

476. They come under Part I. of the Contagious Disease Act?—It has nothing to do with that.

477. We have been told that the Police Offences Act only affects prostitution so far as soliciting is concerned: is that so?—Yes.

478. It has nothing to do with the prevention of actual prostitution, has it?—No, that is the Morality Act.

479. What is the real object of the Contagious Diseases Prevention Act?—To prevent the spread of venereal disease.

480. Do you think you have prevented the spread of disease?—Undoubtedly.

481. Do the women get treated at the hospital gratis?—Yes.

482. The two Acts are in opposition, it has been said; will you explain that?—The Contagious Diseases Act, Part I., compels women to come up for examination if they are prostitutes, to see that they are free from disease. The Morality Act says that if you are a prostitute you are liable to be arrested and punished for being a prostitute; you are not to be a prostitute: one allows prostitution and the other not. That is really it.

483. So that the one Act invites you, being a prostitute, to come to the hospital, and the other says if I discover you are a prostitute I will imprison you?—Yes. I may say that I assure these women that I will give the police no information.

484. Have you really to make that promise in order to get them up?—Yes; and I have not in any case given the police any information. The police have helped me, I must say.

485. *Mr. Wood.*] So that you have really been mending the breach between the two Acts?—Yes.

486. Has it come to your knowledge that in certain places of business women are kept for the purpose of prostitution—decoy shops, in fact?—Yes, I have heard of that.

487. *Mr. T. Searle.*] Do not you think it is a good thing to drive these women off the streets?—I think it is a very good thing.

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488. The Morality Act has had that effect?—Yes.

489. But, on the other hand, you say that then you cannot get at them?—Yes, that is so; it a very difficult thing to do, but I daresay it can be done, and if you are not going to arrest women for being prostitutes they will come up.

490. Do not you think that putting them on your register under the Contagious Diseases Act gives them the idea that now the law of the land recognizes them, and that consequently it is quite a legitimate trade that they are carrying on?—I do not think so.

491. Would it not encourage them rather to go on with the business?—I do not think so.

492. That is what the petitioners complain of?—I do not think so, because I do not think that a woman will become a prostitute unless she is that way inclined, because there is no doubt that they do not like coming up for examination: it is a certain degradation.

493. Say that a woman has been seduced and fallen, and she is in that position that she is wavering whether she will abandon her evil life or give herself up altogether to it, and that just at that psychological moment your lay inspector comes to her and practically invites her to come and be put on the register of prostitutes, do not you think it might have the effect of inducing her to do so, whereas if she had been left to herself she might have reformed?—I do not think so.

494. It would not probably happen in a great many cases, but it might happen in some cases, might it not?—There is no “never” and no “always” in anything.

495. Do not you think, on the other hand again, the Contagious Diseases Act encourages men to go with these women, whereas otherwise they might not do so?—I do not think so.

496. Do not you think that many men would not run the risk and would be deterred from going with these women, whereas now they say the law pro-

fects them, and the women are kept in a condition as not to present the same danger?—There might be a few such cases, but I think they would be very few.

497. You think that most men in order to satisfy their lust would take the risk?—They would not go with a woman whom they know to be diseased.

498. But these women have a certificate given them, have they not?—No, we don't give them a certificate.

499. But, still, they would probably make use of the fact that they had been examined: it would be a guarantee?—They have nothing to show.

500. Still, men know that they are examined, and when they go to the brothels probably the first question would be whether the women had been examined?—Yes, but they might do that in any case, and no doubt they would get the same answer.

501. If the law did not recognize the periodical examination, might not men be afraid to go to such places?—I do not think so; not from what I know of human nature.

502. Is there any way you can think of to meet the complaint of the petitioners that the Act only deals with one of the offenders; the men go free. Is there no way by which the men could be dealt with?—It would be a very difficult thing to bring it home. I would suggest that any man, knowing that he was suffering from any venereal disease, and having connection with a woman without telling her, should be treated as a criminal offender, but it would be a very difficult thing to enforce that.

503. *Dr. de Jager.*] The man is always aware that he has the disease; but a woman is not?—Yes.

504. If a man goes with a woman there is less excuse for him than there is for the woman?—Much less; a woman cannot always tell that she has the disease, she may not know it at all.

505. Gonorrhœa is more dangerous to women than it is to men, is it not?—Yes.

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506. *Mr. Wood.*] With regard to the public statements of illegitimate birth, white and coloured, would they be the progeny of prostitutes?—No, very few.

507. As far as your knowledge goes, do these prostitutes bear children?—Not as a rule; we have a few confinements in the Lock Hospital, but very few.

508. Do you ever come in contact with cases of rape in your experience?—No, they would come under the District Surgeon.

509. You cannot give us any figures with regard to that?—No.

510. Have you any figures to show that the decrease in prostitution means an increase in the cases of rape?—No.

511. You would expect, would you not, that if you put down prostitution you would have more cases of rape?—Yes.

512. So that, as a matter of fact, the Contagious Diseases Act is in that respect a protection to innocent girls?—Yes.

513. *Mr. T. Searle.*] That, of course, is only a matter of supposition, you cannot possibly have any evidence to show that, have you?—Well, I do not know anything about rape cases.

514. As far as your own statement is concerned it is merely a supposition?—Yes.

515. *Acting Chairman.*] Do you think that these women who go into service, and are at the same time prostitutes, do so with a view to carrying on their work of prostitution in a way less easily detected; is that their object?—It might possibly be so; I must say that, as a rule, those women who go into service always come back again.

516. What is their object in going into service?—They may possibly make up their minds to lead a different life.

517. You are convinced of this that their entering domestic service is a great menace to the health of families?—Certainly, if she is diseased.

518. A question was asked with regard to the examination of men, do you think periodical examination should be extended to both sexes?—I do not see how it is possible to carry that out.

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519. In the case of a man knowing himself to be diseased and communicating it, would you be in favour of having him run in?—I would certainly.

520. *Mr. T. Searle.*] It is not etiquette for a private medical man to make public anything he knows about a person coming to him for treatment; if a man went to a doctor, for instance, with syphilis he would not be allowed to divulge it?—I should not think he would do so.

521. In the case of diseases like small-pox, notification has to be given, should it not in your opinion be made compulsory for any doctor to notify cases of syphilis submitted to him for treatment?—A law could be made to that effect, but I do not know whether you would find that it could be carried out.

522. *Mr. Wood.*] It is carried out strictly in the Army and Navy, is it not?—Yes, but they are able to do it; with civilians it is different.

523. Do you think there is an increase in venereal disease in Cape Town?—There has been an increase in the last six months according to our books.

524. *Acting Chairman.*] I understood you to say that the number of white prostitutes has gone down?—No, the number is going up now.

525. What is the reason why the number went down and is now going up?—The diminution arose when the Brothels Suppression Act came in; that drove a lot of these women away in seclusion, whereas now that the Act is beginning to be relaxed they are coming out again into the open.

526. But still they are not making their appearance in the streets as they used to do before, are they?—They are to a certain extent, but not at night time. I have seen a good many, but I do not see them soliciting.

527. But they make their appearance in the streets more now than they did shortly after the

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promulgation of the Morality Act?—I only took over this work in October, 1904, that was after the Morality Act came in, and I really did not know any of them by appearance.

528. Have they been more apparent in the streets lately?—Yes, but you do not see them soliciting.

529. In the day time or the night time?—In the day time, but I rather think they come out for exercise.

530. I gather from the evidence you have given that you think it absolutely essential for the law to be amended so that the present two pieces of legislation may each work efficiently?—Yes, that is so.

531. Do you think there is any possible law that could be enacted to prevent the increase of prostitution within the range of practical politics?—I do not think so; I do not think legislation will ever put down prostitution.

532. *Mr. Wood.*] Do you think that education would be a means of curtailing it?—It will never stop it in the way that you stop other crimes by legislation.

533. *Mr. T. Searle.*] But you curtail theft and drunkenness by legislation, do you not?—Yes, but I do not think you will ever stop prostitution.

534. Could you not keep it within limits and bounds, as is the case with drunkenness?—I can hardly answer that question; as I say, I do not think you will ever put down prostitution by legislation.

535. The result of all law directed against any crime is to drive that crime underground, is it not?—Yes.

536. You would not use that as an argument against having laws against crime?—No.

537. You admit that when the Morality Act was strictly enforced, it drove this crime underground?—But it did not bury it.

538. But it drove it away out of sight?—Yes, and then when it drove it away, you had no way of getting at these women to see whether they were dis-

eased or not, and there is no knowing how many men these women may have infected.

539. Since the Act has been relaxed you admit that the evil is coming more in the open again, and there are bound to be more temptations?—I do not say that.

540. That is theory, is it not?—No, it is not.

541. *Mr. Wood.*] Is it possible, do you think, to change the nature of these prostitutes, or is it that they have got into such a condition that it is the only means of livelihood that presents itself to them? Could they not take to some other mode of living; of course, prostitution is easy, and in some instances it may be an agreeable life. The Salvation Army does rescue work; do you know whether that has been efficacious in reclaiming these women?—I know that many women have gone to the Salvation Army, but my experience is that they all come back again.

542. *Mr. T. Searle.*] All?—I do not say all, the large majority come back. We have sent them both from the Lock Hospital and from the Female Prison.

543. *Dr. de Jager.*] When these women are in service, your point is that you cannot prevent them from spreading the disease?—No, you cannot.

544. But when you have them under supervision, they may be more in the streets soliciting, but you are better able to regulate the spread of the disease?—Yes.

545. Prevent it, as a matter of fact?—Yes.

546. *Acting Chairman.*] This Committee was appointed on account of the number of people who have petitioned the House praying for the repeal of part of the Contagious Diseases Act, and for raising the age of consent. I have here one of the petitions, which is typical of the rest, and I should be glad if you would give us your opinion as to its allegation. The petition says: "That whereas your petitioners are confident that Act 39 of 1885, commonly known as the

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Contagious Diseases Act, has become a publicly acknowledged failure, for the following reasons: (1) It is more frequently regarded by the impure as a licence for immorality than as a preventive to the spread of disease"?—I do not think so.

547. The Second Clause of the petition says: "Where disease exists there is often a tendency to hide it, for fear of being brought under the operation of the Act." What do you say as to that?—Women who are prostitutes must come up under Part 1 of the Act.

548. The petitioners object to Part 1?—I find that women, even under Part 2, come up to be treated, and ask to be taken into the hospital when they are suffering from disease; that is my experience in Cape Town. We had 29 for the half-year under Part 2 who came up and asked to be taken in.

549. Clause Three of the petition says: "Where disease has been accidentally contracted, the discovery of it by those in authority leads to the persons affected being at once classed with persons of ill-fame, and provided for as such by the Act." Is that so?—No, we do not do that.

550. The fourth paragraph of the petition says: "The Act does not fail to retain for immoral purposes those, who by their own fault or misfortune, have been unable to prevent their names being placed on the Town List." Is that so?—No, very great care is taken in Cape Town and very strict inquiries are made before any woman is placed on the list.

551. The next paragraph in the petition says: "Punishments under this Act are inflicted without fair and open trial." Is that so?—No, it is all in open court.

552. Are not the examinations held *in camera* when these women are summoned?—No, I have been present in court when the women have been brought up.

553. Then that is an unfounded assertion in the petition?—Yes, as far as Cape Town is concerned. Mr. de Villiers has been trying cases lately.

554. The next paragraph says: "Where two parties are concerned in an offence it is usual for only one of them to be dealt with and punished under the Act." That relates to the sexes?—That is so.

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555. The next paragraph says: "The Act provides that on the first offence a person who, it may be, has been deceived by another, shall be immediately classed as a prostitute, and subjected for the rest of her life to frequent surgical examinations, no inducements being offered her to return to a pure and virtuous life." What do you say as to that?—They are not subjected for the rest of their lives to periodical surgical examinations; they can be taken off the register at any time by order of the Magistrate.

556. *Dr. de Jager.*] Can the woman apply?—Yes; there was a case about two months ago here in Cape Town.

557. *Acting Chairman.*] This allegation in the petition seems to refer to an isolated case where a person has been deceived by another; it does not seem to apply generally to a person who habitually enters upon a vicious life?—No; they have to be proved prostitutes before they are put on the register at all, and then, if they are once on the register, they can apply to be taken off by the Magistrate. If he decides to take them off, he does so.

558. *Mr. Wood.*] What is to be gained by the prostitutes by being put on the register?—If they get diseased, they get treated for the disease and cured.

559. If they were free from disease they would not be on the register, would they?—Yes; they would be on the register as a prostitute. Part 2 applies to a woman coming up who is not practising prostitution; she can come to me at any time and say she wants to leave the hospital, and I have to let her go.

560. So that would meet the case of anyone who unfortunately was deceived?—Yes; she would come under Part 2 of the Act for treatment only.

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561. *Mr. T. Searle.*] There is another petition here from East London, in which the petitioners say: "That whereas the carrying out of Part 4 of Act 4 of 1902, the irregularities disclosed in 1904 have shown in demonstration that whilst the Contagious Diseases Act is in force false witness may be brought to bear upon the innocent, and gross insult perpetrated where no vice exists, and that from fear an unprotected woman may be made to yield to the coercive power of a bribed official, and be dragged down to an evil life. According to the late Saul Solomon, the Contagious Diseases Act does not reclaim the vicious from their course of life, and it does not deter others from entering it; instead of establishing an institution for the cure of disease, it is really an establishment for the manufacture of prostitutes. 2,500 bishops and clergy in England memorialized the Prime Minister in 1872 for the repeal of the Contagious Diseases Act, and in 1883, 4,400 signed in favour of its repeal. Medical authorities acknowledge that the Contagious Diseases Act gives no guarantee against the propagation of the disease. According to the Hon. A. Balfour, it would ruin any Government to attempt to introduce the Contagious Diseases Act in England." What do you say to that?—I can only speak for Cape Town, and I must say we are very careful before we put a woman on the register. We make very strict inquiries, and in no case have we had to go to the Magistrate.

562. *Dr. de Jager.*] Do you have to use a good deal of tact in approaching these women?—Yes.

563. As a matter of fact, in that way, it is often not necessary to go to the Magistrate, is it?—Since I have taken over the working of the Act I have never had to go to a Magistrate; no woman has ever refused.

564. *Mr. T. Searle.*] Do you think the disease is worse in this country than in England?—I cannot say.

565. *Acting Chairman.*] Have you any information with regard to the repeal of the Contagious Diseases Act in England?—No, I have not.

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566. Nor in India?—I believe in both places the disease has diminished, but I have nothing to go on.

567. *Mr. Wood.*] It is said that in consequence of the kind treatment which these unfortunate women receive, they are much freer in presenting themselves for periodical examination, and in that way education has lifted them, so to speak. When they are diseased, I suppose they get treatment, and in that way the disease is prevented from spreading?—Yes, but a woman cannot always say when she is diseased; she may be diseased without knowing it, and so spread the disease.

568. That is not generally the case, is it?—Very often a woman does not know that she has the disease, and quite innocently she will spread it. It is very seldom that a woman knows she has got gonorrhœa.

569. *Dr. de Jager.*] A coloured woman, I suppose, would not know anything at all about it?—No. These coloured women in Cape Town are of the very lowest type. That is what the Morality Act has done. I must say it has brought forward the very lowest class, and driven the more respectable prostitutes, if you can put it that way, into seclusion and out of the country.

570. *Mr. Wood.*] The classification is much lower?—Yes.

571. *Mr. T. Searle.*] If the same amount of money that is spent in administering the Contagious Diseases Act was spent in trying to educate these women and bringing moral influence to bear on them, would you not get better results?—I do not think so.

572. If, instead of having medical men who are paid for examining these prostitutes, and having hospitals for their treatment, and these Acts to try and lead them from their evil life, you were to go more on the lines of the Salvation Army, do not you

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think you might do more good?—I do not think so. It would take an enormous amount of money to deal with it, more than is paid for working the Contagious Diseases Act, and you would not get as good results. That is merely an opinion.

573. *Acting Chairman.*] What is your opinion with regard to the age of consent; the present age is 13, is it not?—Mr. Nightingale told me that up to 12 it was rape; between 12 and 14, it was assault or misdemeanour, and after 14, consent. I am, of course, open to correction, but I inquired of Mr. Nightingale.

574. What is your opinion?—I think that it is the proper age.

575. Should it not be raised, in your opinion?—Not in this country; in England it is up to 16.

576. *Dr. de Jager.*] Why would you not raise it in this country?—In a semi-tropical country a woman becomes developed much sooner than in cold countries. I have come across fully-developed girls at the age of 12 even.

577. Do not you think that we should keep in view the fact that we have to protect the men in this respect also. In semi-tropical countries a girl of 15 or 16 is pretty well developed, and sometimes it happens that she is the tempter, and in that case you might run in boys for assault and rape, might you not?—Yes.

578. *Acting Chairman.*] She may, of course, develop here much quicker, but do you not think that, notwithstanding that, she is only, after all, a child at the age of 14?—Quite so, but I am afraid you would have a great many cases of rape if you raised the age of consent. A girl is fully-developed here before she is 14 years of age, and certainly there is no doubt about it that a man is tempted by girls to a certain extent.

579. *Mr. Wood.*] The petitioners say that no parents would consent to their children marrying at the age of 13, because they are but children, and if you do not consent to their marrying, why should

they be led into sin at the age of 13. Their argument is strong, is it not?—I quite agree with you, and I do not think that girls should marry at that age. At the same time, I certainly should not raise the age of consent, because men must be protected to some extent.

580. The petitioners ask that the age of consent may be raised to 18?—I think that is absurd.

581. *Acting Chairman.*] Would not you favour raising it to 16?—No, I do not think so.

582. *Dr. de Jager.*] You recognise the fact that some girls do not develop till after the age of 13 or 14?—Oh, yes.

583. Would not you raise the age of consent so as to protect them?—I do not know that I would in this country.

584. On the one hand you have girls who are weak and must be protected, and on the other hand, in the case of girls who are developed early, you must not put men in a disadvantageous position, because girls often mislead young fellows. In the case of coloured girls, they are soon developed, and they have not a very high moral standard, and they easily mislead men and young boys, and the moment they are caught they turn round and accuse these boys of committing an assault, and say they have not consented?—I am not in favour of raising the age of consent.

585. *Acting Chairman.*] Beyond what you have stated, have you any information which you think would be of service to the Committee?—I think that the lay inspectors, if it were possible, should have authority to enter a brothel and see what women were in it. I mean places where we know women on the register are carrying on prostitution; and I also think, in the case of a house which is looked upon as a brothel, the person in charge of such a house should be compelled to report any girl who comes to live there, say, within 48 hours of her arrival. We find that these women get girls into their house, and they stay there, and we may take

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perhaps two months before we find them out. I only suggest 48 hours, but it might be any time. I think that would be a good thing.

586. Have you anything else to suggest to the Committee to help us in coming to a conclusion beyond what we have asked you?—I think Dr. Gregory has told you the number of women on the register, and the proportion of syphilitic and gonorrhoeal cases. With regard to the notices that the women receive, these are not given to them, but they are only read out to them, and we keep them at the Lock Hospital.

587. Do they put their signature on it?—Yes.

588. And then it is returned to you?—Yes, and they are told what day they are to come up. If they do not come up on that day, my practice is to send the lay inspector to them and tell them that they are overdue, and they ought to have been up, and they must come up within 48 hours, otherwise they will be summoned. Then, if they do not come within 48 hours, I take out a summons, and have that summons served on them to appear in court. They appear in open court before the presiding Magistrate, and the woman is dealt with as he thinks fit. If she does not come up, then we take out a warrant and have her arrested, and she generally goes to gaol. That is the practice. We are not at all hard on the women, but lenient, and we do not force them, but treat them kindly. We are not at all severe on them.

Friday, 20th July, 1906.

PRESENT :

Mr. THERON (Chairman).

Mr. Hellier.	|	Mr. Wood.
Mr. Anderson.	|	Dr. de Jager.
Mr. T. Searle.	|	Dr. Hewat.

Mrs. Helen Davison, examined.

589. *Chairman.*] In what capacity do you appear before this Committee?—I am connected with the Purity Organization and the Women's Christian Temperance Union.

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590. Where do you live?—At Green Point.

591. We have had a number of petitions referred to us, and they refer, in the first place, to the repeal of the first part of the Contagious Diseases Act, and, in the second place, to the raising of the age of consent. Do you know anything about these petitions?—Yes; I know about them.

592. Will you explain to us why you want the first part of the Contagious Diseases repealed?—We feel that it puts women in the hands, or in the power rather, of unprincipled men, and we feel also that it makes our Christian Government a partner in the recognition of vice; it is setting up, in fact, two different codes of morality, one for men and one for women, and nowhere in the laws of God can we see that that has ever been the case. There are cases in this country, and in other countries, where women have been subjected to treatment which they should not have been subjected to. We have visitors who visit that sad place, the Lock Hospital, continually, and we find that these women would be willing to go there if they were not subjected to such treatment, and forced to go, but they hide themselves and try to evade the law when they feel that they are forced. We all know what human

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nature is, and if one is forced to do a thing, human nature revolts against it. Then, again, we contend that the Act has not lessened disease in any way whatever. Statistics in all countries prove that it has increased rather than diminished it. Then it is said that from the class of women who carry on this vice, our domestic servants are drawn, and some restriction must be placed upon it, but we contend that it has not caused that restriction at all; we find it is increasing, and many mistresses are ignorant about the condition of things. These women may bring a certificate, perhaps, and say they are clean, but the doctors themselves say that it is a very difficult thing to diagnose disease very often, and their certificate practically licenses them to carry on this immoral life. We find we draw servants from that class, so it does not bring restriction. Each of these women, moreover, must represent a number of partners in her sin, and why should restriction only be placed on the weaker sex, and the man allowed to go free? Those are our main contentions. Then we do most strongly object to a Christian Government being a partner in State-regulated vice. We wish it to be made difficult for both men and women to sin, and not for the law to bear hardly on one sex only.

593. Do you know the reason why the Act is called the Contagious Diseases Act is because this disease is communicated from one person to another?—Yes, I quite understand it.

594. You spoke about domestic servants, are you aware that to a great extent they carry on this sinful trade?—I am quite aware of that, but I contend it is not among the more respectable class of servants. I know from experience that there are cases where it has not been the servant who has carried the disease, but the one who should have been the protector of the home. Why should a servant be subjected to the operation of the Act and the protector of the home be allowed to go free?

595. Suppose you could save a family from disease being brought into it in this way, would you not do everything in your power?—Yes.

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596. And could you do so without some law?—Experience proves that in our sister Colony of Natal they are doing it satisfactorily. England has abolished the Contagious Diseases Act, and there the disease has diminished rather than increased. Lord Kitchener, in a very eloquent appeal to his soldiers, showed that it was not necessary, and that it simply trained men to vice. I think that is one of the strongest appeals that has appeared in recent history, that Lord Kitchener should make such a statement to his troops, and it should be a very strong point in influencing a Government in making laws of the kind.

597. You would hardly compare our Native class here to the people in England, would you?—My experience, as a mistress and a woman, is not that the Natives are the worst sinners in this respect. I hold that there is a difficulty; there must be a difficulty with all laws, but we must consider what is the best for the classes all round, and we have no right to help people to sin; but I know this, that in Natal there is a home for these unfortunate women, and the workers there work with the policemen, and Europeans and Natives are treated alike. It is, we find, very much easier to get hold of these women when they are treated in that way, than when they are put into the hands of unprincipled men, such as we have sometimes known the police to be.

598. Do not you think that prevention is better than cure?—If you can get it.

599. Do you think a domestic servant should be allowed to carry disease into a respectable family?—I contend that with the present law you cannot prevent it. Experience proves that.

600. You would not object to the second part of the Contagious Diseases Act, I take it?—I would say that the Morality Act represents a far more Christian attitude than the other. I would not like

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to say that it is perfect, or that it is altogether such a law as I would accept.

601. You would not object to the second part of the Contagious Diseases Act, would you, which really affects the country also, outside the towns?—In what way?

602. Where people have to come to a doctor and submit to treatment?—If they come voluntarily.

603. They must come voluntarily. You would not object to that part, would you, seeing that it applies to the country also. Nurses and servants communicate the disease to children?—I would not object to that part of the Act, provided they submitted voluntarily to treatment.

604. But you do object to the first part of the Act, which applies more to towns?—I object to an Act which makes a different code of morality for the two sexes; I say that the code of morality ought to be equal.

605. You stated just now that a Christian Government was a partner in recognising this sin?—They are licensing vice; they are partners in State-regulated vice.

606. Human nature being what it is, will you ever be able to prevent this vice?—I do not say you will be able to prevent it, but is it not our duty to carry out the most Christian side of the law?

607. But is not prevention better than cure?—History proves that it is not prevention. That is what we contend. In France itself, where these laws were first enacted, and where the evil is so rife, they have proclaimed loudly against it, and it has been found, despite all that has been done, the evil was on the increase, and they have abolished it. In England they have abolished the Contagious Diseases Act, and there it has increased rather than diminished, and our experience here proves the same thing. These women are quite willing to submit to treatment, but they object to being in the power of unprincipled men, who may at any time accuse them, and they have no redress.

608. Now you come to the Morality Act?—No; it is the Contagious Diseases Prevention Act that licenses it. Under that Act a woman may be arrested. There was a case happened at Port Elizabeth where a respectable woman was arrested. A complaint was lodged against her by the police, and she was put on the town list of prostitutes, and her name was on the list for a long time. It was a long time after she was married that we got her name taken off the list through our representations. She was promised compensation, but she never got it, and I could cite a good many other cases.

609. It has been stated in evidence that the names of these women do not remain on the list if they desire to reform and lead a better life?—We have experience that it is otherwise, and we have gone and spoken to the authorities on the matter.

610. Is there any other case besides that at Port Elizabeth?—There was a case in Cape Town a little while ago—the Zeeman case—where a girl was arrested, and there have been several cases in England before the Act was repealed. Quite recently, in England, a French woman was arrested in Regent Street and lodged in prison for 24 hours.

611. *Mr. Anderson.*] Are you aware what was the result of the investigation in that case, which I remember seeing in the papers?—I know she was kept 24 hours in prison. I have not seen what the conclusion of that case was. It shows how innocent women are in the hands of unprincipled men, at all events.

612. What was the case in Port Elizabeth to which you referred?—Accusations were made made against a woman by the police that she was a bad character, and she was put on the list of city prostitutes. The man to whom she was engaged said he did not believe there was anything against her, and her mistress testified that she was a pure, virtuous woman, and a very good servant. She went to the authorities and asked that she might be freed, but it was all of no avail, and she was on

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the list for some months. Then the Women's Christian Temperance Union took the matter up, and subsequently she was married, her husband believing in her innocence. That woman had to undergo a degrading examination, which was altogether unnecessary.

613. How long did this go on?—I would not like to say, but it was a number of months—a very long time.

614. Before her marriage?—Yes, and after.

615. What was the nature of the compensation that she claimed?—I could not say that. I know that she did claim compensation, and it was promised, but she did not get it.

616. From whom did she claim compensation?—From the authorities at Port Elizabeth. My contention is that, under the present law, we are more likely to get undesirable servants. I have been a mistress for over 25 years, and I have had one case in that time. They get a certificate, but it is questionable whether they are fit to have it or not. She may have a licence and yet not be fit for service, whereas mistresses would be more particular if it were known that they could not get these licenses.

617. What licence do you mean?—The certificate given by the doctor, after examination, to show that they are all right.

618. But they are not in possession of any certificate according to the evidence that has been given by the doctors themselves?—They are examined at the hospital, and it practically amounts to a licence; and they may go on being examined from time to time, so that they can carry on their trade. I do not mean that they have a written certificate, but they practically get a licence to go on with their "calling."

619. Copies of the certificates which these women have to sign have been put in, but these are retained by the authorities: they are not given to the women?—But I say they are practically licensed.

620. You are aware that many of these women who lead a bad life enter domestic service and revert afterwards to their evil ways!—There are isolated cases, but I do not think it is the practice.

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621. You are aware that this particular disease is very contagious?—I am quite aware.

622. Do not you think it is the duty of the Government to legislate in regard to contagious disease of that kind?—I would like to answer that by another question: is it the duty of the Government to legislate for the weak and not for the strong?

623. Is it not the duty of the Government to legislate so as to prevent the spread of contagious disease?—Yes, if the Government thinks that past history proves that it has stopped it in this or other countries.

624. Is it not the duty of any State to legislate against a disease of so virulent a character as this?—A State generally goes by the experience of other and older countries, which have proved a thing, whether it is useful or not. Other countries which have tried most stringent measures on the same lines have pronounced that they have been utterly valueless.

625. Do not you think it is the duty of the Government to legislate against the spread of a virulent contagious disease like this?—I stultify myself if I say yes, because there are certain conditions that I cannot agree to.

626. Then you do not think it is the duty of the State?—I do not say that. I must state the conditions if I say yes.

627. You neither say yes nor no?—I say legislate, but make a code of morality for both sexes, not the weak only.

628. *Dr. de Jager.*] Which is the weak one in this case?—The woman, most decidedly.

629. *Mr. Anderson.*] We have it in evidence that this disease has penetrated into families and affected innocent people; are you aware of that?—Yes. It is difficult, of course, for a woman to speak

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on that point, but I have had very large experience in the work, and for one case where a servant has brought disease into a family, there are four cases where the protector of the home has brought it in. I may say that I have a large acquaintance with this class of work.

630. You are perhaps aware that the disease may be communicated by drinking out of the same vessel or giving a child a kiss: is it not the business of the State to see that every precaution is taken against the spread of such a terrible thing among innocent people?—Exactly.

631. *Mr. Hellier.*] Have you any knowledge of the present working of the Contagious Diseases Act in England?—Not personally, only by reading.

632. You have not sufficient knowledge or information to say whether the conditions of our coloured population does not make it impossible to repeal the Contagious Diseases Act?—Our experience of the work here among the white and coloured together has led us to think that it is not impossible.

633. Then the fact of our coloured population should not be a bar to the repeal of the Act so far as you know?—No.

634. We have been told that the Morality Act has suppressed none of the brothels, but that there is as much prostitution as ever: is that so, as far as your knowledge goes?—Yes.

635. Now that the brothels have been suppressed, we are told that prostitution is carried on in other places not known to the police?—I should say that brothels have not been suppressed: it is only that we do not know about them.

636. They were better known to the police and the rescue workers before the Morality Act than they are now?—I do not know that they were known so well, but the police tell me they will not touch them, for they do not know which Act they are to work under.

637. The conflict of the two Ac's makes it difficult to trace them?—Yes.

638. *Mr. T. Searle.*] You believe, in common with all Christian people, that the State must legislate against the spread of disease, but there is more than one way of doing it?—Yes.

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639. You believe that the present system is really a recognition by the State that prostitution is a legitimate business?—Yes.

640. Consequently you, together with all Christian people, object to the State recognizing any vice?—Exactly.

641. You believe that if the State were to take more trouble to bring moral pressure to bear on these poor unfortunates, we might get very much better results?—That I am convinced of.

642. Do you believe that this system really encourages this vice, instead of having the opposite effect?—My experience proves that.

643. Consequently, the object of the State in preventing the spread of disease is not attained: as a matter of fact it is more likely to spread by legislation of this kind?—I think so.

644. *Mr. Wood.*] You are here this morning, if possible, to direct this Committee as to either suppressing or alleviating this vice and aiding the Government in doing what is right and just: that is your object?—Exactly.

645. I think from the evidence we have had prior to your coming, with regard to the giving of certificates, we are all under the impression that no certificates are granted by which any of these women carrying on prostitution can continue under the approval of or recognition by the Government. You said you thought the law could be as well applied to the white as to the coloured. The general impression is that the coloured girl is far more likely to be drawn into this mode of life than the educated white women, and a larger number of prostitutes would be found among the third-class natives. Can you say from your experience whether that is so or not?—According to the cases in the prison and the Lock Hospital, which we visit, and the Salva-

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tion Army, I do not think so. Of course, you must always take into account that that class of girl is more numerous than the other, but if you take it in proportion, I do not think it is so.

646. I can only speak with regard to my own town, and it is generally admitted that the coloured girl is far more likely to run into this mode of life than the white girl or even the pure Kafir?—Do not you think it is because they are more easily found out; the others are shielded more?

647. We do not ask for class legislation, but we want to get as far as possible information from those working among these women. What would you advise the Government to do to meet the present difficulty?—That is very difficult to answer. I would not like to suggest anything.

648. Is there anything that occurs to you?—I only know that in Natal our workers have been very strongly against the Contagious Diseases Act, and whenever the Government has tried to bring in such a law they have petitioned against it. One of the lady visitors to that Home was round here the other day, and she said that they had found their method very successful. The police are willing to work with them, and they find out these girls and bring them to the Home, which is not really large enough. They find they are much more successful in getting hold of these girls than we find it here. Our system tends to harden them.

649. Do you think that Rescue Homes should be attached to the Government system: would that remove the difficulty, do you think?—I would not like to say that, but I should be an advocate of kind and sympathetic treatment.

650. We have been told by medical men that women who have to go to the Lock Hospital do not object to the examination. In any conversation you have had with these women, is that your experience?—There are cases where they do object very strongly: there are other cases, of course, and I am sorry to say they are numerous, where they

have lost all sense of self-respect, but they are in a way amenable to moral pressure. We must always recognize that, whatever scheme is devised, there will be difficulties, but we certainly think that the present system has the effect of hardening these women, without improving or helping the community at large at all.

651. You have come to the conclusion that there is a degree of licence under the present system?—That I am quite sure of.

652. *Dr. de Jager.*] On what grounds do you think these women object to examination and treatment in the hospital?—They feel that they are forced to undergo it.

653. They are not forced under the second part of the Act; that is voluntary. Do you know the procedure of the officers under the Act in bringing these women to the Lock Hospital?—There are different way of procedure: it depends upon the men themselves, and that is one of the difficulties. If the men are good and are quite sure of their case, then, of course, we cannot complain, but there are often unprincipled men, who cannot justify themselves, and once they get a woman's name on the town list, it is next to impossible to get it off, and this takes away all hope of restoration.

654. Have you any instances where men have lodged complaints against women unjustifiably?—Yes, several.

655. To the effect that they were prostitutes?—Yes; that has come within our knowledge many a time.

656. And on inquiry it has proved not to be the case?—Yes.

657. You mentioned a case that occurred at Port Elizabeth?—Yes.

658. You said that that woman afterwards got married, and was not a prostitute. Can you tell us why she did not receive compensation?—No.

659. Is it not the fact that she was carrying on as a prostitute?—No, we proved that; it was quite proved.

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660. You say that there are two classes of prostitutes in this country, the white and the coloured: do they both object to the examination under the first part of the Act?—I do not know that there is much difference.

661. The European prostitutes, or Continental women, are more or less cleaner than the coloured women of this class, are they not?—Yes, I should think so.

662. One would expect that, as they have more intelligence than the coloured class, they would be anxious to keep themselves clean, is not that so?—That has not come within my experience.

663. Would not you expect a white woman to take more care that she was healthy?—Yes. Perhaps as a rule she would be more careful.

664. As a matter of fact, she would be anxious for examination, would she not: that is the case in France, Germany, England, and elsewhere?—Yes, I daresay she would be, but they have, some of them said to me that if they were not forced to do so they would come up to the doctor. They do not care to come, as they think they will have their name put on the list of city prostitutes. That is where the crucial point comes in.

665. Why should a woman who is a prostitute object to examination?—She does not wish to be known as that.

666. The register is private, is it not?—But it is wonderful how private things get about.

667. With regard to Rescue Homes, do you look on them as a success in reclaiming fallen women. Do these rescued women become virtuous and lead clean lives?—We have bitter disappointments, but there are bright examples of return to virtue. We had one girl from that miserable place, the Lock Hospital, who was lawfully married the other day; she was not a hardened case. It was moral suasion that saved her.

668. Do you know whether the number reclaimed is larger than in the case of the Salvation Army?—I cannot say; I have no statistics.

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669. I understand that you object to these two Acts, the Morality Act and the Contagious Diseases Act, because they clash?—Yes.

670. At what point do they conflict?—The one licenses brothels and the other suppresses them.

671. The Contagious Diseases Act invites the women to come to the hospital for treatment, and the Morality Act punishes them when they are discovered to be prostitutes?—Yes.

672. Would you be surprised to learn that we have evidence to the effect that notwithstanding the conflicting effect of these two Acts, and all the complaints against them, the authorities have succeeded in decreasing venereal disease among prostitutes?—I would be very surprised, and I would not believe it, whatever statistics were given. My personal experience proves that it has not done so.

673. I am talking of disease?—Yes, even the disease among these women.

674. You said some time ago that in many cases it was the protector of the family who introduced venereal disease more than the servants: do you think that the protector contracts the disease in brothels or from the servant?—I should not like to say definitely, but I know that in many cases the servant is not as good as she should be.

675. I suppose it is pretty hopeless to prevent the protector of a family from leading that sort of life?—Why should you make it easy for him?

676. As you cannot legislate for him, is it not best to prevent him from contracting disease?—Yes, if you can, but statistics prove that you cannot.

677. I notice that in one of your answers you stated that there is a different code for men and women: would you legislate in the same way for men?—Most certainly.

678. And you disagree with particular legislation for women?—Most certainly.

679. You would have the law apply to men as well?—Yes, equally.

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680. Do you happen to know that it is very difficult for females to know sometimes that they are diseased?—Yes.

681. And that it is not the case with men?—So I have heard.

682. A man in all probability, when he found that he was infected, would consult a medical man, whereas a woman, especially a prostitute, might be going about for months in a diseased state, infecting others without knowing it?—Is it not the fact that many men do the same? I have read it, and I have been told so by doctors.

683. Yes, that perhaps is true, but a man does not live by prostitution as a woman does. A woman is obliged to pursue her calling, as it is the only way by which she earns her bread?—The State must make it more difficult for her to earn her bread in such a way.

684. Is it not likely that a woman will spread the disease more rapidly and more profusely than a man?—From certain medical evidence I have read quite lately, I should say so.

685. Have any cases of rape come under your notice?—No.

686. Would you expect cases of rape to be increased or decreased by the abrogation of the Contagious Diseases Act. If you put down prostitution altogether, what do you expect would be the result as regards rape?—I find that in Natal it has made no difference, and they are no worse in Natal than we are here—in fact, they are better.

687. Is there less rape there?—Yes. So I have been told by those interested in rescue work.

688. Is there less rape with the suspension of the Contagious Diseases Act?—They have not got the Act in Natal. I understand there are no more cases there than there are here, in proportion.

689. Have they no Contagious Diseases Act in Natal?—No.

690. If you abrogated our present Act, you would decrease rape, but if you make a very stringent Act

to put down prostitution, rape would increase, would it not?—I should not think so.

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691. Do not you think men who frequent brothels would commit rape?—I hardly think so, as a rule.

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692. *Dr. Hewat.*] With regard to venereal disease generally, I suppose you are quite aware what a dreadful disease syphilis is?—Yes.

693. And I think you will admit that venereal disease, as a rule, is spread by women?—I do not hold that.

693A. That is a generally accepted fact, that it is women who spread the disease?—I do not hold that at all, from my experience.

694. I should like you to give me a definite answer. It is the woman who sells her body for gain and spreads the disease, is it not. If you accept the fact that the woman is the main factor in spreading a disease which is of so dreadful a nature as syphilis is, you must also accept the fact that some restriction should be imposed to prevent the spread of the disease?—I do not accept the fact that the woman is the main factor.

695. If you admit that syphilis is such a dreadful disease, do not you think that some legislation or some control should be brought into operation?—Moral control. In England, and also in Natal, these laws have been found quite unnecessary, and they have not restricted the disease. They are in a better position to-day without the laws than we are with them.

696. Suppose we agreed to repeal the Contagious Diseases Act, as you suggest, what other control would you suggest should be brought to bear in order to prevent the spread of venereal disease like syphilis, which is so dreadful and ruins families?—As I have already said, they have a home in Natal, and they get the police to help, which they are most ready to do. The women are willing to come: there is no compulsion: they come and give themselves up, and in that way they find they get hold of these women better than if there was compulsion. A

visitor to our Lock Hospital wrote a letter to me this morning saying that there was a number of women in hiding who would not come under compulsion; but if they were not compelled, then they would come.

697. *Dr. de Jaager.*] Is it a private home in Natal?—It belongs to the Women's Christian Temperance Union. I do not know whether the Government assists it.

698. *Dr. Hewat.*] From your own statement, you would be in favour of these women of ill-fame continuing their avocation and spreading disease till such time as they made up their mind to go voluntarily to the home for treatment?—I think without the Act they might be reclaimed more easily.

699. Do not you think many a woman might go wrong and pursue a vicious life if it were not for the fact of the Contagious Diseases Act and its consequences?—I do not think so. Human nature is such that they do not think about that when they are going to sin; it is only when they have gone into sin that they object to its being made public.

700. With regard to the whole system of registration or control of houses of ill-fame, are they not an evil which exists all over the world in large centres of population?—The evil does exist certainly.

701. As one anxious to put down such a crying evil, do not you think that some legislation is necessary to control it?—I do not think it is right for a Christian Government to take part in recognizing and legalizing vice.

702. Is it not better to legislate on the lines of putting all these women in a certain locality or area, where people with good intentions, such as yourself, might be able to get at them, talk to them, try and reform them, and lead them from their evil ways?—I do not consider that we should be able to get at them any easier in that way. There is now the fear they have of being under the ban of the law. It is very difficult to get hold of them; numbers are in hiding, and do not give themselves up, and the

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police say they will not touch them at the present time; they have got into such difficulty, as the two laws are so conflicting—in fact, they do not know where they are. I had a long talk with the Director of Immigration, and he says he finds the same difficulty. The police are afraid of the laws.

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703. Do not you think if these women were concentrated in one area, under observation, there would be more chance of getting at them and reforming them?—I do not think so; we have so many agencies interlacing the country.

704. If they were confined to a limited area, the police, as well as clergymen and lady visitors, could get at them better and try and reform them, could they not. Is not that a more sensible way than getting rid of the Act as you suggest, which you admit controls the spread of a dreadful disease?—I contend that a Christian Government should not recognize vice at all. If these women are restricted to a certain locality it is recognizing the necessity of this vice, and we as Christians say that it is not a necessity, and public opinion must be educated to know that. The Government must help us in the matter and say it is not a necessity.

705. You stated in your evidence that you were in favour of homes being established where these bad women could go and be treated for this disease voluntarily: is not that recognizing vice just the same?—No, it is not recognizing vice; it is getting them into a home with a view to their being led to a better life.

706. But you recognize vice there just as you do in the Lock Hospital?—I do not think so; it is not the same at all; the two things are not on parallel lines.

707. *Mr. Anderson.*] What in your opinion is the effect of the working of the Morality Act in Cape Town?—I think that its effect has been practically to confuse the minds of the police, so that they do not know how to work.

708. You do not think it has done any good?—No; it is practically valueless.

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709. Has it done no good whatever?—I would not like to say that, but it is practically valueless.

710. Do you consider that the two Acts are in conflict?—Yes.

711. In your opinion has any good resulted from the Morality Act?—No; I think it has done more harm than good.

712. *Dr. de Jager.*] Has it not tended to clear the streets of prostitutes?—That may be so, but where are they? It does not follow that prostitution has been stopped.

713. But surely it has done some good by preventing these unfortunate women from infesting the streets, and there is not so much temptation for our youth. Is not that an advantage?—Those who consort with them know very well where they live.

714. But they used to be walking advertisements and a great temptation to innocent boys?—To a certain extent, perhaps, it is a good thing.

715. You want these Acts done away with, and that the dealing with these prostitutes should be left in the hands of the Women's Christian Association, in conjunction with the police; the same as in Natal?—Yes. We would have our homes and agencies doing work. It is not for me to suggest a remedy, I only have to point out the evils that exist; it is for our wise heads to suggest a remedy. I am here to point out the defects of the present laws, not to make new ones.

716. In your evidence you said: "We could get on better with these women if the laws were suspended." Who do you mean by "We"?—Philanthropic workers, and the Government, if you like, also, provided they will join us.

717. You do not think the Women's Christian Association ought to be entrusted with the regulation of this matter?—I would not like to say that altogether.

718. *Dr. Hewat.*] With reference to the Morality Act, have you noticed lately the greatly increased number of illegitimate births in Cape Town; has it not struck you as a terrible thing?—Yes, it has.

719. Has it not struck you more lately?—Yes; there is a terrible increase, but that is owing greatly to the war; we are suffering from the results of the war.

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720. Has not the Morality Act had something to do with the increased number of illegitimate births?—I do not think so.

721. Whenever you try to enforce legislation against this vice, the illegitimate birth rate goes up; how do you explain that. Do not you think it should be our object as Christians to protect our young respectable girls, whether servants or shop girls, in every way possible?—Yes, I do; but these Acts have not done so in the past, nor are they likely to do so in the future. You are not working on right lines. They have tried this kind of thing in France and elsewhere, and the effect has been rather to increase vice. The Christian workers in Natal find that by their method they can get hold of these women better.

722. *Dr. de Jager.*] In what way is the increase of illegitimate births due to the war, which has now been over four years?—The girls were demoralised owing to the large influx of the military.

723. *Mr. Anderson.*] I understood you to say that in Natal the police are assisting your workers?—They are not afraid to say that they know such and such women, and they bring them in.

724. Can you, as a private association, enlist the services of the police?—The Government are quite willing that the police should assist us.

725. Do they put the police at the disposal of your association in Natal?—No; but the Government recognise that they are doing good work there, and if the police find out these women, they are handed over at once.

726. Is not that method quite as objectionable as if the thing were carried out under State regulation?—I do not think so; it is not compulsory, nor is it so public. They work in a different way altogether.

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727. The only difference is, that one is done according to regulations and the other according to the sentiment of the Association?—Here in Cape Town the police will not touch cases under the law now. The difference is between compulsion and voluntary submission.

728. There is so much more freedom now?—Yes. The chief point of it all is that a Christian Government is legalizing and sanctioning vice; it all hangs on that.

729. *Chairman.*] That is your opinion?—Yes, and the opinion of all those who have gone into the thing as workers.

730. *Mr. T. Searle.*] We have it in evidence that you would like to see both these Acts done away with—the Contagious Diseases Act and the Morality Act?—Yes. As they are.

731. Some have said that if they had to choose, they would do away with the Morality Act; which would you prefer to see done away with?—I would do away with the Contagious Diseases Act.

732. And you think that the Government should support these Rescue Homes more than they do?—Yes.

733. *Dr. de Jager.*] It seems to me that your great objection is in the method of the Act after all; if you could get the authorities to inquire privately and secretly with regard to the vocation of these women, and set about it in a judicious manner, and when you are convinced that a woman is a prostitute, invite her to come up to the Lock Hospital for examination, and, if she is free from disease, let her retire again to the place she came from, but if she is diseased keep her under treatment till she is well, and then send her home without any publicity; would that suit your views?—Of course, we always object to class legislation; we do not like one law for the men and one for women. That we object to.

734. We are confronted with the system of administration. There is the Police Offences Act

against solicitation, there is the Contagious Diseases Prevention Act, and there is the Morality Act. You come to us and suggest that we should do away with these Acts, but we want to know from you, if we do away with them, what are we to substitute. You suggest that we should substitute certain Christian Associations or Endeavour Societies?—They already exist.

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735. We have to weigh all the evidence and opinions put before us. As long as human nature remains what it is, there will be prostitution: there is no getting away from that fact, and you must regulate and control it. Our object is, in the first instance, to minimize the spread of disease; and secondly, to legislate in such a way as to minimize the evil itself, and reduce the number of prostitutes?—We can never agree as women to anything that savours of State regulated vice. Ours is simply philanthropic work, and it must go on, whether you have the law or not. My object is to point out what are the defects and faults of the law, and we want the wiseheads to devise something to help us. We can never agree to any State regulated vice.

736. Would not the proper and most promising method be for your Associations and the Government to go hand in hand in the matter, for, after all, that is your evidence in regard to Natal?—Yes.

737. *Chairman.*] With regard to raising the age of consent, what are your ideas as to that. You know what the present age is?—13.

738. We are asked to raise the age of consent; to what age would you recommend it should be raised?—I would say, at the very lowest, 18.

739. Is that not rather high?—I think 18 should be the age.

740. *Dr. de Jager.*] Some girls here are fully developed at 12 or 14, are they not?—It is very easy to overcome a girl at that age.

741. In South Africa some girls are mothers at 15?—Unfortunately, yes.

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742. Is there not some danger in making the age 18 for the girl herself and the boy?—We find, with regard to prison girls of 13 and 14, that they get hardened, and it is almost impossible to reach them, and the worst class of prostitutes comes from those who are early made responsible for their actions.

743. Take the case of a coloured girl, 15 or 16, fully developed; she might mislead a boy, and then turn round and accuse him of assault or rape. Do you not see a danger in that direction?—I do not see any greater danger than exists now.

744. Is a girl of 13 as great a temptation as a girl of 17 or 18?—My idea is, that it is not always the girl that misleads.

745. Sometimes?—Perhaps occasionally.

746. *Mr. Wood.*] Your contention is, that with the increase of age the responsibility will naturally develop?—That is what I feel.

747. If the consensus of opinion was 16 as against the age of 18, it might perhaps answer, might it not?—We would accept that as an improvement.

748. *Dr. de Jager.*] Beyond what you have stated to us, have you any information which you could communicate to the Committee, to enable us to arrive at a conclusion with regard to this matter?—I would not like to formulate any scheme off-hand.

Mrs. Mary King, examined.

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749. *Chairman.*] What are you?—I am matron at the Lock Hospital.

750. You have heard the evidence given by the last witness?—Yes.

751. Do you agree with her?—No. I do not.

752. If you do not agree with her, will you tell the Committee on what points you differ?—With regard to the women who are placed on the register, it is not at all impossible for them to get their names taken off if they wish to lead a virtuous life. They can apply to the Magistrate and get relieved, and then we have done with them.

753. The name does not remain on the register?
—No.

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754. Have you many women in the Lock Hospital at present 33.

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755. You speak of the Cape Town Lock Hospital?
—Yes.

756. *Dr. Hewat.*] As one who is well versed in the knowledge of the Contagious Diseases Act, do you think it is a safeguard and protection to the community generally?—Yes, I do.

757. You quite realize, from your knowledge, the dreadful nature of syphilis?—Yes. With regard to Part II. of the Act, the last witness said that these women would come voluntarily, but they would do nothing of the kind, until they are so bad that they cannot walk; the worst cases, who have tertiary syphilis, never come before that.

758. You have heard what the last witness stated about the Contagious Diseases Act as it is at present worked, that it has hardened women to such an extent that they have lost all self-respect; do you agree with that?—I do not. In many cases, I myself have got women situations, and, after they have remained for three months, they have been taken off the register. Many have remained and done very well. I had a cook and a housemaid, and the cook has been there for five years. The girls who have been in the House of Mercy are the worst behaved girls I ever came near. That is my experience.

759. Are your opinions stronger now than they were before?—Very much stronger.

760. Have you cases in the Lock Hospital who have contracted disease in other ways?—Not at present. We have had two children, one five and the other seven.

761. With regard to women who enter the Lock Hospital, you keep a register, do you not?—Yes.

762. Is that register open to anyone to see?—No one whatever. No one sees it, except the doctor, or anyone connected with the Government.

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763. Anyone wanting to see the register would have to get official permission to do so, would he not?—Yes. That is the generally adopted principle.

764. Is there any necessity for a woman coming to the hospital to give her proper name?—No. We only want a name to put on the register to know the woman by.

765. You take the name they give?—Yes.

766. From your general experience, do you find any difficulty in getting these women with disease to come under treatment?—Those under Part II. of the Act are sent by other doctors sometimes, and they come voluntarily.

767. In some cases they come to the Lock Hospital, the doctor sees them, treats them, and sends them home?—Yes; and they have come back on a certain date.

768. Has it ever come to your knowledge that these women have gone outside and carried on prostitution until such time as they have come back to be examined?—Yes.

769. And during that time they may have spread the disease?—Yes.

770. Do you think the safest and best way is to keep them absolutely under control while they have the disease?—Yes. We never allow any of them under Part I. of the Act out, so as to prevent them carrying on their trade.

771. You heard what the last witness said with regard to putting the working of the Act under the Women's Christian Association with the aid of the police virtually; do you think that would be an improvement on the present system?—I do not think it would answer at all.

772. Why?—They will not come. Some of our Part II. cases we cannot get to stop till they are cured, and we cannot keep them unless the Magistrate makes an order.

773. Taking these girls generally, are they penitent as a rule?—No, not very penitent; some of them are very callous, and I think they would object to go to homes.

774. Do you not think that a kind, friendly word might often do good?—Yes, sometimes, but they very soon get under bad influences again. Ladies from the Women's Christian Association and the Salvation Army visit them, and we do whatever we can ourselves to lead them to a better life.

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775. Do you not think it necessary to recognize prostitution as a vice and put it under some control?—Yes, I do.

776. In what direction should that control be, under the lines of the Morality Act, or would you set apart a certain limited area for these women?—I think a certain area might be apportioned for the purpose, because no respectable people would live in that district, and they would be right away.

777. In that way people anxious to do them good might be better able to approach them?—Yes, I think so.

778. Have you any knowledge of the working of the Contagious Diseases Act and the Morality Act in other countries?—No.

779. With regard to the present Morality Act, do you find that the number of applications for admission to the Lock Hospital has increased?—I think so.

780. Do you find any children who have contracted the disease innocently?—Only two.

781. What is the youngest case?—Five and seven.

782. And what is the youngest age of a girl prostitute?—18 is the youngest.

783. *Mr. Wood.*] I understand from you that these prostitutes only come to you when they are in such a diseased condition that they cannot carry on their trade?—Not the prostitutes; I referred to those coming under Part II. of the Act. The last witness spoke of women coming up voluntarily and said that if they were not forced they would come up, but the cases we have had have not come till they were in a very far advanced stage of syphilis.

784. If these women could have been treated in an earlier stage, would it not have been far better

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for them and for those with whom they come in contact?—Yes, very much better.

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785. If they could have been taken in hand at an earlier stage, would there have been a better chance of reclaiming them, do you think?—No. They come and ask to be taken in when there is no other resource. Sometimes nurses and servants have come from their mistress' houses.

786. The Lock Hospital is the only recognized place where such people could be received?—Yes.

787. It is a last resource, in fact?—Yes.

788. The Women's Christian Association seem to think that kinder treatment and more attention would be the means possibly of drawing these women from their present mode of life; you would not object to that?—No.

789. Anything tending to mitigate the evil would be an advantage, would it not?—Yes.

790. *Mr. Hellier.*] What is the average age of those in the Lock Hospital—the 33 cases that you mentioned?—From 18 to 45, I should say.

791. Have any of them occupations except the trade of prostitution?—Seven of them are Part II. cases, and they are not registered.

792. Would they be servants or shop girls?—Servants, I think.

793. *Mr. Anderson.*] With regard to the two children you mentioned just now, how did they contract the disease?—I do not know. The mother of one of them, living in Loop Street, brought over the child and said the doctor told her she was suffering from the disease. She was a little white girl. The other child came from Salt River, and the mother did not know how she contracted the disease.

794. Was she white also?—No, coloured.

795. Were they bad cases?—The little white girl was not so bad; the other one was.

796. Do you happen to know whether many of these women of ill-fame enter domestic service?—Yes, I know a great many of them do.

797. Is it a general rule with them?—They go into service for a month or two, and then go back again to prostitution.

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798. Why do they go into service?—I do not know.

799. Do not you think this constitutes a great danger to families?—Yes.

800. Are they known to enter domestic service in a diseased state?—I cannot say.

801. Are you of opinion that the two existing Acts are in conflict?—Yes, I am sure they are.

802. What would you suggest with the view of remedying that defect?—I think the Morality Act ought to be repealed as far as women are concerned, and these prostitutes ought to be made to reside in one area. At the back of the hospital it is comparatively quiet, and dozens of them come up there with men at night, and little boys follow them up, and see things that they never ought to dream of. When sitting at our back door, we have sometimes had to go inside, for they come up there and are a great nuisance.

803. Is that the effect of the Morality Act?—Yes. It has not been so bad lately, but during last summer it was a disgrace.

804. Is the Morality Act so stringently administered now as formerly?—No, I do not think so.

805. Was it stringently administered after its first promulgation?—Yes.

806. You do not think it is so stringently administered now?—No.

807. What reason do you assign for that?—I cannot say.

808. You would not repeal the whole of the Morality Act, would you?—No; the part relating to men living on the proceeds of prostitution ought to be made more stringent than it is.

809. What part would you repeal?—I would repeal the part relating to the closing of brothels, and these women ought to be kept off the streets certainly, and they should not be allowed to solicit. I

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think they should be compelled to live in one district. No respectable women would live in brothels, and children would not be exposed to the sights they now witness. Those persons who wanted the women would know where they lived, without meeting them in the streets.

810. *Mr. Anderson.*] Have you seen any of the petitions that have been presented to the House with reference to the repeal of the Contagious Diseases Act?—No, I have not.

811. This is one of the assertions in a petition praying for the repeal of the Act: "It is more frequently regarded by the impure as a licence for immorality than as a preventative to the spread of disease." What do you say as to that allegation?—I do not think it is so at all.

812. The second allegation in the petition is: "Where disease exists there is often a tendency to hide it for fear of being brought under the operation of the Act." Is that so?—I think it deters many women from going on the town. I know in my own experience of two girls who came from a well-known business place in Cape Town. They used to visit one of these places in order to augment their salaries, and one day the brothel keeper kept the girls and brought them up to the Lock Hospital. They covered themselves up, and the doctor let them out at the back door, and told them to go away and never to come there again. I think the Act deters many girls, for fear of being brought under the Contagious Diseases Act.

813. Then this petition says: "Where disease has been accidentally contracted, the discovery of it to those in authority leads to the persons affected being at once classed with persons of ill-fame, and provided for as such by the Act." What do you say as to that?—If they come to be treated in the hospital they would have to be treated only at one place, and if their name is not on the register, the only people who see them are the visitors who come for the purpose of giving religious instruction

814. *Dr. Hewat.*] And afterwards, the House of Mercy very often takes them, does it not?—Yes, and many go back to service. Many are taken to the House of Mercy from the Lock Hospital after they are cured.

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815. *Mr. Anderson.*] The petition goes on to say: "The Act does not fail to retain for immoral purposes those who, by their own fault or misfortune, have been unable to prevent their names being placed on the town list." Is that so?—No; when these women are discharged, their names are removed from the register—Part II. cases I speak of: those who are not registered prostitutes.

816. Then there is another allegation in this petition, as follows: "The Act provides that on the first offence, a person who, it may be, has been deceived by another, shall be immediately classed as a prostitute and subjected for the rest of her life to frequent surgical examinations, no inducements being offered her to return to a pure and virtuous life." Is that so?—No, it is nothing of the kind. The woman must be living as a known prostitute to be placed on the register at all, living in a house of ill-fame.

817. *Dr. Hewat.*] Before the Morality Act was promulgated, when you worked the Contagious Diseases Act drastically, did you have many young girls who were not recognized prostitutes coming to the Lock Hospital?—No.

818. What is the position now, since the Morality Act?—We have had many more cases coming under Part II. of the Contagious Diseases Act.

819. *Mr. Anderson.*] There is an assertion in another petition, which says: "That whereas in the carrying out of Part IV. of the Act 26 of 1902 the irregularities disclosed in 1904 have shown to demonstration that whilst the Contagious Diseases Act is in force, false witness may be brought to bear upon the innocent and gross insult perpetrated where no vice exists, and that from fear an unprotected woman may be made to yield to the coercive power of a bribed official and dragged down to an evil life."

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What do you say to that?—It is nothing of the kind. In the first instance, after inquiries have been made, the lay inspector asks the girl to come and see the doctor when complaints have been lodged about any particular person. He hears her side of the question, and then if he thinks that the evidence shows she is carrying on as a prostitute, he asks her to sign a voluntary submission. He fills it in and asks her if she is willing to sign. If she is not, she can appeal to the Magistrate, but we cannot make her sign or compel her to be examined: it is quite a voluntary act.

820. *Mr. T. Searle.*] Is there any persuasion used to induce the girl to sign?—No. If it is proved that she is a prostitute then she is asked to sign, and she signs without any more trouble. Sometimes she wants to know who reported her.

821. Is it not pointed out that it is better for her to sign than be run in?—No, we could not do that; we could not run her in. An affidavit would have to be made and the case tried before the Magistrate.

822. No pressure is brought to bear?—None.

823. *Mr. Anderson.*] With regard to these women entering domestic service, of your own knowledge do you know that they have communicated the disease to families?—I do not know that.

824. *Chairman.*] With regard to raising the age of consent, what is your opinion about that?—I think it ought to be high.

825. What age would you say?—18, I think.

826. *Dr. Hewat.*] Under 18 or 19?—I would say 18. A girl would know then what she was doing really and truly, but I do not think the age should be any younger.

827. *Chairman.*] Do you know anything about the age of consent in other countries?—No.

828. *Mr. Hellier.*] You mean to say that a girl of 13 or 14 does not know what she is doing?—She does not realize what she is doing. She knows right from wrong, but she does not realize the consequences of her act.

829. *Dr. Hewat.*] A girl of 16 does, does she not?—
Yes, a girl of 16 would know.

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839. *Dr. de Jager.*] A girl of 16 or 17 might bring
a male person into considerable difficulty, might
she not?—Yes.

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831. *Mr. Hellier.*] You think that the age of 13 is
undoubtedly too young?—Yes.

Mr. Robert George Ross, examined.

832. *Chairman.*] You live in Cape Town?—Yes.

833. And you are agent for the Cape Town and
Suburban Social Reform Association?—Yes.

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834. You have heard the evidence given by the
two previous witnesses?—Yes.

835. Do you agree with them?—Not with all they
said.

836. What points do you disagree with?—My
work has been principally in connection with the
administration of the present Morality Act, and my
impression is that the Act has done a good work,
but I do not think it has been properly adminis-
tered. I think, on the whole, it has been very suc-
cessful.

837. You have heard the opinion expressed by
Mrs. Davison with regard to the repeal of the first
part of the Contagious Diseases Act?—Yes. It is
rather a difficult question. Our Association would
be rather in favour of including men equally with
women under the provisions—in fact, I have been
trying to get as much evidence as I can as to the
amount of disease at the present time. I have
called on our various camps, and they say there is a
great deal of disease—in fact, they nearly all admit
that more cases are treated now. There have been
as many as six cases a day sometimes, they tell me.

838. *Dr. Hewat.*] What is the object of the Associa-
tion you belong to?—We look after the administra-
tion of the present Morality Act, but we were en-
gaged in this work previous to the promulgation of
the Act. We also got up memorials in favour of it,
and we have been in touch with the work ever
since.

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839. How is it kept up: by voluntary subscriptions?—Yes.

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840. Are you the paid agent for the Association?—Yes.

841. Who are the subscribers towards it mostly?—I will give you the names of the committee:—President, Rev. J. J. McClure; Vice-President, Venerable Archdeacon Brooke; Council, Revs. J. E. Beverley, E. Baker, T. E. Marsh, W. Owen Jenkins, and Geo. Robson, Dr. Chas. Anderson, Dr. Sharp, C. F. Cleghorn, C. E. Derham, E. A. Howe, J. J. G. Malan, and J. G. Mackenzie; Executive Committee, Venerable Archdeacon Brooke, Revs. J. E. Beverley, T. E. Marsh, Geo. Robson, Messrs. C. E. Derham and J. J. G. Malan; Secretary and Treasurer, C. F. Cleghorn.

842. Are there any doctors?—Dr. Sharpe, of Woodstock, is a member of our Association; and Dr. Anderson.

843. How many members are there?—The membership is not very large. We take a very broad view of the matter, and our work, I may say, has been carried on privately, and we have not tried to secure members for our Association.

844. With regard to your Association, do you aim at legislation to entirely put down prostitution, or rather to control it?—My plan of working was, when a house became noticeable, and women were seen to go out into the street soliciting or stood at their doors, to get up a memorial against it, signed by the residents, but if there was nothing noticeable and the place was kept quiet and orderly, we let it remain.

845. Do you recognise that prostitution is an evil that does exist, and must exist, in all towns?—We recognize that it does exist, and it will require a considerable amount of public education before you eradicate it.

846. Do not you find that it is more common where education exists, and that it increases as education advances?—I do not think so. That is not my opinion.

847. With regard to the Contagious Diseases Act, you know the basis on which the petitions have been presented to the House?—Yes.

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848. Do you agree with them generally; do you agree with the repeal of the Contagious Diseases Act?—Our Association has taken no part in that. We should be inclined to include men. I have heard of several cases quite recently where men have been treated by chemists, and they have said they thought they were getting better because they had had connection with a pure virgin. Of course, that theory is a very old theory. I think when a medical practitioner finds a man suffering from venereal disease, the patient ought to be separated from contact with other people.

849. Have you had any experience in other countries outside Natal and the Cape Colony?—No.

850. Do you think it is an advisable thing to locate prostitution in a certain area, instead of their being distributed about the town?—No; it would never do to locate them in a certain part of Cape Town, because it is very difficult for the police or anyone else to distinguish sometimes between prostitutes and ordinary people, especially among the coloured class. They may be prostitutes one day and washerwomen or servants the next, so that it would be utterly impossible to confine these women in one area. The system has been tried in Italy and elsewhere, but it has proved a failure. If there is such a location, it often proves a centre for thieves and pickpockets, and when you get so many together, it creates a certain amount of opposition, and they try all the more to catch hold of men. There is music, dancing and so on, in order to attract the men. If you do not have these women all together, there is not so much opposition, and it is much quieter.

851. Suppose a woman of ill-fame gets venereal disease, should she not be kept under control so as to prevent her spreading it?—Yes; she ought to be treated.

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852. One of the petitions alleges that the Act should apply to men as well as women; what do you say to that; do you think the necessity exists?—Yes; from cases that I have heard of. Men often give the disease to girls, and that is growing.

853. *Mr. Anderson.*] You think that men should be subjected to examination?—I think that when it is discovered a man is suffering from syphilis he should be isolated and prevented from coming in contact with others.

854. We have it on medical authority that very often a woman does not know for a considerable time whether she is diseased or not, whereas a man invariably knows at once as regards himself?—A lady friend of mine, a nurse, said that some girls have contracted the disease in the very act of being examined.

855. The point is this, that the hidden character of the disease makes women the principal disseminators frequently?—Yes. Of course, I am not an expert, but we know from experience that men in the worse stages of the disease have gone and had connection with a pure girl. Certainly cases like that should be isolated in some way.

856. Is such a thing possible, in your opinion?—A chemist told me that he had had several cases quite recently; the men told him so themselves.

857. What is your opinion with regard to the working of these two Acts; how do they work together, the Morality and the Contagious Diseases Act?—It is only quite recently that we knew the Contagious Diseases Act was in existence. We have not had a great deal of experience of that. I asked the Sub-Inspector of Police, and he said he did not know about it, whether it existed or not.

858. You were not aware of the simultaneous working of these two Acts?—Recently we have been aware of it; we have seen policemen taking coloured women up to the Lock Hospital, and we thought it was not altogether the thing.

859. Do you think the two Acts work smoothly? —They have been working fairly smoothly; the only thing against the Morality Act was the lack of power of administration. Very often there are prostitutes living at cafés and lodging-houses, and if the police had the power to visit these places and inform the proprietors, the women could have been turned out. There would not have been the least difficulty. At the present time we have a report that at a certain lodging-house there are two prostitutes; in fact we reported it about six weeks ago, but nothing has been done. If the police, or some other authority, would go to the manager and say they were informed that so and so were occupying rooms in the house, in nine cases out of ten the proprietor would turn the women out of the house, because the law is so strict with regard to brothel-keepers and landlords. The difficulty has been that the police do not follow up the work. We were successful in getting a conviction against one hotel for brothel-keeping, and it had a telling effect on others. If that had been followed up, very few places would be used for immoral purposes. The difficulty we find with our work is, that we are simply nobody in the eyes of the law. It is very difficult for the police to move sometimes.

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860. Do you think the two Acts work in conflict? No, I do not think so.

861. They are different in their provisions, are they not?—It is only quite recently that we knew such an Act was in existence.

862. Do you think they work quite smoothly together now?—We have a difficulty in getting the police to take up cases, owing to the new restrictions, but there is nothing else.

863. What, in your opinion, has been the effect of the Morality Act; do you think it has done good?—It has.

864. In what way?—Previous to the promulgation of the Morality Act, we had something like

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150 or 160 brothels, and at these places the women stood in the streets, sometimes half naked, soliciting the passers by. They would sometimes take off a man's hat or take a parcel from him, in order to get him into the house. Then they used to drive through the streets in landaus and distribute cards. All that is completely done away with now.

865. Has all that been suppressed by the Morality Act?—Yes, since recently. There is one house where the system of distributing cards is adopted, and at six other houses they solicit at the doors in the evening.

866. Is that now?—Yes, at the present moment; we have that report.

867. Since the Attorney-General's speech?—Yes, and since it has gradually become known to these women that it was not the duty of the police to have anything to do with these houses.

868. You say that the effect of the Morality Act has been to suppress, to a certain extent, the brothels?—Yes, and remove temptation to young men out of the streets.

869. Owing to the Morality Act, the streets are now practically clear of women soliciting, are they not?—Yes. There was an increase in solicitation, and it was months before it was reduced, but at the present time you will, I think, find very few women soliciting in the streets.

870. So that the Act has done good?—Yes, unquestionably.

871. With regard to the brothels which you say have been suppressed, where have the women gone to?—A great number went to Johannesburg and some went home to England, but we have a good number in the town at present, so it is not so noticeable.

872. You say the white women have gone away practically?—Yes, a good number.

873. Is there not a great number of coloured women engaged in this business?—Yes, a good number.

874. They live in brothels, too, do they not?—A great many live in private houses, and there are houses of assignation that they take men to in the evening, but they live their ordinary lives during the day.

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875. The brothels have been suppressed, and they have gone elsewhere to private houses?—Yes.

876. What houses do they go to?—They rent houses and keep the doors locked during the day, and at night they go to the corners of the streets and solicit men, and take them to these empty houses.

877. They desert one house and open another?—Yes.

878. When a house becomes known as a brothel, then they desert that house and take up their calling in another house?—Until they are interfered with by the police they continue on in the house, and if the house is quiet and orderly, and the women do not solicit in the streets, the police never take any notice. There are five or six houses of that sort, but the inmates do not make themselves conspicuous, and they are left alone. I know about 45 houses where immorality is carried on.

879. Have you not taken any action?—We have reported about eight of the houses, but we can get nothing done.

880. Why do you only report eight?—We have nothing against the other houses; we know they are there, but we cannot make a complaint, as we have nothing against them.

881. Why do you make a complaint against the eight houses?—Because the women solicit from the doors and in the streets. The difficulty is, we cannot get the residents to go into court; sometimes the coloured people are paid to remain quiet and not give evidence, and another thing is that they are afraid to go into court and give evidence, and they do not care to waste time at the court.

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Perhaps the mother of a family is summoned to go to the court at 10 o'clock in the morning, and it is four or five in the afternoon before she can get home again to her family. You cannot work the Act if you depend upon the residents going up to give evidence. They do not mind signing a memorial, or making an affidavit, but they will not go to court.

882. Your Association exists for the suppression of the brothels, and to work in harmony with the Morality Act?—Yes.

883. I cannot understand why you do not proceed against these other houses where you state no open solicitation goes on; you merely take those which are conspicuous by the solicitation that goes on, that is to say, eight out of 45, leaving 37?—We know that they are there, but at the same time we cannot bring the necessary evidence. The people in the neighbourhood see prostitutes with men going in and out of the house, but there is no nuisance to the residents, and you cannot bring it into court. Some members of our Association took the view that you can only deal with a thing when it becomes a nuisance.

884. Who took that view?—Certain members of our Association.

885. *Mr. T. Searle.*] With reference to the idea of setting apart a separate area for prostitutes, those who advocate that are inconsistent, are they not, because in one breath they tell you it is not possible to do away with prostitution by law, and yet in another they expect you by law to confine these women within certain limits?—Yes.

886. You mention the superstition which exists among ignorant people that when a man has the disease, if he has connection with a pure girl it will be cured; do you not think it ought to be made a punishable offence for a man knowing himself to be diseased to have connection under those circumstances?—Decidedly.

887. You recognise that we have laws for segregating leprosy, and lepers are torn away from their families and sent over to Robben Island, however respectable they may be. Syphilis, in a sense, is worse than leprosy, and yet the law does not compel the segregation of syphilitics; do you not think we might make the law with regard to syphilitics just the same as it is with regard to leprosy?—Yes, in fact that is the opinion of our Association; they think syphilis should be treated on similar lines as other contagious diseases.

888. That would be the logical way of dealing with the disease, would it not?—Yes.

889. Not by countenancing it, and saying that it must exist?—No.

890. It is possible, I suppose, that even some doctors are not very virtuous themselves?—Decidedly.

891. And consequently, if a doctor of that description was charged with the carrying out of the Contagious Diseases Act, it is more likely to aggravate the matter than to cure it?—I have heard very strong complaints against the treatment of prostitutes at the Lock Hospital.

892. That would be one of the objections to the Contagious Diseases Act?—Yes.

893. Your Society is purely voluntary, is it not, supported by voluntary contributions?—Yes.

894. Does it do a great deal of good?—Yes, a considerable amount.

895. Do you think the Government ought to recognise such a Society and support it?—Yes; some of the members have been discussing that, because we find a difficulty in these times of getting in the money, and it is almost a case of giving up the work entirely unless we can get something in the way of a grant from the Government. The Society for the Prevention of Cruelty to Animals is aided by the Government. We do not want the power to arrest, but only to point out to the police where irregularities occur, and give as much evi-

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dence as we can, so that the police can take the matter up. With regard to brothels more especially, you cannot get the people in the neighbourhood to give evidence, and you never will. There is a certain house in Longmarket Street, and if the authorities wait until the residents come into court and give evidence, the thing might wait for the next 50 years. Not one resident within a stone's throw would come into court and give evidence. We were thinking whether, in a case of that kind, a memorial by the Association could not be got up against the house, signed by a Justice of the Peace. That ought to be enough to enable the police to take proceedings and keep the place under observation.

896. What attitude do you find the Government takes as a rule with regard to associations like yours?—I think we have been more or less a thorn in the flesh to the Government, and also the police, since we took up this matter.

897. In other words, your experience is that the Government or the authorities are more inclined to look upon these societies as a nuisance than anything else?—Yes.

898. They regard it as an interference?—Yes.

899. They do not care about moral agencies of this kind interfering with their work?—Just so; and I might say that it was reports made to the police that brought to light the police scandals some time ago. The police were receiving protection money from these people, and we insisted on their convicting them.

900. *Mr. Anderson.*] You are aware of the very grave character of syphilis as a contagious disease?—Yes.

901. Do you not think it is incumbent upon the State to legislate against the spread of the disease?—Yes; but the present working of the Contagious Diseases Act does not touch the source of the disease.

902. You mean the working of the Act?—Just so.

903. Does it prevent the spread of the disease, in your opinion?—I question whether it does. I do not believe it does, because the disease comes from the very low class coloured women. If you take a European brothel, conducted by a European landlady, if a man goes there, she will give him a guarantee that in the event of his contracting any disease within the next two years, she will pay the expenses. The Europeans are very particular about cleanliness. I know the case of one medical man whose practice is principally made up in attending these women privately. He admitted to me that he might as well leave Cape Town were it not for attending prostitutes. The Europeans are naturally inclined to keep themselves clean, from a business point of view. In the case of the coloured women, where the disease originates, it is impossible for the police to draw a line between the coloured prostitutes and other coloured women. They stand at the corners of the streets, and I defy anyone, unless they see these women soliciting or taking men into their house, to say whether they are prostitutes or not. You cannot get at these people, and they are the greatest source of danger. A great many men go to these women, I believe, and the Contagious Diseases Act is not touching the disease as it should do at all. It is dealing more with the Europeans than with the coloured girls.

904. You mean to say that the Contagious Diseases Act is dealing more with the white women than with the coloured class?—What I say is that it has very little effect on the coloured girls, because the police themselves are unable to distinguish between the moral and the immoral, unless they are well-known coloured prostitutes that everyone knows.

905. I understand you to say that the application of the Contagious Diseases Act affects more the white women than the coloured women; the evidence we have had is altogether different?—I

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mead to say that, in carrying out the Contagious Diseases Act, it is much easier to include all the European prostitutes than it is to include all the coloured prostitutes. There is a greater percentage of European prostitutes in Cape Town who come under the Contagious Diseases Act than coloured prostitutes.

906. *Mr. T. Searle.*] You mean there is a larger proportion of white than coloured?—Yes.

907. *Mr. Anderson.*] Are you aware that syphilis is carried into private families through domestic servants, recruited from the ranks of women of ill-fame?—Yes, I believe it is, but the difficulty is to get to know these people who are diseased.

908. But it is a fact, is it not?—I have heard of it. We have never had any experience of that. I have heard it talked of.

909. It is said that they remain a certain short period in service, and then come out again and return to their evil life?—Yes; I have heard so, but I cannot say definitely that it is so. I know that it is a very difficult thing to draw the line between known prostitutes and other girls among the coloured class, so that, no matter how strictly the Act is enforced, there will be a large percentage of coloured prostitutes who would not come under the Act, so that the Act would not be any good in preventing the evil in that way.

Friday, 27th July, 1906.

PRESENT :

Mr. THERON (Chairman).

Mr. Hellier.

Dr. de Jager.

Mr. Wood.

Mr. Anderson.

Mr. T. Searle.

Rev. John James McClure, D.D., examined.

910. *Chairman*]. I believe you are a Doctor of Divinity, and minister of the Gardens Presbyterian Church in Cape Town?—Yes.

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911. You know the object of this Committee?—Yes. I understand it is to investigate the operation of the Contagious Diseases Prevention Act.

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912. Have you paid any attention to the working of the Act?—Yes. I would like to read a communication from the Cape Town and District Social Reform Association, of which I am president. They have been dealing with this matter in Cape Town. [*Document put in.*] I should also like to read a letter from a gentleman who I expected, on the invitation of this Committee, would have been here to-day, Dr. Simpson Wells. [*Document put in.*] I might explain what I think is the point at issue, that according to our interpretation, the Morality Act did away with the Contagious Diseases Act. I think it is recognized that at the time the Morality Act was passed, the Contagious Diseases Act was practically annulled. I think that was understood, but the fact is, that the Government ever since have simply gone on the old lines, so far as the Lock Hospital system is concerned. The Lock Hospital in Cape Town has always been in operation, and that is the cause of the seeming want of clearness. The Contagious Diseases Act has actually been annulled by the Morality Act, and yet the Health Authorities have,

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in Cape Town at least, maintained the Lock Hospital, and to some extent carried on operation under the Contagious Diseases Act, as if there were no Morality law.

913. Then I understand that according to your first resolution, you approve of the Morality Act? — Yes.

914. With regard to the third resolution, you object to the Contagious Diseases Act?—Yes. I might say that Dr. Wells intimated to me that he would be glad to come and give evidence before the Committee, but on re-consideration he felt that he had not been long enough in the country to give evidence which would help the Committee. He therefore made a written statement with regard to the Morality Act during his experiences of the last three years.

915. Have you paid any attention to the matter of prostitution so as to be able to say whether there has been any diminution of the evil going on?—There has, I think, been a very great diminution in Cape Town.

916. Is it not perhaps only because these women are driven into seclusion, instead of carrying on openly in the streets?—According to what I am told by the police authorities, prostitution has decreased to a tremendous amount in Cape Town,

917. Is it not this, that you have perhaps fewer white women, but the coloured women have come in and filled up the place of those who have disappeared?—No. I do not think so; they are not permitted any more than the others, they are not allowed to solicit, and as far as possible they are kept in control by the police, the same as the white women.

918. Would you be astonished to hear that witnesses have given evidence here to the effect that the evil is just as bad as it ever was before, but now these women have forsaken their houses to carry on their trade on the mountain side and on the veldt?—That is the coloured women.

919. Yes?—In connection with coloured women it is an utter impossibility almost, and I think the police would be the first to admit the fact, to distinguish between a prostitute and a non-prostitute. I think also that it is generally admitted that in Cape Town a great many of the servants in boarding houses and other places engage in prostitution, yet they are not of course put on the list of prostitutes. That, I think, is a most dangerous kind of prostitution, as you cannot follow up one in ten of these coloured women.

920. Has it been reported to you that these coloured women engage in prostitution?—I have been told directly by a medical man who probably has about the largest practice in this direction in Cape Town, that venereal disease has decreased by one-half since the Morality Act came into operation.

921. Is he here?—No ; he has gone to England. I daresay he had the largest practice in this direction of any medical man in the city.

922. *Mr. Anderson.*] Have you paid any attention to the working of the two Acts in force now, the Contagious Diseases Prevention Act and the Morality Act?—I have given very considerable attention to the matter, and studied such evidence as has been available in connection with the two Congresses which have been held in Brussels, and my own opinion is, that the Contagious Diseases Acts, so far as the regulation and examination are concerned, are absolutely useless, and the case for regulation, as the Scotch would say, has not been proven. I have studied very carefully the evidence given at the two Congresses at Brussels, and I have also studied a standard book on the subject, entitled "The Social Evil," being a report prepared under the direction of a committee of 15 gentlemen in New York. They examined into all the legislation in Europe on the subject, and even under the peculiar conditions of New York, where there is such a cosmopolitan population, they cannot advise any

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measures of a regulative character whatever, except this, that they do not believe that women should be allowed on the street, and that there should be no particular signs or representations of the evil in any particular house; that the thing should, as far as possible, be kept off the street. Of course, for my own part, I take up the moral position on the subject, expressed in one of the paragraphs of this book, and if the Committee will permit me I will read it: "By creating a class of administrative chattels for the use and enjoyment of the vicious, the State outrages the deepest sentiments of humanity. By discriminating between vicious women and vicious men, it insults woman-kind. By rendering vice innocuous, either in fact or in seeming, it incites the youth of both sexes to debauch. The defender of sanitary regulation will urge in vain against reasoning of this kind. He may try to prove that the countervailing good of relementation would be so great that the sum of human happiness would be greatly increased by its introduction. But moral sentiments do not demand that society should be happy; they do demand that it should be moral." That is a point I want the Committee to consider very carefully. Under the Contagious Diseases Act, when a woman is examined, she gets a certificate to debauch: she is sent for for that purpose. It is not for the purpose of redeeming her and lifting her out of the position she is in and making her a respectable woman in society, but it is for the purpose of fitting her to go out and debauch those who are available. That paragraph expresses exactly what I feel on this question, and I think those who study the results of these investigations will find that there is not a country in the world at the present moment where regulation is in operation, where scientists and medical men can testify that there is any reduction whatever of venereal disease; and, of course, what the doctors are aiming at is the reduction of

veneral disease ; in other words, the protection that they have does not protect. I will give you an illustration of that. In the city of Paris to-day there are 6,000 registered prostitutes, and the medical men compute that on the streets there are 30,000 prostitutes ; and Dr. Fournier stated, at the last Brussels congress, that one person in seven in Paris was suffering from syphilis. They have had repressive measures there for 100 years, and everyone knows that in Paris the police administration is very thorough ; but you have the fact that not one in six of the women in this particular case are under supervision, and hence the case fails. Of course, as I have said, I always come back to the position that the State is bound to take up a moral attitude : it must not merely deal with the vice for the purpose of repressing it in itself, but the State makes itself responsible if it takes the action that is involved in the Contagious Diseases Act : the State makes itself responsible for the evil, so to speak.

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923. It is admitted that the two Acts cannot work together at present and that some change is necessary in the law, is that your opinion?—No, I hold that the Morality Act abrogated the Contagious Diseases Act.

924. You hold that the Morality Act abrogates the Contagious Diseases Act?—Yes.

925. And therefore you think the Contagious Diseases Act should be repealed : is that it? I hold that it is repealed practically by the Morality Act. I think there is a clause in the Morality Act that repeals everything that is inconsistent with the other Act.

926. At present we have two pieces of legislation working diametrically in opposite directions ; is that not so?—Yes ; but my view is that it is only by the alteration that the law is clear, that the Morality Act disannuls certain sections of the Contagious Diseases Act which are inconsistent.

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927. You think that the Contagious Diseases Act must be repealed and the Morality Act stand?—Practically it is repealed in that sense: in practice it is not repealed, I quite admit.

928. That being so, the law must be altered?—My view is, that the Contagious Diseases Act is wrong.

929. I want to get your view. Is your view this, that the Morality Act works well?—Yes, it has done this, prostitution has gone down in Cape Town, that is definite.

930. And therefore there is no necessity for the Contagious Diseases Act, which ought to be repealed?—Certainly.

931. As regards the certificate given to women you spoke of: are you aware that they do not get any certificate. There is no certificate supplied to these women at all, that is to say, nothing of that kind is in their possession which they can exhibit?—Doctors give it: I do not know whether a certificate is given at the Lock Hospital.

932. Under the Contagious Diseases Act, a certificate is presented to these women for signature, but it is not given to them, but retained by the authorities at the Lock Hospital. No certificate is given to a woman which she can make use of or exhibit to show that she is clean. Are you aware of that?—No: I thought a certificate was given to the woman herself.

933. Here is the document which these women have to sign (exhibiting same), when they submit themselves to voluntary periodical examination?—I was under the impression it was given to them.

934. *Mr. Hellier.*] Does the Act say what is to be done with the certificate?—I do not think so.

935. *Mr. Anderson.*] This particular disease is of a very contagious and virulent character, is it not?—Yes.

936. Do not you think it is the duty of the State to legislate against the spread of such a contagious and dreadful disease?—Yes. I think if venereal

disease assumes the proportions I believe it has assumed in this country, legislation is necessary, that is to say, necessary as in the case of any other contagious disease.

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937. It is necessary in order to prevent the spread of the disease?—Yes; but not in the direction of the C.D. Act. We would have legislation applied for preventing the spread of disease. My idea is, that there should be greater attention given to teaching the people and educating them in the nature of this evil, and especially young men should be acquainted with the tremendous danger involved in the practice of vice of this kind.

938. That, of course, applies throughout our legislation in all matters affecting the health of the people, whether it be drunkenness or whether it be vice in other directions, such as that which this Committee is now looking into. The education of the people would, if properly carried out, be a strong element in suppressing the vice, would it not?—I believe so.

939. But still, in addition to that, the State, as in the case with liquor legislation, should do all it can to suppress the evil: do not you think so?—Yes; quite so.

940. We all admit that the stronger power is the power of education; but that must not prevent the State coming in and helping in such a way as I have indicated, by legislating against the spread of a virulent contagious disease?—I think the State ought to do so, but not in the direction of the Contagious Diseases Act.

941. As regards these coloured prostitutes, is it within your knowledge that sometimes they take service in respectable families and remain there for some months?—Yes; but it is very difficult among the coloured women to discriminate between prostitutes and non-prostitutes.

942. Do not you think that that constitutes a great danger to the public health?—A terrible danger.

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943. How would you minimize that evil, by legislation?—My own feeling from what I have learned of the coloured population is, that that class demands very different treatment from any treatment that has been in vogue in any other country, for the simple reason that their conditions are different. So far as I understand, the conditions among these coloured women are different from those in any part of the world.

944. We have it in evidence that the condition of these coloured women is different from that in any other country, at any rate, any European country; is it not therefore necessary to have laws somewhat different to deal with them?—I do not see that you want a law different to what you would apply for the suppression of any other contagious disease; that is where I hold the great mistake has been made in all countries in treating this disease. For instance, if you have plague, you placard the whole place with the nature of the disease, you order people to take special precautions and care, you tell them the results, you publish statistics, and spend thousands upon thousands of pounds in stamping the disease out. Here you have syphilis raging in the Colony, yet I do not know that anywhere instruction has been given to the people generally, either white or coloured, with regard to the nature of this disease, where tremendous danger is involved. The thing has been neglected, and my own feeling is that unless you are prepared to start on a process of education in this Colony, things will get worse.

945. Things are at present very bad as regards the coloured women. We have it on medical authority that cases of syphilis are most prevalent among the coloured population. Do not you think that is a condition of affairs calling for the intervention of the State, seeing that these coloured prostitutes get into private houses and infect innocent people, infect children by kissing them and drinking out of the same vessels, and so on. Is not

legislation urgently necessary to prevent such a terrible state of things?—How are you going to differentiate between a coloured woman who has got venereal disease and any other. There is no medical man in the city who could write down one of these servants as a prostitute. You might apply legislation to have them treated, but you could not, under any civilized conditions, order such a woman to be put in the prostitute class.

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946. Do you not think if the State, through its officers, found that such cases did exist, and it could be proved that these women, although engaging in domestic service, were virtually prostitutes and infected with disease, it should have the right to call upon such persons to submit to examination?—You cannot do that. Where a system has been in operation for 100 years, you cannot even bring one in six under control; and here there is practically no distinction among the coloured class between prostitutes and non-prostitutes, and, of course, there are very loose ideas prevalent with regard to marital relations: you cannot possibly differentiate.

947. You think the State cannot follow that out here?—Not here.

948. Why not?—You cannot find the people.

949. But is it not the business of those who have the administration of the Act to find them out?—You cannot find them out.

950. Why not?—You may get a certain number of white or coloured, as you do at present, and they may attend and be treated, but you do not get at the large body of prostitutes outside.

951. *Mr. T. Searle.*] What you mean is, that European prostitutes dress in a different way, and you can generally see by their features what class they belong to, whereas in the case of the coloured woman it is different?—Yes, that is so.

952. *Mr. Anderson.*] Do you not think that the head of a family, who discovers that a woman in his service is affected with venereal disease, has a

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right to report such a case to the Government, and should report it to the Government?—Yes, that is exactly what I am getting at. You should apply legislation such as you would apply for stamping out of any other contagious disease. It is the duty of the Government to do everything in its power to stamp out disease, and if the power it has is not sufficient, then give it greater power, but what I want to emphasize is that you are not going by the Contagious Diseases Act to achieve the object you have in view, that is, lessening the danger to those who are unaffected and possibly lessening the disease among those who are. The evidence we have in this book I have alluded to, and the evidence we have from the two Congresses at Brussels shows that the repressive measures of this kind, while not an absolute failure, have really done nothing to lessen the disease. The disease is there, and it is increasing. In Great Britain and America it exists to a terrible extent in all the large cities, and they have decided not to adopt repressive methods. In America the greatest authorities have given up the idea of keeping soldiers free through regulation.

953. Do you admit that owing to the peculiar character of our population here, a different law should be made to apply to them than the law which is generally carried out say in European countries?—It seems to me that unless you go in for the universal reporting of venereal disease, either men or women among the coloured class, and segregating them, you will find it very difficult under the voluntary system to do much. In Italy they are trying the voluntary system, and there are dispensaries in the cities and country towns where people who are diseased can be treated, and possibly if with that there was combined a system of instruction in the evils resulting from prostitution and better attention paid to sanitation generally, you might improve the condition of things, but what I want to emphasize is, that we

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shall be building in this Colony for ourselves a house which will fall about our ears, if we go in for repressive legislation. I do not think that by regulation and repression alone such as the Contagious Diseases Act provides for, we are doing any good whatever.

954. You admit that there should be a different law here on account of the different character of the people?—I certainly think that the Health authorities have not sufficient power to deal with the coloured people: they should have more power, but I do object most strongly and strenuously to the Government doing anything in the nature of special regulation with regard to white people in connection with this disease. I think the testimony of all civilized countries is against it.

955. You said just now that a great deal might be done by instruction?—Yes.

956. As a matter of fact, do you know of any cases where these women have been taken care of by the Salvation Army: they have dealt with a good many cases, have they not?—Yes, a good many: they have rescue homes. I knew the late captain of the Salvation Army, and he did a great deal of that work.

957. Do they take these women under their care?—Yes.

958. Have the results been satisfactory hitherto?—I think there have been a few satisfactory cases.

959. Have the majority gone back and returned to their former life?—The testimony of the book I have referred to is that in all European countries, the life of a prostitute is about six years. That shows how they disappear.

960. In your experience the bulk of cases of this particular character of prostitutes has been hopeless?—Very hopeless.

961. Do you think education would have a beneficial effect. You spoke just now about educational influence?—The Salvation Army has not done much in that direction among the coloured people.

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962. Do they work among the coloured people?—
To some extent.

963. Has education hitherto had much effect on these women?—I think so. I may say that the French, German and Italian specialists are very emphatic on that point, and they are of opinion that unless the different countries are prepared to go in for a very extended system of education and raising the tone of the people and their knowledge of the effects of these diseases on their own life and the lives of those who come after them, they cannot hope to effect very much. I have some statistics here in that direction, which I think would be interesting. In the case of 1,000 prostitutes in regard to whom a doctor was able to secure detailed information—one of the French specialists—758 began to prostitute themselves before their 21st year, and 109 were prostitutes before their 16th year. Of course, the line of argument of these men is that they can only reach that condition of things by beginning at a very early age; the evil is done before the woman is 21 years of age, and they say that at that time practically she does not come under the regulations, and has consequently been disseminating disease up to her 21st year, and as I say, 758 were prostitutes out of 1,000 before they were 21. Then with regard to being able to reach these women, the sanitary service of Paris from 1872 to 1888 examined 45,577 registered prostitutes, and 47,340 clandestine prostitutes, that is, that the clandestine were more numerous than the others, and they were carrying on under non-regulated conditions. The number of prostitutes who attempted to escape from under control in Paris in 1898 was 6,018. Those who disappeared and were restored to control, 498, and, in 11 years, 5,609 prostitutes disappeared definitely; they wanted to escape from the hospital and live clandestinely. Then the writer says, "The external appearance of the disease is made to vanish, the disease remains.

Then the specialists say that the treatment of the doctors only to a very small extent protects the vicious man, that is, the disease does not come under the supervision of the doctors till the most infectious stage has been passed, and it is only one medical man in 100, in some instances none at all, who can certify that a woman is free from disease, and allow her to go forth. If that is the case, and that is the testimony of the compilers of this volume, why should the Government of this country outrage our feelings in connection with this thing? If you give authority to the doctors to deal with this disease as an ordinary disease the same as they deal with cholera or plague or any other disease which is working ravages in the community, by all means that is the duty of the Government, but what we object to is that Government should practically recognize vice and not only recognize vice but send these women out on the understanding that they are healthy. Somebody has said that you do not give these women a certificate, but those who employ these women in brothels give their clients the assurance that the women are under supervision and if the prostitute does not receive a certificate, at any rate it is known that she has been under examination. That does not give any security, however, as I know from a young man who went to one of these places and caught the disease, although the proprietress of the house showed him a fresh certificate. A French writer says in the book I have alluded to with regard to the treatment in Paris: "Prostitutes are *whitewashed*, not cured. This is pretty largely the case with gonorrhœa also. For the first two or three years the syphilitic may at any time transmit disease; gonorrhœa, if not completely cured, may be transmitted for an indefinite period. To cure the latter malady completely, several months of treatment may be required; it is still a disputed point whether or not there is not a large proportion of women

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infected with it who can never be cured at all." Another French doctor says, "that in most cases it may be cured if time enough be given, but it is merely an opinion, and it is admitted to be not yet proven." According to another great authority on this subject, Finger, "about 25 per cent. of all licensed prostitutes are in the highly contagious stage of latent syphilis. From this we may form our estimate as to the practicability of the asylum scheme. In our hypothetical system of regulation in New York, we should constantly have from 1,000 to 1,500 persons serving two and three year terms in a species of health reformatory." I have simply read this to show the Committee what a difficult thing it would be, if you go in for a radical reform in the direction of regulation, to get hold of any large proportion of those suffering from venereal disease, even among the acknowledged class of prostitutes, without touching those being treated privately, and that does not reach the men at all.

964. Are you of opinion that the Morality Act has lessened the number of prostitutes in Cape Town?—I think so, definitely.

965. Do you agree with the opinion that has been expressed that it has had the effect of driving prostitutes out of their ordinary dwellings to prosecute their calling in other places; in other words, that there is not really a less number of prostitutes, but that they go to other places where they are undetected?—That is altogether wrong.

966. Have they not taken to the mountain side, and the beach?—They were always there, long before the Morality Act was in operation; they were all around the place, and as far as that goes I rather think there has been an improvement.

967. *Chairman.*] We have it in evidence that this business is still going on on the mountain side by the coloured prostitutes. The matron of the Lock Hospital said that things were so bad that they had to go inside and close their doors?—My

own impression is that things have improved under the Morality Act, and especially in the case of the number of white prostitutes, which has much decreased. Of course, the population is less than formerly.

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968. *Mr. Anderson.*] Is it a fact, according to your observation and knowledge that the Morality Act has had the effect of purging the streets of women soliciting?—Yes, very much so.

969. *Mr. T. Searle.*] This Association, of which you are the president, has taken a good deal of trouble in investigating this matter, so that you speak with some amount authority?—Yes, it has received considerable attention.

970. You claim that you have a better opportunity of judging of these things than the officials of the law. At all events, your judgment is quite as good?—Yes, I think so. The head of the detective department might possibly know more, but we know almost everything connected with this traffic in the City so far as white women are concerned.

971. You are acting on moral lines and the other side on legal lines, consequently people are more ready to give information to your society than they would be to the agents of the law?—Naturally so. People have given evidence to us with regard to disorderly houses that caused annoyance, and we always took action in regard to that.

972. Your Association is of opinion that the Contagious Diseases Act should be repealed?—Certainly.

973. In that respect you are at one with the petitioners?—Yes, we are.

974. You hold that the Contagious Diseases Act is really legalizing to some extent the vice of prostitution?—Yes.

975. With regard to the certificates, I see the 19th section of the Act says that when a woman comes up for examination and the doctor finds that she is suffering from disease he is to give her a

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duplicate of the certificate which he signs; you know that?—Yes.

976. So that the idea that certificates are given them when they are not suffering from disease would arise from that?—I suspect so.

977. They have to get a certificate if they are suffering from disease, but the Act does not say they are to get one if they are not suffering?—Just so.

978. Another clause of the Act says that it shall be illegal to detain these women for more than six months, even if they are not cured. Consequently at the end of six months, although a patient in the hospital may be a source of danger to society, there is no power to detain her longer?—That is so.

979. So that even at the best the law is faulty from its own point of view?—Yes.

980. You hold with the petitioners that it is the duty of the State to deal with syphilis as it does with other diseases?—Certainly.

981. That is, not to pick out a certain section of the people and apply the law to them, but to anybody who is suffering from disease?—That is our view.

982. Just the same as a doctor under the law now has to give notice to the local authorities whenever he discovers consumption or leprosy or any of those diseases, so he ought also to notify the local authorities when he comes across a case of syphilis?—We think if there is to be effective treatment of the disease from a medical standpoint something of that sort must be done, we see no other way out of it.

983. You are aware that the State segregates lepers?—Yes.

984. No matter at what cost, they are taken away from their home and families and segregated?—Yes.

985. And syphilis is a more dangerous and infectious a disease than leprosy, is it not?—Yes.

986. So I suppose your Association would hold that it is not a logical way of treating a more dangerous disease than leprosy by a measure such as the Contagious Diseases Act?—No. We think it is merely scratching the surface, even from the lowest physical standpoint, to deal with the disease as it is being dealt with.

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987. We have had the opinion expressed that innocent people are just as likely to be infected through members of their families?—It is very difficult in a case of this sort to generalise, but I was shocked the other evening to be told by a doctor in this City, that he has lately treated boys under 17, lately attending one of our public schools, for syphilis; that will indicate the danger in that direction.

988. You would not be in favour, would you, of making a law that all domestic servants should be periodically examined for syphilis?—One country goes so far as to order that all persons should be examined before marriage.

989. Do you think that this argument, that prostitutes go into domestic service, is any argument for the Contagious Diseases Act?—No.

990. *Mr. Wood.*] The suppression of the Contagious Diseases Act will not remove prostitution, will it; it will still go on?—Yes.

991. You are perfectly clear in your own mind as to that?—Yes.

992. And you are perfectly clear in your own mind, that syphilis, which is the result of prostitution, is a danger to every individual in the place?—Certainly.

993. If you, as a father, are not able to guard your own home, how are we going to guard the State, as long as you have the chance of prostitutes being in your house, or those who are carrying on this trade?—The State, as I say, is bound to take action, but the question at issue is what action is to be effective. I do not see, for my own part, how the State is going to prevent the servant who has

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the disease, and who is not a prostitute, from coming into my house. I am prepared to support legislation to that effect where it does not recognize prostitution. What we are opposed to is, the State recognition of prostitution.

994. It has been said that the Morality Act drove the prostitutes from the streets and solicitation was thus removed from those who might easily be led into temptation?—That is so.

995. But, on the other hand, we hear that though the Morality Act had that effect it did not suppress the same business as carried on under cover?—Not to the same extent; we hold that the condition of things has improved, and I have had many opportunities of knowing what the actual conditions are.

996. We learn that, so far as white women are concerned, there are fewer of them, because the conditions of the country are different. During the war there was a great deal of money in circulation; that money has gone, and those who were paid at a high price have gone also to other fields; but you have the lower class of women, the women of the country, who are as much in this business to-day, if not more so, as ever, and they have not many of them the knowledge as to what the result is, consequently, the disease is being disseminated in a much more rampant way. This Select Committee, dealing with these petitions, is anxious, as far as possible, to assist in suppressing this danger. What are we to do?—My reply to that is, that the testimony of every country in the world to-day is, that the position from that standpoint is an insoluble one, and specialists, like Fournier, Blashko, and others, who have made a life-long study of the matter, declare that the only hope is in the direction of education and an improvement in the moral tone of the community and also an increase in the peoples' knowledge of the effect of this vice and the relations which subsist, and must subsist, between moral wrong and disease. My contention, from the whole of my reading on this subject is,

that you are going to build a house which is really a house of false hopes, if we go in for a system of repression and regulation on the lines of the Contagious Diseases Act, without some remedy of another kind. I am opposed to it on other grounds, but the thing is not going to be solved in that direction.

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997. If the State gives a licence, so to speak, then it is perpetuating the evil, but there should be something in the way of education to point out to young people the results of this vice, should there not, for we are told, according to medical testimony, that it may take two years for a woman to be made perfectly clean?—She may be diseased the day she goes out of the hospital, and take up the same business, and communicate the disease.

998. Do you think the suppression of the Contagious Diseases Act would meet the present conditions that this country is unfortunately suffering under?—Certainly not.

999. Then you must adopt some other measure. The Morality Act drove a lot of these women away, but it has not destroyed the evil: it has broken out in another way, more among the coloured class, and we ask, what is to be done?—I do not know. Only the other day, I was asking one of the great authorities on disease in the Colony, and he had no hope whatever from any system of regulation, and he was opposed to the Contagious Diseases Act.

1000. *Mr. Hellier.*] Did he make any suggestion?—No, he would not; he agreed with me that the position was insoluble. Apparently we must wait on the action of the State in promoting better education and better morals.

1001. *Mr. Wood.*] If I have some disease in my house, I am isolated, and measures are taken to stamp it out, but in this case, you may get a servant in your family who is diseased?—Are you, I would ask, prepared to put all servants in a class by themselves to be examined?

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1002. No. There ought to be a classification. A man servant is supposed to bring a character, but if girls in Cape Town are simply taken into service without any due precaution, you are giving them a home, it may be for a month or two, and they are brought into contact with the family, and there is nothing to protect you. Children and others may be infected, and the results are terrible to think of. Is not that so?—Yes.

1003. *Dr. de Jager.*] Do you think that any improvement is due to a diminution in the number of prostitutes, or is it due to the diminution of prostitution as a whole?—The one has gone with the other. I think there has been a concurrence of both; the number of prostitutes has diminished, and the amount of prostitution also has diminished.

1004. You spoke of educating the people; do you really think we should accomplish our object of eliminating prostitution by that means?—So far as I have been able to study the experience of other countries, the only hope is in that direction. There is no doubt about it from the statements in the two Congresses, held in Brussels, in 1900, and 1904, where there were between 300 and 400 specialists, sociologists, and medical men. Their testimony, with the exception of a few, was, that whilst they could confer and discuss the matter, they could not recommend. Three resolutions were submitted, I think, at the 1904 Congress, one of them advising voluntary hospital treatment, another advised the retention of regulation and examination, and so on, and then there was a third alternative. These recommendations were put down for signature, and out of 350 who attended, only 50 put their names down for the first, and less than 50 for the other two; that is, that in a Congress called of all international scientists, they could not come to any definite conclusion whatever; the only thing agreed on was this system of education and improving the moral tone of the people, and specially giving definite instruction to men.

1005. You admit, I suppose, that the best educated people in the world, and the most civilized people, are the biggest prostitutes?—Yes; but men like Fournier, Finger and Boschko know these facts.

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1006. Take this country, even the Kafirs are more moral than the educated whites in many cases?—I do not agree with that. The testimony of men like Dr. Stewart, of Lovedale, is opposed to that view, and he knew both white and black.

1007. I understand from your evidence that you are in favour of the Morality Act?—Yes.

1008. Would you think it necessary, suppose you tried to put down this vice by the Morality Act, to have some measure by which you can deal with these diseased prostitutes?—I would say that there should be access to dispensaries and hospitals, and, if necessary, the Government should arrange to have these dispensaries not under the Contagious Diseases Act, but syphilis should be notified the same as any other infectious disease.

1009. You admit the advisability of putting down prostitution, do you not?—Certainly.

1010. Would you admit the advisability of putting down diseases due to prostitution?—Certainly.

1011. And you think it advisable that, in view of the infectiousness of these diseases, the earlier you get the women under treatment the better?—Certainly, and I say you would secure that better by making provision for voluntary treatment of the disease, in the same manner as you treat other infectious diseases.

1012. Do you know that the Morality Act has been very little enforced lately?—It has been so far as the streets are concerned; two aspects of the Act have been stringently enforced here, keeping the streets clear of these women and preventing pimps.

1013. You think that is a great advantage gained?—Yes, a tremendous advantage, and that

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is acknowledged by all the authorities I have consulted; they all say that the public appearance of this evil has a very bad effect on the moral tone of the community.

1014. You would recognize that you could not have the same rules with regard to notification of syphilis by a private medical practitioner as you could with regard to cases of small-pox, scarlet fever and typhoid; there is generally an amount of personal blame attached, is there not?—I think it would be a good thing if medical practitioners were to notify to the authorities, and make it a punishable offence if it were not so notified, in order that the authorities might know the actual condition with regard to this thing, for it is a very terrible evil.

1015. When the authorities have been notified, what would you do then. You say that the medical man should notify to the Health authorities that he has a case of syphilis, without disclosing the name of the individual; that could not be done. I do not think public opinion would ever be in favour of that. What would be your object in notifying a case if the individual was not located?—The Health authorities would know the conditions existing with regard to venereal disease in the community.

1016. With what object, if you do not give power to deal with the disease?—The man is under treatment. I think it ought to be notified, as is the case with other infectious diseases.

1017. In the case of other infectious diseases, steps are taken to put up hospitals in small villages, they disinfect, and so on?—I would advise giving special facilities to the lower classes for treatment.

1018. If I have a case of syphilis, why should I go and notify the public authorities?—Because it is a dangerous disease.

1019. But what is the use if I am not to divulge the name of the patient, and thus enable the

authorities to deal with him?—You notify with regard to consumption, but yet you do not treat the man.

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1020. You do not take the patient out of the doctor's hands at all. The object is not to step in and treat the man, but to ascertain the general condition of health in the country. You get statistics as to the prevalence of disease. What I want to make clear is, that in the case of small-pox, diphtheria, scarlet fever or measles, we notify these cases to the local authorities, because they have to deal with them. It is very often necessary, in cases of small-pox or other infectious diseases, to order the closing of schools, the disinfection of houses and so on, and that is done really to enable the State to step in and take the matter in hand; but here, as far as I can understand, you wish to get information, but not as far as regards treatment?—If you want my own personal feeling in the matter, I would be in favour of cases of syphilis being directly reported. I can see that there would be a great outcry made if such a thing were enacted. It is simply because of the state of public opinion, but knowing, as I do, the terrible effects of syphilis and its consequences, I would spare no effort to stamp it out.

1021. There is one other point, with regard to educating the people. Some years ago there was the same sort of proposal in France, but it seems that the education lay in teaching the knowledge of antiseptics, and how to prostitute without becoming diseased. I do not suppose you advocate that?—No, not at all. I mean raising the moral tone of the people, and pointing out the disastrous effects of a disease of this character.

1022. *Mr. T. Searle.*] You do not refer to secular, but to moral education?—Yes; raising the moral tone of the people, and also giving special information as to the nature of the disease and its physical consequences to individuals and to those who come after.

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1023. *Chairman.*] You are in favour of medical men being compelled to report cases of syphilis to the local authorities, whether the Municipality or the Divisional Council, the same as other contagious diseases are reported, say every week or so?—Yes; that is my view.

1024. *Dr. de Jager.*] Syphilis and gonorrhœa do not come under the Public Health Act, do they?—No.

1025. *Chairman.*] You have travelled about a good deal among the country towns; are you aware that the Government had hospitals for syphilitics?—I did not know that there were hospitals for the treatment of syphilis. I think it is a very good thing.

1026. Do you know that the Government have closed all those places?—Why have they done that?

1027. That is the thing. With regard to the raising of the age of consent, mentioned in the petitions referred to us, have you given that matter any consideration?—In thinking over the subject, and observing the conditions of this country, I think it is very desirable to raise the age of consent. The whole tendency on the part of specialists is to raise the age of consent all round, because it is said that the ranks of prostitutes are very largely recruited by those under age, and the younger they are, these specialists say, the more dangerous they become, so that from the very lowest standpoint it becomes a very serious thing in a country where vice is prevalent to permit the young to be exposed to temptation from vicious men till they are pretty well grown.

1028. Do you know what the present age of consent is?—14.

1029. No; it is 13!—Our opinion, according to the resolution, is that it should be raised to 16.

1030. Would you agree to the age being 16?—Yes, I think that girls should be protected up to that age.

1031. *Dr. de Jager.*] Would you be agreeable to take the age of 15, below 15 calling it rape and below 16 assault. Would you discriminate in that way. The punishment for rape and assault is different, as you are aware?—I think it would be better to make it 16 all round.

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1032. But there are two sets of punishment?—I suppose the judge would exercise his discretion in awarding the punishment.

1033. The judge is circumscribed according to the charge that is laid. The policeman lays the charge for assault or rape, and the judge has no option. If you give one age for assault and one age for rape, you may stretch it still further than 16?—I would not object to that arrangement.

Monday, 30th July, 1906.

PRESENT :

Mr. THERON (Chairman).

Mr. Hellier.

Dr. de Jager.

Mr. T. Searle.

Mr. Wood.

Mr. Anderson.

Lieut.-Col. Heffernan, R.A.M.C., examined.

1034. *Chairman.*] I believe you are Medical Officer in charge of the Military Hospital at Wynberg?—Yes.

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1035. Do you know the object of this Committee?—Yes. I suppose the object of the inquiry is to reduce the prevalence of venereal disease.

1036. We have had certain petitions before us on the subject relating, firstly, to the repeal of the first part of the Contagious Diseases Act of 1885, and secondly, to the raising of the age of consent. Those are the two subjects in the petitions. Are you acquainted with our Contagious Diseases Act here?—No, I am not. I have never seen it.

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1037. The first part of the Act is to compel prostitutes to submit to examination, and there are certain persons who feel that this is a disgrace to womanhood, and therefore they pray that this first part of the Act may be repealed. What is your opinion about that?—There are so many points of view to look at it from. No doubt there are many abuses that arise; but, of course, the health point of view is the only one that appeals to medical men.

1038. What is the present condition of the men under your supervision?—I have brought with me some statistics which will speak for themselves. This statement refers to the year 1905 and half of 1906. [*Document handed in.*] I may say that the admissions to hospital for syphilis include the whole garrison of the Cape Peninsula; it is not limited to Cape Town alone, but relates to Simon's Town and Wynberg as well. The statistics are all combined as one garrison. The sick men are sent to Wynberg, and there is only one military hospital.

1039. How many troops have you?—The number is given in the return I have put in. You will see from that, that venereal disease is divided into three classes, syphilis, which is a constitutional disease, gonorrhoea, and soft chancre. There is one point I might explain, and that is, that the garrison, at least the infantry part of it, is continually shifting; for instance, a company may be at Wynberg one month and at Maitland the next, for musketry practice, so that the statistics can hardly be regarded as hard and fast. As far as I can judge, the proportion of cases rather favours Cape Town, because a large proportion of the cases of venereal disease are contracted in Cape Town so far as I can gather. With regard to syphilis, it is a chronic disease, at least, many of the cases are, and they may have been acquired years ago; perhaps some of them were acquired in India, but the men have been re-admitted after coming here. The disease of course may reassert itself, for which it

is necessary to admit them to hospital. All these cases of syphilis are not necessarily contracted here, but we have to get them down in our statistics.

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1040. *Dr. de Jager.*] With reference to the first part of the Act, the control of venereal disease, do you think it is an advantage that there should be a law regulating or trying to mitigate venereal disease among prostitutes?—From a health standpoint, I say that an improvement would result from it: but there is not any chance of stamping it out, because experience shows that probably for one licensed prostitute you would have three or four unlicensed prostitutes, or perhaps more. It is only a mitigation at the best.

1041. As a military medical officer, would you prefer to be in a community where the Contagious Diseases Act existed, or would you prefer to have no Contagious Diseases Act?—From a military point of view, I should be in favour of the Contagious Diseases Act, because of the improvement which it occasions, as shown in the statistics. I have here a copy of the report of the Advisory Board for Army Medical Services, relative to the treatment of venereal disease in the Army, and, in alluding to South Africa and St. Helena, it says: "A Contagious Diseases Act was passed for Cape Colony in 1888; this was followed by a considerable diminution in the incidence of venereal disease. The actual figures are shown in table form on page 77." From these figures it seems that for South Africa and St. Helena the percentage of venereal for 1888 was 38.57; 1889, 31.20; 1890, 26.00; 1891, 22.97; 1892, 25.52; 1893, 28.05; 1894, 31.59; 1895, 30.49; 1896, 25.12; 1897, 24.01; 1898, 15.59. I may say that the report I am alluding to refers to the Indian cantonment hospitals, but those regulations would hardly apply to a large community like Cape Town. An Indian cantonment is essentially a military location. This report says with reference to cantonment

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hospitals: "Female lock hospitals existed in most Indian stations from about 1865 to 1888, when they were closed as the result of a resolution of the House of Commons. Owing to the great increase in venereal disease in the British army in India, which followed this (all venereal admission rate for 1895 was 522.3 per 1,000) a departmental committee was appointed to consider the question. After a great deal of correspondence between the S. of S., India and the Government of India, the Cantonment Act, 1897, was introduced. The main features of the Act are:

- (a) Establishment of cantonment general hospitals for the reception of cases of contagious disease, as well as for other diseases.
- (b) Power to compulsory examine and detain those suspected of suffering from such diseases.
- (c) Power to exclude any persons from cantonments who do not comply with the provisions of the Act.
- (d) Power to remove brothels and prostitutes.
- (e) Exclusion of brothels and prostitutes from regimental bazaars.
- (f) Prohibition of loitering and importuning, registration, compulsory examination otherwise than under (b) and jurisdiction outside cantonment limits, are not provided for.

Since the introduction of this Act at the end of 1897 there has been a steady decrease in all forms of venereal disease, especially in primary syphilis (see Chart II and table on page 82). A.M.D. reports for 1901, mention the following causes for this decrease in the number of venereal admissions:—

- (1) Increased age of the soldier and longer residence in the country (during the years 1899, 1900, 1901).

- (2) Successful working of the cantonment hospitals, and the rigid enforcement of the powers conferred by the Cantonment Act as regards the method of dealing with persons known to be suffering from contagious diseases. There is unfortunately a large class of prostitutes who ply their trade just outside cantonment limits during the day and loiter about after dark. They are well aware of the scope of the Act, and take good care to keep just beyond its reach.
- (3) The interest taken in the matter by regimental and other officers.
- (4) The provision of means of ablution in barracks, and the encouragement of their use.
- (5) Lectures on temperance and continence by chaplains, medical and regimental officers.
- (6) Placing dangerous localities out of bounds.
- (7) The prolonged treatment of cases of syphilis out of hospital.
- (8) The fostering of games and athletic sports among the men.
- (9) The provision of concerts and other amusements in the evenings to keep the men out of the bazaars.
- (10) Decrease in the number of women, who had been reduced to destitution by famine, and who in consequence adopted prostitution to obtain the means of existence.
- (11) The bad health of the men owing to malarial fevers.
- (12) The imposing of some disciplinary restrictions on men with a large number of admissions for venereal diseases.
- (13) Placing the bazaars out of bounds for lengthened periods, owing to the prevalence of plague.

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1042. Do you think the station here in so far as regards venereal disease, compares favourably or otherwise with other military stations; how does it compare, for instance, with Malta, Gibraltar or India?—I should say that it compares favourably with India. Still, venereal disease is fairly prevalent here, and I suppose it is nearly on all fours with the proportion throughout the whole army, but I do not know exactly the figures. I speak approximately. It is under, if anything.

1043. Do the soldiers contract the disease from the European prostitutes as a rule or from the coloured prostitutes? Mostly from the coloured. There is one point I might mention and that is, that we have tried to find out and localise the women by whom the disease has been communicated, but the men, either from sentiment or some other reason, will not give any information leading up to the offender, although they say they know the woman. If they are sent out under escort and identify the woman, we never succeed in tracing her and getting hold of her. They say it was dark, or they will not recognize the woman, and they do not know where she lives, or something of that kind, and so the woman eludes detection.

1044. I understand from what you say that you would be only too glad if you could lay your hands on the diseased woman and get her treated?—Yes, that is what we always try for.

1045. You think if you could do that, you would considerably minimize the spread of syphilis and venereal disease generally?—Yes. It would be one of the means of doing so, but in a big community it would be only a step towards that end.

1046. Of course any diseased soldier, whether suffering from syphilis, soft chancre, or gonorrhœa, is taken into hospital and treated till he is well?—Yes. That would hardly apply to syphilis, as that is a chronic disease; you cannot say for a considerable time whether a man is well. We

give out-door treatment, and administer periodical injections of mercury.

1047. Do you place such restrictions on the movements of these men as would limit the spread of the disease by their means, while they have any active signs of the disease?—We take them into hospital, but during that period they are under no limitations.

1048. If a man has left the hospital and is being treated as an out-door patient, he can roam about and infect women, can he not?—Yes: he is not under any limitations when once he is discharged, but if he has any open sores or broken surfaces, he is not allowed out of the hospital.

1049. As long as you consider him to be a source of danger and likely to spread the disease, you keep him under strict surveillance?—Yes, he is under surveillance about two years, while he is suffering from syphilis. When he goes from station to station a record of his case accompanies him.

1050. So that if a man has been in Cape Town under treatment, and his regiment is shifted to Simon's Town, he would still be under surveillance?—Yes. If he was in Bombay under treatment, we would have a record of his case and the treatment he was subjected to, and other particulars. For Cape Town, Simon's Town, and all the stations in the Peninsula, there is only one military hospital. There is no military hospital at Cape Town, only at Wynberg.

1051. I suppose you have all these regulations, both with the view of curing your soldiers and keeping them healthy as well as with the view of preventing the spread of the disease. If you allowed one man to roam about with these women, he might infect some of his comrades by this means?—Yes.

1052. *Mr. Wood.*] Are those men who are diseased privileged to associate with the other men in the ordinary way?—The men who are suffering from

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disease are admitted to the hospital and they remain there absolutely and are completely separated.

1053. Have you known cases where the disease has been carried from one man to another innocently?—No. I do not think we can trace it directly from one man to another, and as a rule we are rather sceptical about believing the disease has been contracted in that way. The men are inclined not to acknowledge how they got the disease. For instance, they give silly excuses, and say they have strained themselves and that sort of thing, but one does not believe them.

1054. In your statistical return would one man appear many times—I mean the same man?—I do not suppose the same man would appear more than about twice for the same disease. For syphilis, it is quite possible there might be two or three re-admissions in the case of the same man, but it depends on the gravity of the disease.

1055. So that you might have a company charged with having so many men having contracted syphilis, and yet if you came to investigate the matter there might be a very small number, taking repeating cases into account. Is not that possible?—Yes; re-admission for the same disease applies to syphilis much more than to any of the other venereal diseases. It is quite possible in the case of gonorrhœa that a man may to all intents and purposes be cured, and then he goes out on the spree, and the disease may re-appear.

1056. During the time that a man is suffering, is he off ordinary duty?—Yes; he is in hospital, under treatment.

1057. Are you of opinion that the largest amount of mischief done is through the lowest class of the coloured women?—Yes.

1058. Because you cannot get hold of them?—Yes, we never can trace them, whether coloured or otherwise. If we could recognize these women, of course, we would report them to the civil authorities, so that action could be taken by them.

1059. *Mr. T. Searle.*] Have you many cases of innocent infection amongst soldiers, men taking it one from the other innocently?—No. I do not think so.

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1060. You say you only keep the men in hospital while they have open sores?—Yes. That applies to syphilis.

1061. Is it possible to tell whether they are cured after that or not?—One can only tell approximately; the treatment is maintained, and they are kept under treatment and under surveillance up to two years, although there are no manifestations.

1062. After that you allow them to go about?—They are then struck off the sick list register, once they are discharged from hospital and they perform their duties.

1063. They can go about and still infect other people, can they not?—Yes, it is quite possible.

1064. *Dr. de Jager.*] Your object is not to let them go out till they are unable to infect others?—The power of conveying the infection is a difficult thing to decide on; it may be done after all manifestations of the disease have gone. We do not let them go out as long as they have any active manifestations of the disease.

1065. *Mr. T. Searle.*] Still, in many cases they may still have the disease and infect other people, may they not?—It is quite possible.

1066. In the case of India, the regulations which you referred to seem to apply promiscuously to everybody who is suffering from syphilis, men and women?—They apply to the location where the troops are, what they call a cantonment, that is a place under military and not civil control. They only apply to the troops.

1067. These regulations apply inside the cantonments limits?—Yes.

1068. And they apply equally to men and women?—Yes.

1069. You do not make any distinction between prostitutes and other women?—No.

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1070. (*Chairman.*) Are there women inside the cantonments?—There may be a number of clandestine women inside who live in out-houses, and they may infect the troops.

1071. *Mr. T. Searle.* If there are no women there the inspection would apply only to men?—There are women.

1072. The regulation you read spoke of the inspection of all persons suspected to be suffering from syphilis; if there are no women, inspection would apply only to men. would it not?—There are women.

1073. Then it applies equally to men and women?—Yes.

1074. Inspection is not confined to prostitutes, but to anybody supposed to be suffering from syphilis; it would apply equally all round to everybody inside the cantonment?—Yes.

1075. I suppose that you know that they have no Contagious Diseases Act in England?—Yes.

1076. We have it in evidence that after the repeal of the Contagious Diseases Act, although for the first two years there was an increase in syphilis, as a matter of fact, now there is considerably less than when the Act was in force?—Yes.

1077. So that since the Act was repealed there has, as a matter of fact been a considerable decrease of syphilis in England; we have that on evidence?—Yes.

1078. Can you tell us whether as compared with England there is more syphilis among the troops here than there?—I am afraid I cannot; I should say approximately about the same. Then again we have no absolute criterion as to what amount of syphilis has been contracted here; a large amount of the syphilis here at present has been contracted in India.

1079. With regard to the figures you quoted from St. Helena, I suppose, to some extent, just as is the case with regard to drunkenness, there is some improvement in the moral tone of the troops with

regard to this vice, compared with a good many years ago?—If there is an improvement it is not very pronounced.

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1080. In England syphilis has decreased generally has it not, not only among the troops but among the whole population, and that has been put down to the fact that there has been greater enlightenment on the subject, and moral agencies and so on have had an effect, so that even in St. Helena any diminution of the disease may not be the direct result of the application of the Contagious Diseases Act?—I cannot say.

1081. Is the decrease in cases of syphilis in St. Helena directly attributable to the passing of the Contagious Diseases Act?—I am not in a position to say.

1082. You say you are not prepared to discuss the moral aspect of the case at all?—No, I recognize the fact that the Act is open to many abuses.

1083. Do not you think that by compelling the examination of prostitutes, to some extent, people get the idea that the State is protecting them in vice?—I cannot say what ideas people get on the subject; no doubt it inspires many people with far more confidence than it deserves and a false confidence may be created by it.

1084. People might get the idea that owing to this Act being enforced there is no danger?—I think that can only be looked on in the light of a mitigation.

1085. You, of course, admit that the Act really only deals with a very small proportion of the prostitutes where it is in force?—I think that it is the generally accepted idea that there is a larger number of clandestine prostitutes than there are what you call recognized prostitutes.

1086. Do you think with regard to the Contagious Diseases Act, although to some extent it may mitigate the disease, the benefits derived from it in that respect are sufficient to override the objections which everybody must feel to the Act

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from a moral point of view?—That is a question I can hardly take the responsibility of answering.

1087. Do you not think there are other ways, apart from this practical recognition of prostitutes, of dealing with the matter and preventing the spreading of disease; could not the State take some other means than practically recognizing and legalizing the vice?—I cannot answer that. I do not know what the State can do.

1088. *Chairman.*] Suppose there were lectures given on temperance and continence, and so on, and other moral agencies brought to bear, would not that be better than a stringent Act?—I cannot say. I think that is a point that can only be judged by results.

1089. *Mr. T. Searle.*] Suppose hospitals were established where people could go voluntarily and be treated, and those suffering from syphilis could be isolated?—You might have a sort of Infectious Diseases Act, with compulsory notification.

1090. The great complaint with the petitioners who are petitioning Parliament is, that by continuing the Contagious Diseases Act, the State is to some extent practically recognizing and legalizing vice; and that that is not the proper way to deal with the disease, since by this means you encourage innocent people, and give them a false security with regard to the thing?—That is a point, no doubt.

1091. If they knew that there was no such recognition, they might be afraid?—Quite so.

1092. And they also say that it is putting an indignity upon the female section which does not apply to the male section, who, it is held, are just as great sinners as the others?—Yes, certainly.

1093. Is that so?—To some extent.

1094. There is a good deal in that, is there not?—Yes. There is no reason why males should not be isolated in some way if they are suspected.

1095. *Mr. Anderson.*] From a military point of view, what was the result of the repeal of the Con-

tagious Diseases Act in England?—I think the Contagious Diseases Act applied only to particular stations: I do not think it was universal in the various garrisons in England. I am not quite sure. It may be in force in the garrison towns.

1096. Is it within your knowledge that the Contagious Diseases Act does extend to the English garrisons: is that so?—I think it does extend to them.

1097. What is the result since the repeal of the Act as regards the health of the garrisons in England?—I have not any statistics to refer to.

1098. You do not of your own knowledge appear to know?—No. I would have to refer to the Army Medical reports.

1099. Do you know the opinion held by the Military authorities generally?—I think the opinion leans in favour of the Contagious Diseases Act being in force, from the point of view of a reduction in the prevalence of the disease.

1100. I understand from what you say that the repeal of the Contagious Diseases Act in India was followed by an Act called the "Cantonment Act"? Yes.

1101. Is that in its character anything like the Contagious Diseases Act?—It is practically bringing it in force in Military areas; that is the effect of it.

1102. Was there a period of time between the repeal of the Act in India and the enforcement of the Cantonment Act?—Yes.

1103. What was the result during that period?—A big increase.

1104. The object of this Committee, as you know, is to inquire into the matter as to whether it would be desirable or not to repeal the Contagious Diseases Act here: from a Military point of view, would it be wise or unwise to repeal it?—From a Military point of view it would be unwise.

1105. Are you aware that there are two Acts at present in force here?—I do not know anything about that.

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1106. Do you think it is incumbent on the State to make provision for laws against the spread of such a thing as this particular disease?—I should think it is incumbent on the State to take steps against the spread of any disease if they can.

1107. I gather from your evidence that you consider that soldiers run far greater risks here than say in England, because the character of the coloured prostitutes is so much worse in point of unhealthiness than it is in England?—I do not think I made that statement.

1108. We have it in evidence that really the greater danger lies in the character of our local coloured people here who engage in prostitution; do you consider it is a greater danger, and that the disease is more virulent among that class?—I think that is the generally accepted idea. I cannot say from personal observation.

1109. *Chairman.*] With regard to the statistics you referred to, I understand you to say that we must not consider the disease as having been all contracted here?—The disease is divided into three classes, syphilis, soft chancre, and gonorrhœa; you must take the syphilis part as not necessarily contracted here.

1110. It may have been brought here from other stations?—Yes. There is also a certain amount contracted here that has gone to other stations, so that the two may almost neutralize each other.

1111. *Mr. Hellier.*] Considering the clandestine prostitution that exists, and the possibility of men communicating the disease, do you consider the Contagious Diseases Act more than a mitigation of the evil?—No, we can only regard it as a mitigation.

1112. *Mr. Wood.*] If the present supervision which is given to the military and to sailors were in any measure abated what would be the result; all these men are daily under supervision, are they not?—No, they attend say once a week—the men who have been discharged from hospital.

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1113. Civil life is free as compared with military life, and men who are suffering from venereal disease may be wandering about and not brought to the doctor or under any supervision; it rests with the individual himself; but it is not so with a sailor or a soldier; they are under control, and consequently as soon as you put your hand on a man he receives treatment. It is not so with a civilian, is it?—No. A soldier is liable to be punished if he does not report when he contracts syphilis or any other venereal disease.

1114. Whether the Contagious Diseases Act is repealed or not, you still have your hand upon a body of men?—Yes.

1115. And thereby you prevent or mitigate the spread of the disease, but it is not so with civilians, is it?—No.

1116. If a civilian were under the same care and supervision as a soldier, then we might have less disease, might we not?—I do not know that you can come to that conclusion. There must be a great number of cases in civil life of which there is no record or register.

1117. And the disease may be widespread?—Yes, but you may not have any record of it.

1118. We can take your statistics because we know them to be a record of so many men, by which we can be guided: you only deal with military men?—Yes.

1119. You know nothing about civilian life?—No.

1120. *Chairman.*] With regard to raising the age of consent. At present the age is 13, and the petitioners want it to be raised. What is your opinion about that?—It seems very low.

1121. Do you think it ought to be raised?—I think so.

1122. What do you suggest as the limit?—That is a question that requires thinking about. In India the age was 15, as well as I can remember.

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1123. If it were raised to 16, do not you think that would be a fair age, looking at the condition of the girls in this country?—I do not like to give an opinion off-hand on such a question; it requires consideration. I should not like to say unless I thought out all the bearings of the question.

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Wednesday, 1st August, 1906.
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PRESENT :

Mr. THERON (Chairman).

Mr. Hellier.

Mr. T. Searle.

Mr. Wood.

Dr. Hewat.

Mr. Anderson.

Dr. Robert Forsyth, M.B., examined.

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R. Forsyth,
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1124. *Chairman.*] You are a medical practitioner in Cape Town?—Yes.

1125. Do you hold any public office?—No. I am a member of the Town Council and a member of the Health Committee.

1126. We have asked you to attend here this morning to give us your opinion with regard to the operation of the Contagious Diseases Act. A number of petitions have been presented to the Committee, and they contain two prominent requests, the first relates to the repeal of the first part of the Contagious Diseases Act and the second to the raising of the age of consent. These petitions have been presented to the House and signed by a number of ladies. Have you paid any particular attention to the working of the first part of the Contagious Diseases Act?—Yes; so far as the prevalence of syphilis is concerned and other venereal diseases.

1127. You know there are two Acts really in operation?—Yes.

1128. The other Act is the Morality Act?—Yes.

1129. Have you paid particular attention to the question whether venereal disease has diminished since the introduction of the Morality Act?—Yes, it has unquestionably, but one might qualify that by stating that all diseases, so far as doctors are concerned, have diminished, because since that time there has been tremendous depression in everything, and those people who are accustomed to consult a doctor for ordinary diseases, now go to a chemist or they are treated by their friends; but there is no question, as far as medical practitioners are concerned, that the amount of venereal disease is considerably less than formerly.

1130. Since the Morality Act was put in force, has the number of prostitutes soliciting in the streets diminished?—Yes, certainly. You scarcely see them at all now. You may occasionally see a prostitute standing on the stoep at night, but very little more. Some years ago, when I came here first, cabmen used to distribute cards. When a gentleman got into a cab, it was the custom to hand him a card with the address of these women.

1131. Do you think, in consequence of the Morality Act, that prostitution is less in Cape Town?—Very much less.

1132. Why do you say that?—First of all, three or four years ago the number of brothels in the various streets was dreadful. If you went down Loop Street, Bree Street, and other streets you could see numbers of brothels in those localities, but now these places are very much fewer, and they are not openly advertised. At night you can generally tell them by seeing cabs driving up and so on.

1133. Is the diminution in your opinion owing to offenders under the Morality Act having been punished, or has the moral condition of the people improved?—No doubt, to some extent it is due to these people having been punished, but it is also due to the fact that people cannot so well afford this kind of thing.

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1134. With reference to the brothels, you can, of course, trace them, but how about those prostitutes who ply their trade in the open?—It would be difficult to say whether in that respect the evil has diminished, but the number of prostitutes generally is not so great as it was before. I am frequently in the course of my practice called out at night, and whereas one was formerly frequently accosted by these women, I am now never hardly accosted; and we all know that ordinary men who are not particularly morally inclined will frequently yield to solicitation if they are accosted pretty often. It is just the same with drink, a large number of public-houses will undoubtedly conduce to drunkenness, and the fact of there being so many prostitutes leads to immorality.

1135. We have it in evidence that immorality is carried on just the same as before, but these women now take to the open, because they know they are traced when they assemble in brothels, and the police watch them?—Of course, it is very difficult to say, but my opinion is that there is not nearly so much prostitution now as formerly: whether men seek other outlets for their vice, I cannot say, but I consider the amount of prostitution is considerably less than it was before the Morality Act.

1136. Would you be in favour of the repeal of the first part of the Contagious Diseases Act?—The first part should be repealed: it is an anomaly to find both Acts in the Statute Book. I may say that the Town Council would not do so, but we *can* do it. tion: one of our Bye-laws, No. 224, gives us power to stop brothels and prostitution. If the Act were repealed to-morrow, we can put the Municipal Regulations in force, though the probabilities are the Town Council would not do so, but we *can* do it.

1137. Has it ever been brought to your notice that a good many of these lower class coloured prostitutes take to domestic service in families?—No; they may go out charing, but I do not think they are in permanent service.

1138. You are not aware of that?—No. I believe they go out charing, doing a day's work occasionally, but they do not go into ordinary domestic service.

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1139. As far as venereal disease is concerned, is there a diminution or an increase to your knowledge as a medical practitioner?—My experience is that there is a great decrease.

1140. *Mr. Anderson.*] You are a medical practitioner in Cape Town?—Yes, general medical practice.

1141. You said just now that there are very few brothels in Cape Town at present?—Comparatively very few.

1142. And you attribute that to the working of the Morality Act?—Unquestionably.

1143. Is it within your knowledge that the bulk of the brothels that were in existence before the Morality Act came into force were occupied principally by coloured prostitutes?—No; chiefly by white prostitutes, very seldom by coloured.

1144. You say that brothels are very seldom occupied by coloured prostitutes?—Very seldom.

1145. Then some brothels must remain?—There are a few.

1146. Are they occupied by coloured or white women?—White, those that I could put my finger on.

1147. Coloured prostitutes do not make use of brothels at all?—I have been told they do not do so very much. I think I have heard of one only, but that is now closed; that is the only one I have heard of where there are coloured women.

1148. Do you mean to tell the Committee that only one of these brothels was inhabited by coloured prostitutes?—There may be more. That was the only one to my knowledge.

1149. With regard to the brothels that have been shut up owing to the administration of the Morality Act, where are the inmates gone?—A great many have gone home, a considerable number went to Johannesburg, and a great many to Durban.

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1150. They were all whites?—Yes; chiefly Continentals, Jewish and French.

1151. You are a member of the Municipality: have they taken any action with regard to the suppression of brothels?—They have taken some action: they have sent round to the medical practitioners to ascertain the amount of illegitimate births, the number of syphilitic cases under treatment, and so on, but no steps at all have been taken to suppress brothels.

1152. Why do they not take steps, seeing that there is a law to that effect?—The law has never been put into operation, I think, the law of 1892.

1153. You say the Municipality have the power?—Yes. If there were no Morality Act, they would still have the power.

1154. But they have not exercised that power?—No.

1155. Why?—I do not think the feeling on the subject in the Town House is quite strong enough.

1156. Then there is absolutely nothing done: no action is taken by the Municipality?—No. That clause is practically a dead letter as far as the Town House is concerned.

1157. Have they given no instructions to the police?—No, except any complaint has been made.

1158. Have many complaints been made?—No.

1159. You have taken absolutely no action at all?—Practically none.

1160. Not even by communicating with the police?—They have taken action if there was any complaint lodged: then we would communicate with the police.

1161. You said it was not within your knowledge that coloured prostitutes engage themselves as domestic servants?—No; they engage themselves as charwomen, and do day labour.

1162. We have it in evidence that this goes on to a very large extent?—Probably; there is a great deal of immorality among coloured servants, but they are not prostitutes; they do not make a living

by it. They look on morality as a very cheap thing; and they are open to anybody, whether boarders in the hotels or anyone else, but, as I say, they do not make a living by it.

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1163. Supposing you were convinced that these coloured prostitutes do enter domestic service as we are informed, do not you think such a thing highly dangerous to the health of the inmates of the house?—In what way?

1164. In communicating the disease?—There would be some danger; I would not say it was highly dangerous.

1165. But supposing these servants and nurses had to do with children, might not they communicate the infection by caressing and kissing them or drinking out of the same vessels as the children?—If they had any syphilis about the mouth probably a child might be affected.

1166. Suppose there was not syphilis about the mouth but in another part of the body, would it not be communicable?—If the woman was dirty, certainly.

1167. If she suffered from syphilis at all?—Not necessarily. Doctors often have syphilitic patients, but they disinfect their hands and then there is no danger to other patients, but, of course, if a doctor was dirty and did not wash his hands before treating other patients, the chances are that he might convey the disease.

1168. I understand that if a woman is suffering from syphilis and does not express it in her mouth she would not communicate the disease to children whom she kissed?—Not necessarily.

1169. Nor by means of drinking vessels?—No, not necessarily.

1170. *Mr. T. Searle.*] It can only be communicated through the blood or through the secretions of a sore?—If I had syphilis, it could only be communicated through an open sore.

1171. *Mr. Anderson.*] Is not the saliva of a person suffering from syphilis contagious?—No.

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1172. You think that the working of the two Acts is in opposition?—Yes, very much so.

1173. And something will have to be done, I suppose?—Yes; if you keep them both on the statute book.

1174. Something will have to be done to alter the present law, so as to prevent conflict in the administration officially?—Yes; as far as the Contagious Act is concerned. So long as the Contagious Diseases Act remains on the statute book, you may prevent a little syphilis, but while you are damming up one sluic you leave numbers of other sluic undammed. Of course, in a place like India, a Contagious Diseases Act might be the means of preventing syphilis among the troops, because you have the whole thing under supervision, but here there are many ways of getting syphilis. A few of the French prostitutes may be quite clean, but there are hundreds of other women who are not clean. Moreover, in Cape Town, which is a port, sailors may bring the disease from other countries, and if the women are liable to be examined, the same law should apply to men. If a person is keeping a brothel, and she has to protect the women there, she herself should be protected, and if a sailor or any other person comes there, they ought to be medically examined as well.

1175. At what stage?—When they visit brothels. Of course, you cannot keep them under observation for three or four weeks.

1176. What I wanted to ask you was, whether you had any suggestion to make with regard to amended legislation to prevent the present incongruous state of things; have you any suggestion? I think the Contagious Diseases Act should be repealed.

1177. What part of it?—The part dealing with the examination of women, that is, the first part. As far as the age of consent is concerned, I do not think I would change it. As far as the Morality Act is concerned, it requires a little bit more tact

in its administration. The Act is good, but it is perhaps a little too strong, and it should be administered very tactfully. For instance, if a person keeps a brothel, and that brothel is not a nuisance to anybody and no complaint is made about it, I think it is very unwise to suppress it.

1178. But that would be in direct violation of the law, would it not?—The law should be amended to that extent.

1179. You are in favour of these brothels remaining then?—I am not in favour of their remaining, but I think they should be put under a different administration, that is to say, if the detectives found that a brothel was a nuisance, then punish the inmates, but otherwise not. If complaints were made by neighbours, then suppress the brothel.

1180. You said that you were in favour of the Morality Act?—Yes.

1181. And the Morality Act condemns brothels as being illegal?—They are illegal, but at the same time I do not think it would conduce to morality if you had a better detective system, and these women were worried from one place to another.

1182. You think that brothel keeping should be winked at in fact?—Yes.

1183. By the law?—Yes.

1184. Notwithstanding the fact that it is expressly laid down that brothels are illegal?—Yes, they are illegal.

1185. You think they should exist?—They should not exist, but we should act unwisely if we prosecuted them unless they are a nuisance.

1186. That is the same thing; you do not wish them suppressed?—I wish there were none, but I do not think you can suppress them; it is not possible.

1187. Ought they to be suppressed?—If they could be, but you cannot do it.

1188. Therefore, the law should wink at them, you think?—Yes; the law should be changed or

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amended in this way, as long as these places are not an annoyance and the women are not openly pursuing their avocation, and as long as the neighbours do not complain, they should not be prosecuted or persecuted.

1189. With regard to the coloured prostitutes, what men chiefly associate with them?—What do you mean by prostitutes, an immoral girl or a girl earning her living by prostitution?

1190. Those who are in the habit of leading an immoral life?—Firstly, soldiers, and secondly, boarders in boarding-houses, probably mostly soldiers.

1191. Do not you think, that being so, and this being a garrison town, there should be some law following the principles laid down in the Contagious Diseases Act?—No; because soldiers will not go to a brothel.

1192. Do not they go to brothels at all?—No, they will not pay for that; they get it cheap.

1193. When the Morality Act was first promulgated, was it well administered?—It was too strictly administered; the power should be there, but the power need not be necessarily carried into effect.

1194. Has the administration been relaxed somewhat?—Yes.

1195. Is it very relaxed?—Fairly so.

1196. *Mr. Wood.*] In your practice do you have both white and coloured patients?—A considerable number is coloured.

1197. Judging from what you said, you do not look on syphilis as being really a dangerous element to combat?—It is a very difficult element to combat.

1198. We have been told, in the course of our inquiry, that syphilis will remain for a period of years before it can be removed from the system?—It is very difficult to cure.

1199. Therefore everything should be done if possible to prevent an innocent person coming into contact with a syphilitic?—Yes.

1200. The native coloured women here are in a far lower condition, are they not, than the European women?—Yes.

1201. Consequently, the conclusion is, that immorality may be carried on by these third-class natives without the knowledge of what the disease is and its results?—Yes, quite so.

1202. If soldiers and sailors were not under the strict regulation that they have to pass through there would be a great deal more syphilis, would there not, in both branches of the service?—I do not understand that they have to pass through anything.

1203. They have a weekly examination, do they not. It is known immediately when a man has syphilis?—He cannot tell for 28 to 40 days whether he has syphilis or not after he has contracted it.

1204. Would it take that time?—Yes, 28 days.

1205. Did you know Cape Town before the Morality Act was promulgated?—A short time before.

1206. What did you consider the condition of the community then?—The moral condition was very low; the number of French and Jewish prostitutes was very great indeed, and many of them used to come periodically to be examined of their own accord, without any Contagious Diseases Act. They preferred to come to a doctor and be examined, and get a clean certificate, rather than go to the Lock Hospital.

1207. We are told that there are many portions of Cape Town where quiet, well-behaved people could not really live?—That is quite true.

1208. These women are a danger, not only to themselves but to children?—Yes.

1209. The Morality Act has so far suppressed these bad houses, but while it may have removed them from the public gaze, yet you have such places in existence to-day?—Yes.

1210. I judge from what you said, that under regulation you would think it was perfectly right

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that these places should be allowed?—They should be permitted under certain conditions. I would not legalize them.

1211. But how could that work?—I would simply amend the law to this effect. As I said before, if there were complaints that these houses were causing a nuisance in any locality, then it is time enough for the police to interfere. There are houses in Cape Town that hardly a soul knows anything about; not even the neighbours know. When they find it out, they write to the landlord, and the landlord probably communicates with the police, and they are stopped.

1212. We are to understand from your evidence that if there is any mischief going on, as long as it is carried on secretly, you would rather countenance it?—I would have to countenance it.

1213. *Mr. T. Searle.*] I suppose what you mean is, that although this evil will continue in spite of the law, you would not advocate having a law allowing it; you would make it illegal, but if it was so carried on that it was no nuisance to anybody, and no danger to the community, you would be prepared to overlook it?—Yes.

1214. You say you think the Contagious Diseases Act ought to be repealed?—Yes.

1215. And your chief reason, as I understand, is that the Contagious Diseases Act does not really touch the sore?—Very slightly.

1216. Do you think the petitioners are right when they say that it gives people the impression that the State is legalizing this vice?—It must.

1217. The coloured prostitutes have to ply their trade in the open, more or less, have they not?—Yes.

1218. So you think that, as far as that aspect of the question is concerned, there is not much difference now to what it has been all along, even before the Morality Act was in force?—It is practically the same as it was.

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1219. I suppose you know that at present the Morality Act makes it incumbent upon neighbours to a brothel to complain, and that it is on such evidence that action is taken against such places?—Yes.

1220. We are told, however, that it is very difficult to get neighbours to complain; they are bribed by the brothel-keeper?—I do not think so; it must be in a very low locality, if that is so. I may say that at one time the police used to have detectives watching certain houses; it did not depend upon the neighbours complaining, but the police watched the houses, and sometimes went in themselves; it was a sort of trap business.

1221. You think, on the whole, the Morality Act has done good?—Great good.

1222. We have it in evidence from one witness that since the Act has been less stringently administered, soliciting has increased?—I do not think anybody can speak as to that better than myself, as I am out every evening in different parts of the city, and I have not noticed it.

1223. We are told that at some of the brothels vice is more open, and the girls stand on the stoep and invite men to go in, and go on in a worse way than they did when the Act was strictly administered?—I have seen that sort of thing in one or two cases, but I also saw it during the strict working of the Morality Act.

1224. You advocate the repeal of the Contagious Diseases Act, but you would retain the Morality Act?—Yes.

1225. You spoke just now about a doctor giving certificates; is it the case that if a prostitute came to a doctor to be examined, he would give a certificate that she was clean?—Yes, if she asked for it. I do not see why we should provide doctors for these people at all. I would not shut up the Lock Hospital; those who wish to be treated for syphilis should have a hospital to go to.

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1226. Is it a right thing for a doctor to do, to give a certificate if he knows that a woman is a prostitute?—Whether right or wrong, the doctors do it.

1227. All doctors?—Practically all the doctors. I never knew one who refused.

1228. Is it not likely, to some extent, to encourage vice, if a woman can produce a certificate of that kind?—No; it would not encourage vice, but it means that if a woman has not a certificate a man will go somewhere else.

1229. Where would he go to if nobody had a certificate?—If no one could get a certificate a man would not ask for one. If a man is cautious, he will naturally ask for a certificate if he is at all suspicious.

1230. You do not think that ought to be prevented?—I do not see how you can prevent the granting of certificates. I do not think it is possible.

1231. Everything is possible by law?—I do not see how the law could touch the matter.

1232. Have not we amended the Medical Act in regard to the granting of certificates?—I do not think you could get at the thing in this case.

1233. *Dr. Hewat.*] As regards this inquiry, you, as a medical man, realize that there is illicit connection in all big towns?—Yes.

1234. And whether in the form of prostitution or otherwise, it will continue?—Yes.

1235. Has it been your experience as a medical man that the more you try to put down prostitution the more you spread the vice in a secret way?—I do not think so; my experience of Cape Town rather points the other way.

1236. From your knowledge and your experience of the world generally, is it a recognised thing that illicit prostitution will exist?—I was in practice in Manchester before I came out here, and Manchester is what you would call an immoral town, as all large towns, I suppose, are; I do not

suppose it would make any difference whether you forced prostitutes into one particular quarter or not.

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1237. As regards Cape Town, have you noticed how the illegitimate birth rate has risen?—Yes.

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1238. What do you put that down to?—First, to the low marriage rate, that is one thing, and secondly, of late a great many women have been sent to Cape Town to be confined; they come from the Paarl or Stellenbosch, or it may be East London or Graham's Town, and they are confined here, and that swells up the illegitimate births in Cape Town; but they should not all be credited to Cape Town. I myself have attended a considerable number of people who do not live here.

1239. Is it not generally recognised in Cape Town that there are more legitimate marriages than there used to be among the coloured people, due to the good influence of the Church; they recognise marriage more now than they used to?—I think the number of illegitimate births is not so much due to the coloured as to the white class, white fathers and coloured mothers.

1240. Do you not think if your theory was correct, the illegitimate birth rate would have been greater during the war, when there were so many soldiers out here?—There are soldiers here still; I may say that I have not met a coloured woman of over 21 years who was a virgin.

1241. I understand you to say that venereal disease exists in all large towns, more or less?—Yes.

1242. And that being so, you think it should be checked as much as possible?—Yes; I do not think you have any check except fear; probably moral persuasion may do something.

1243. Do you not think the Contagious Diseases Act acts as a check?—I do not.

1244. Why?—Because the class of men who go to a brothel is different from the ordinary men in the street. The man who goes to a brothel is generally from up-country, from Johannesburg

Dr. or elsewhere; he comes, as he says, to have a good
 R. Forsyth. time, and he goes to a brothel, but the ordinary
 M.B. Cape Town man does not go to a brothel. The
 Aug. 1, 1906 ordinary man in Cape Town goes with anybody, he
 is not confined to a brothel. I have often asked
 prostitutes where their best customers came from,
 and it is not so much men from Cape Town as those
 who come to Cape Town for a holiday.

1245. Do you know what the Contagious Diseases Act is?—Yes.

1246. If you find women affected with disease, we have power, under the Contagious Diseases Act, to control them?—Yes, but practically you only touch a very small number; if the Contagious Diseases Act could possibly be made to include everybody, which is not practicable, there might be some reason for it, but at present it touches very few.

1247. If we did away with the Contagious Diseases Act, how could we possibly control the spread of venereal disease, which you say must exist in all large centres?—My point is that we do not control it even with the Contagious Diseases Act. If the Contagious Diseases Act were repealed tomorrow, you would have just as much syphilis as ever.

1248. If a prostitute with syphilis consulted you, and there was no Contagious Diseases Act whereby you could compel her to undergo treatment, how could you possibly prevent her carrying on her vocation?—If a woman is living in a brothel, and she finds that she has syphilis, the chances are that she will not let anyone touch her; most prostitutes are particularly careful about that. Prostitutes have come to me, and they wanted to be absolutely certain that they were entirely cured before they allowed any cohabitation. My experience of French and Jewish prostitutes is that they are very particular about being free from disease.

1249. *Mr. Anderson.*] You speak of white women?—Yes.

1250. *Dr. Hewat.*] How would you suggest that the evil should be controlled?—I am afraid that I cannot suggest any particular method that would influence the amount of immorality in large cities, but I do not believe it would be wise to use stringent measures; my opinion is that we must wink at this vice, which we can never control; at the same time, I would not legalise vice in any way.

1251. That is your opinion as a medical man?—Yes, it is repugnant to one's feelings. As I said before, if it is a question of soldiers, as in India, where you have 100,000 men perhaps, who require this thing and will have it, it is wise to have regulation and control, but here it is absolutely different. The number of women in brothels, in comparison with those who have connection outside, is very small; that is my experience. Therefore, by keeping up the Contagious Diseases Act, you are doing little good, and you are not controlling the disease to any extent. I believe with the Lock Hospital you do some good, but the Contagious Diseases Act is no use.

1252. You think there should be no Contagious Diseases Act, but a strict Morality Act?—Yes, a strict Morality Act, and it should be administered very tactfully and wisely.

1253. And prostitution should be allowed to continue, as it must exist, you say, in every large town?—Yes, you cannot prevent it.

1254. As a medical man, you think there should be no check on the spread of venereal disease?—I do not believe you can impose any check.

1255. Is that not rather opposed to the opinion of the medical profession, whose aim it is to try and check disease?—I do not think so.

1256. It has been stated in evidence that there is a chance of a woman going to the Lock Hospital without any disease, and becoming infected while under examination; is that likely?—No. Mr. Anderson asked me just now whether domestic

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servants who happened to have syphilis would be likely to give it to the children, and my answer was that if a servant kept herself clean and washed her hands she would not convey the disease to children; just the same as a doctor, if he did not keep himself clean after examining the patient, might communicate disease to another person.

1257. *Mr. Anderson.*] You say that a servant could not communicate syphilis by a kiss or by the saliva?—No; there is no infection in the saliva.

1258. *Chairman.*] Is the examination in the Lock Hospital voluntary or compulsory?—I understand it is compulsory.

1259. Is a prostitute forced to go there?—Yes. If the Contagious Diseases Act is carried out properly, it is compulsory, and a woman must go at a certified specified time.

1260. Is a woman compelled, as long as her name is not on the register, to come up for examination?—Not so long as her name is not there.

1261. If she goes there she goes voluntarily; she is not forced to go in?—No.

1262. And she submits to examination voluntarily?—Yes; but my point is that the Act touches very few.

1263. If you could force all into the hospital, and try and cure them, it might be a different thing altogether?—Yes, and the men too.

1264. *Mr. Anderson.*] Is it your opinion that the State should legislate against the spread of venereal disease?—I have a strong sentimental opinion against it.

1265. You do not think the State should legislate against the spread of venereal disease?—I do not.

1266. You said just now that women came to Cape Town from the country districts to be confined of their illegitimate offspring; what reason do you assign for such a thing?—For the sake of privacy.

1267. You said just now that the administration of the Contagious Diseases Act was really, in point of fact, legalizing this state of things?—Yes.

1268. You said that you would not have legislation interfering with brothels which are not a nuisance to neighbours and are not complained against?—I do not say I would have no legislation; I would like legislation, but I would not always put it into operation.

1269. Do you not think that such a negative sort of legislation is really legalizing this state of things?—No.

1270. You object to legalizing, but here you legalize it in other ways?—I would not legalize it, I would wink at it; if I legalized it I would permit it, and I would not necessarily allow it to continue.

1271. You said that it is the custom in many cases for a prostitute to go to a private doctor for a certificate of cleanliness?—Not latterly, that was about three years ago; there was a considerable number.

1272. Did they make use of this certificate in plying their trade?—Yes, they used to do that.

1273. At the Lock Hospital no certificate is given to women there?—No; they are simply registered.

1274. Under the Government system no certificate is given to a woman to exhibit as to her cleanliness, whereas a woman applying to a private physician can obtain such a certificate to enable her to carry on her trade?—Not to carry on her trade, but she can make use of it in whatever way she pleases.

1275. That would be the natural sequence?—Yes.

1276. *Mr. T. Searle.*] You stated that you did not think the Legislature can step in with regard to syphilis; that it should be made known that it is illegal to spread the disease. Do you think that doctors should be called upon to inform the authorities?—That is a thing I have never thought

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about. It would be a wise thing, I think, if every person who had syphilis were made to inform the authorities, but I do not think it would work.

1277. Do you think syphilis should be reported to the Health Officer, the same as other infectious diseases?—In Cape Town there are certain diseases which are notifiable, but those same diseases may not be notifiable in Graham's Town or East London.

1278. Taking Cape Town, you are bound by the Act to report certain infectious diseases; ought not syphilis to be included in the list?—I cannot give an answer to that just now; I should like to think it out. If such a thing could be done, I believe it would help largely to stamp out the disease.

1279. *Chairman.*] When an infectious disease is discovered in the country districts, the party who knows it, or who gets the information, has to report it immediately to the Magistrate, who makes a full inquiry and gets a doctor to attend. Would you suggest that every person who has syphilis should notify that he has it to the Health Authorities, just the same as a person with small-pox. Should not syphilis be placed in the list of notifiable diseases?—I do not see how it would work. It is a thing I have not thought out as to whether it should be among the number of notifiable diseases or not. I would not like to give an off-hand answer to that. I would sooner give an answer in writing.

1280. In your evidence you said you had not found in your practice a single coloured girl of the age of 21 who was a virgin?—That is my experience.

1281. Do you think that could be substantiated with regard to the whole of the coloured community of Cape Town?—I expect it largely could be.

1282. You would anticipate that that would be the result?—Yes; if I did find one, I would be surprised.

1283. *Dr. Hewat.*] You do not belong, do you, to the Society for the spread and preservation of venereal disease as a punishment for men for doing wrong, and for innocent families for sheltering in their employ servants suffering from syphilis?—No.

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Thursday, 2nd August, 1906.

PRESENT:

Mr. THERON (Chairman).

Mr. Hellier.		Mr. Wood.
Dr. de Jager		Mr. Anderson.
Mr. T. Searle.		

Mr. Robert George Ross, further examined.

1284. Have you read over the evidence given by you previously?—Yes.

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1285. In your evidence we find the following: The question put to you was "It is possible, I suppose, that even some doctors are not very virtuous themselves?" and your answer was "decidedly"?—Yes.

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1286. We want to know whether you hold to that?—I approached one medical man with regard to his joining our Association, and he said that he could not conscientiously do so, as his practice was practically made up by attending prostitutes. He said he had a considerable number. That is what I referred to.

1287. Do you mean by that that he was not a virtuous man?—No. There was another case of a medical man in Cape Town, who said he had cases of girls who came from Johannesburg and up-country so that the thing should be kept quiet, and he was paid for attending them in their confinement, and a nurse was also paid. I cannot say anything further than that.

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1288. It was thought by some members of the Committee that your remarks might refer to some particular doctor?—No. I thought it was a general question I was asked. I said that was my experience when I was asked as to the attitude of the doctors towards our Association.

1289. Then there was another question put to you as follows, "and consequently, if a doctor of that description was charged with the carrying out of the Contagious Diseases Act, it is more likely to aggravate the matter than to cure it?" and your reply was, "I have heard very strong complaints against the treatment of prostitutes at the Lock Hospital"?—Yes I did make that statement. I had it from a nurse, but I said I could not produce any evidence. I thought it was understood that that should not appear in my evidence, but that the matter would be investigated. I think it was the decision of the Committee that it would not be fair to publish the evidence, but that it should be taken as a suggestion, and the matter would be investigated. The nurse would not allow me to give her name, but she told me that certain persons had informed her that during the course of their treatment they had got the disease.

1290. That was only hearsay from the nurse?—Yes. The nurse was in touch with these women, and the women told her. The matter was considered by this Committee, and it was decided not to include what I said in my evidence.

1291. What I mean is this, you do not know anything about it of your own knowledge?—Nothing.

1292. It was simply hearsay from this nurse?—Yes, simply hearsay.

1293. *Dr. Hewat.*] What is the nature of the complaints in connection with the Lock Hospital that you refer to, is it regarding the treatment?—With regard to the examination. It does not refer to the medical officer at present at the Lock

Hospital, it was not during his time. I know that; it was previous to his appointment. This woman said that the treatment was very rough.

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1294. What sort of treatment do you mean, medical treatment?—Yes.

1295. Do you speak as an authority on medical treatment?—No.

1296. You are secretary to this Association?—Yes.

1297. You do not hold yourself forth as an authority on medical treatment, do you?—No. I do not know how these women are treated up at the hospital. I only heard this through a nurse, but she is not employed in the Lock Hospital.

1298. I suppose you can supply the Committee with evidence to substantiate your statement?—I said that I could not get the nurse to come before the Committee, but I would try. It is very difficult to get evidence of that nature—I gave my evidence as mere hearsay, what the nurse told me, she does not want to come here to give evidence—I thought the Committee decided not to include what I said in my printed evidence and that it was to be treated as a suggestion. I think it was also suggested that the matron of the Lock Hospital should be called again.

1299. Are you quite prepared to stand by your statement that you made before the Committee, which is going to be made public. You cannot make a statement like that without standing by it?—It was hearsay.

1300. *Mr. T. Scarle.*] Are you prepared to stand by your statement?—I cannot bring evidence to prove it. I give you my word that I was told it, but nothing further. I am sure that the nurse will not come forward; she said she would not. I spoke to her since I gave my evidence, part of which I see has been taken out.

1301. You are quite willing to stand by your statement, and prove it?—I cannot prove it.

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1302. *Mr. Anderson.*] I will read Mr. Searle's questions through to you and ask you what a reasonable person would conclude from it: "(Q. It is possible. I suppose, that even some doctors are not very virtuous themselves?—(A.) Decidedly. (Q.) And consequently, if a doctor of that description was charged with the carrying out of the Contagious Diseases Act, it is more likely to aggravate the matter than to cure it?—(A.) I have heard very strong complaints against the treatment of prostitutes at the Lock Hospital." What conclusion would any reasonable person arrive at as to what that meant?—I have heard these reports.

1303. In giving this evidence, do you reflect on the doctor at the Lock Hospital?—No. I do not know which doctor it is: it was only the nurse's statement that the prostitutes were reflecting upon a doctor at the hospital, but of course the nurse is not prepared to come forward.

1304. *Chairman.*] You say this communication was received by you before the appointment of this doctor at the hospital?—Yes. I believe so.

1305. *Dr. Hewat.*] You stated in answer to question No. 854, "a lady friend of mine, a nurse, said that some girls have contracted the disease in the very act of being examined." Can you produce that nurse as evidence?—No, she refuses to allow me to use her name. I saw her since the meeting of the Committee, and she would not allow me to use her name. She is a very well-known nurse in town to all the medical men.

1306. Was she a nurse in the Lock Hospital, or was she in touch with the prostitutes?—She was not in the hospital treating cases.

1307. Is it not a serious statement to make against the whole medical profession on the word of prostitutes?—Decidedly it is.

1308. I suppose you know what such a statement means, that the medical profession have spread disease by means of examination?—I only gave it as hearsay.

1309. Do not you think it is rather a slur on the honour of the medical profession? I should think it was; but I only brought it before the Committee as hearsay.

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1310. That may be, but you made use of a statement which should be either contradicted and withdrawn by yourself, or else it should be fully gone into. I am speaking as a medical man?—It was withdrawn at the last meeting. I thought that was definitely settled. I said at the last meeting that I was not prepared to prove it, and I thought it was withdrawn from the evidence. I know a considerable part of what I said was withdrawn. I thought it was all withdrawn.

1311. *Mr. Anderson.*] It was decided by Mr. Speaker that this evidence of yours as given, could not be withdrawn, and it will have to stand in our report, so we ask you to-day whether you are perfectly serious in making this statement, and whether you wish to reiterate it now?—I wish to reiterate it as hearsay, but I have no evidence to prove it, and of course it can be withdrawn. I withdraw it, and unless I can get further evidence, let the matter drop.

1312. *Dr. Hewat.*] Is this Committee to understand that you make this statement on the word of prostitutes and this Association, against a profession which up to now has always been considered honourable, and the last profession on the face of the earth that would spread disease in the way stated; therefore, are we to understand that you definitely and irrevocably withdraw that accusation?—Yes, decidedly.

1313. Are we to understand that that statement of yours is wrong, and that you withdraw it?—It was not given as a statement: it was given as hearsay, and it is withdrawn. I was asked by Dr. Hewat why we had not more medical men in our Association, and I think it was suggested that they were not in touch with us, and I said I thought they did not consider doctors were all virtuous. I

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asked a certain doctor to become a member of our Association, but he refused on account of his practice being considerably made up of attending these prostitutes privately. That is what I referred to in my evidence.

1314. *Mr. Wood.*] You now qualify your other statement that it was hearsay?—Yes.

1315. *Mr. de Jager.*] The question was asked (No. 890), "It is possible, I suppose, that even doctors are not very virtuous themselves," and at No. 891, "And consequently, if a doctor of that description was charged with the carrying out of the Contagious Diseases Act, it is more likely to aggravate the matter than to cure it." Did you wish in your answer, "I have heard very strong complaints against the treatment of prostitutes at the Lock Hospital," to convey to the Committee that the doctor now in charge of the Lock Hospital was not a virtuous doctor?—No.

1316. You do not wish to reflect on that doctor?—Decidedly not. I could not tell you the doctor who was attending these people at all. I have absolutely nothing against the doctor at the Lock Hospital at present. I only heard his name from Dr. Wells two days ago.

1317. You said that you found some of the doctors were not in sympathy with you in your work?—Decidedly.

1318. Because they attended prostitutes, you think they look on your Association with disfavour?—Yes; they refused to have anything to do with our Committee on those grounds.

1319. Has that occurred lately or some time ago?—Our Association has only been in existence about a year, it was about the time we were organizing.

1320. Have any prostitutes complained to you personally about the examination at the Lock Hospital?—No. I do not think I have spoken to a prostitute in my life. I never came in contact with them.

Mr. Thomas Searle, M.L.A., examined.

1321. *Dr. Hewat.*] The following question was put by you to the last witness in his previous evidence: "It is possible, I suppose, that even some doctors are not very virtuous themselves, and consequently, if a doctor of that description was charged with the carrying out of the Contagious Diseases Act, it is more likely to aggravate the matter than to cure it." You did not wish to convey by that a general slur on the medical profession, did you?—No; I simply meant that among the medical profession as in all professions, there are black sheep.

1322. And you would not reflect, or wish to reflect in any way upon the doctors attached to the Lock Hospital, either past or present?—No. What I meant was, that it might be possible in the past or present (because I do not know the doctors) or at some future time, for some doctor to be put in charge of the carrying out of this Act who was not virtuous, and in that case he would be likely to do more harm than good. That is all I meant.

1323. You did not refer to any doctor who has been or now is at the Lock Hospital?—No. I had no one in my mind.

Mr.
T. Searle.
M.L.A.
Aug. 2, 1906.



APPENDIX.

[A]

PETITION FROM JANET M. ANGUS AND NINETEEN OTHERS RELATING TO THE REPEAL OF THE CONTAGIOUS DISEASES ACT.

To the Honourable the Speaker and Members of the Legislative Assembly.

The Petition of the Women's Christian Temperance Union of Uitenhage

HUMBLY SHEWETH :—

That whereas in the carrying out of Part 4, Act 36 of 1902, the irregularities disclosed in 1904 have shown to demonstration that whilst the Contagious Diseases Act is in force, false witness may be brought to bear upon the innocent, and gross insult perpetrated where no vice exists, and that from fear an unprotected woman may be made to yield to the coercive power of a bribed official and be dragged down to an evil life.

According to the late Saul Solomon the Contagious Diseases Act does not reclaim the vicious from their course of life, and it does not deter others from entering it : instead of establishing an institution for the cure of disease it is really an establishment for the manufacture of prostitutes. 2,500 Bishops and Clergy in England memorialized the Prime Minister in 1872 for the repeal of the Contagious Diseases Act, and in 1883-4, 4,400 signed in favour of its repeal.

Medical Authorities acknowledge that the Contagious Diseases Act gives no guarantee against the propagation of venereal maladies.

According to the Honourable A. Balfour, it would ruin any Government to attempt to introduce the Contagious Diseases Act in England.

WHEREFORE your Petitioners plead most earnestly for the Repeal of The Contagious Diseases Act.

Or for such other relief as to your Honourable House may seem desirable.

And your Petitioners as in duty bound will ever pray.

JANET M. ANGUS, President,
And 19 Others.

The wording of the other petitions is in all cases the same as that printed above. The following is a list of them, giving the dates of presentation :—

5th June, 1906.

No. 72. From Janet M. Angus and others.

6th June, 1906.

No. 88. From Helen Davison and others.

7th June, 1906.

No. 106. From Margaret C. Pringle and others.

8th June, 1906.

No. 115. From Lillian Hutton and others.

No. 120. From Gertrude Edkins and others.

No. 124. From Louise Jackson and others.

11th June, 1906.

No. 142. From Amie Pitt and others.

12th June, 1906.

No. 149. From Rev. S. H. Ravenscroft and others.

14th June, 1906.

No. 179. From Maria Phillips and others.

15th June, 1906.

No. 194. From Helen C. Leith and others.

No. 213. From Elizabeth Hall and others.

No. 214. From M. H. Filmer and others.

No. 215. From A. Kidson and others.

20th June, 1906.

No. 226. From Maggie Helm and others.

21st June, 1906.

No. 235. From Maria du Preez and others.

22nd June, 1906.

No. 247. From Agnes Main and others.

25th June, 1906.

No. 248. From Jean Simpson and others.

19th July, 1906.

No. 292. From E. Taylor and others.

PETITION FROM JANET M. ANGUS AND SIXTEEN
OTHERS AS TO THE RAISING OF THE AGE OF
CONSENT FOR GIRLS.

To the Honourable the Speaker and Members of the Legislative
Assembly.

The Petition of the Women's Christian Temperance Union of
Uitenhage, and others

HUMBLY SHEWETH :—

That whereas your Petitioners believe that Act No. 25 of
1893 should be amended so as to afford greater protection to the
young and innocent.

That children from 13 to 16 years of age are unable to estimate
the danger of the consent allowed under the said Act.

According to Salvation Army Rescue Workers, disease and
death are often the result of such consent.

WHEREFORE your petitioners pray that the age of consent be
raised from 13 to 18 years of age.

Or for such other relief as to your Honourable House may
seem desirable.

And your Petitioners as in duty bound will ever pray.

JANET M. ANGUS, President,
And 16 Others.

The wording of the other petitions is in all cases the same as
that printed above. The following is a list of them, giving the
dates of presentation.

5th June, 1906.

No. 74. From Janet M. Angus and others.

6th June, 1906.

No. 81. From Helen Davison and others.

7th June, 1906.

No. 107. From Margaret C. Pringle and others.

8th June, 1906.

No. 112. From Lilian Hutton and others.

No. 121. From Gertrade Edkins and others.

No. 123. From Louisa Jackson and others.

11th June, 1906.

- No. 137. From Amie Pitt and others.
 No. 140. From Gertrude Berrange and others.

14th June, 1906.

- No. 175. From Maria Phillips and others.

15th June, 1906.

- No. 191. From Helen C. Leith and others.

18th June, 1906.

- No. 203. From M. Abbott and others.

20th June, 1906.

- No. 219. From Elizabeth Hall and others.
 No. 220. From A. Kidson and others.
 No. 221. From M. H. Filmer and others.

21st June, 1906.

- No. 236. From B. Sutherland and others.
 No. 241. From Mabel Hyde and others.

25th June, 1906.

- No. 250. From Jean Simpson and others.

[B.]

LETTER FROM THE MEDICAL OFFICER OF
 HEALTH FOR THE COLONY FORWARDING
 INFORMATION WITH REGARD TO THE
 WORKING OF THE CONTAGIOUS DISEASES
 ACT.

Office of the Medical Officer of Health
 for the Colony,
 Cape Town, 3rd August, 1906.

The Chairman,

Select Committee of the House of Assembly
 on "The Contagious Diseases Prevention Act, 1895."

Sir—In accordance with the undertaking I gave the Committee at the time I gave evidence before it, I now have the honour to forward, for its information, the following particulars :—

Attached will be found a Table giving the main features of the working of Part I. of "The Contagious Diseases Prevention

Act, 1895," in each centre of the Colony in which it is proclaimed, during the seven years 1899-1905—that is to say, for a period of three years before and three years after the year 1902, in which "The Betting Houses, Gaming Houses and Brothels-Suppression Act, No. 36 of 1902," was promulgated. This Return shows the number of women remaining on the Register at the beginning of the year, the number of women placed on the Register and removed from the Register during the year, and the number of women, both European and Coloured, who were examined, with the number of women found to be diseased. It also shows the number of women placed on the Register each year under the compulsory section, all others going on voluntarily. The percentage proportion of individuals found to be diseased, each year, is also furnished.

This Table serves to illustrate the evidence which I gave when before the Committee, as to the effect of the Morality Act in diminishing the work of the Contagious Diseases Act.

With regard to the working of Part II. of the Contagious Diseases Act, I also furnish a Table showing the number of cases treated throughout the whole of the Colony during each of the years 1899-1905, distinguishing, in the case of Syphilis, the numbers suffering from that disease in the primary, secondary and tertiary stages and the hereditary condition, the figures being given separately for males and females and Europeans and Coloured.

From this return it will be seen that, whereas the total number under treatment in 1899 was 1,526, it was in the year 1905, 2,290. This increase, however, is largely due to the increased number of patients being treated in the Taungs district, where, in 1903, 201 were treated, in 1904, 585, and in 1905, 719.

In 1904, by circular instructions dated the 5th October, the Government decided to close practically the whole of the Contagious Diseases Hospitals up till then existing in most of the districts of the Colony, this step having been taken in the first case on the ground of expense, and, in the next, that the majority of the patients treated therein were in the late tertiary stage and not in a very highly infectious condition. Moreover, many of the Hospitals were in such an unsatisfactory state as to be a reproach to the administration. In my opinion, however, some Hospital accommodation should be provided for the treatment of such cases, but it should be in the form of several centrally and conveniently placed institutions, to which Syphilitics not under proper treatment and control could be drafted from the surrounding districts. This, however, would hardly be workable unless Part II. of the Contagious Diseases Act be amended so as to

provide powers for the compulsory isolation of such patients under treatment in Hospital.

While the figures contained in this Table do not, in themselves, indicate any marked increase of Syphilis throughout the Colony, there can be no doubt whatever that the disease is generally on the increase among Native and Coloured populations, and in some districts this is markedly the case. In the absence, however, of statistics, I enclose some extracts taken from District Surgeons' reports for the past two years, 1904 and 1905, which will serve to give the Committee some idea of the dangerous extent to which the disease prevails.

I also undertook to furnish the Committee with some remarks as to the main directions in which I consider the present Contagious Diseases Prevention Act requires amendment.

With regard to Part I., it, on the whole, works satisfactorily and does not appear to require any very drastic amendments. I am of opinion, however, that

(1) It would be well if the Act provided for the appointment of an Administrator, whose duty it should be to see and be responsible for the proper and just carrying out of the Act, and who should inspect, or cause to be inspected on his behalf, from time to time, all Contagious Diseases Hospitals and Examining Stations established under this part of the Act, and enquire into the manner in which the duties of the Medical Inspectors and others are performed, as well as to hear any complaints made by any female feeling herself aggrieved. This officer should report annually to Parliament on the subject. I am of opinion he should be a professional man, as his duties are largely of a medical nature; indeed, the post might easily and economically be filled by the Medical Officer of Health for the Colony, in conjunction with his other duties. At the present time, the Medical Officer is generally expected to maintain some sort of a watch over the work.

(2) I am certainly of opinion that this part should be applied to other centres than those in which it is at present in force, and more especially to the District of Kimberley. If thought necessary, the wishes of the inhabitants of any district to which it is applied might be consulted by requiring the Local Authorities in the district to make recommendations on the subject to the Governor, before this part of the Act is put in force in their district, provided, however, that nothing should prevent the Governor bringing it into force in those districts where, under such special circumstances as the collection of soldiers, sailors, or large numbers of unmarried labourers, he deems it necessary.

(3) If the Morality Act, or any similar Act, is to remain in force, I think, then, that the Contagious Diseases Act should

contain a clause to the effect that nothing done under the Contagious Diseases Act, nor any information given or required to be given under the provisions of this (the Contagious Diseases) Act, shall render any person liable to proceedings under "The Betting Houses, Gaming Houses and Brothels Suppression Act, 1902," nor shall be used in evidence against any person against whom proceedings are instituted under the last-mentioned Act.

(4) Section 24 of Part I. of the Act, which provides that no female shall be detained in Hospital under any one certificate for a longer period of Three months, should be modified so as to enable a certificate to be renewed for a further period not exceeding three months by a Magistrate on sufficient cause being shown by the Medical Inspector. Under the present arrangement, it often happens that a woman has to be discharged from Hospital at the end of three months while she is still uncured and still in an infectious condition. She then remains at large until she is brought up again for examination,—which generally takes some time,—and re-admitted to Hospital on a fresh certificate. Such a system is obviously bad.

(5) It has been suggested to me that a clause might well be included under Part I., requiring any brothel-keeper or person in whose house a prostitute comes to reside should within forty-eight hours report the circumstance to the Medical Inspector of the district. This would be a useful clause, but I am not quite sure how it would work out.

(6) With regard to Part I., I would suggest whether it might not be advantageous, in order to counteract the argument so often brought against the operation of this portion of the Act, namely, that it applies only to one sex and is, therefore, immoral, that a section be introduced making it an offence on the part of any person, whether male or female, who, knowing him or herself to be suffering from contagious venereal disease, infects another person by sexual intercourse, if such person shall not have, before having such intercourse, informed the person with whom he or she has had such intercourse of the fact that he or she was so suffering. I cannot say that I am sanguine that such a clause would be effective in any degree, but its existence would serve to destroy at least one argument now continuously brought against the operation of the Act.

(7) With regard to Part II., very slight amendments are required, but one of these is of much importance. At the present time, while it is competent to require a diseased person to place himself under medical treatment, there is no means by which, if such medical treatment is being ineffectively carried out, to require such person to be treated in Hospital. I would, there-

fore, suggest that a proviso should be added to Section 38 of the Act, empowering the Resident Magistrate, after inquiry,

- (1) Order the detention of the patient in a Hospital until it is made to appear to the Resident Magistrate that the patient is no longer in a contagious condition, or that other satisfactory means of treatment will be provided, and
- (2) Order, if necessary, the transfer of such patient to any other Hospital for detention under like conditions.

(8) Under Section 39, I think it should be competent for the Resident Magistrate to furnish the results of any inquiry made under this section to the Medical Officer of Health for the Colony, if such information is required by him for Public Health purposes.

(9) It would appear desirable that a general Penalty Clause be provided to the Act.

I have, etc.

C. JOHN GREGORY,
Medical Officer of Health for the Colony.

TABLE showing working of Part I. of Contagious Diseases Prevention Act, 1885.

	CAPE TOWN.							WYNGER.						
	1899	1900	1901	1902	1903	1904	1905	1899	1900	1901	1902	1903	1904	1905
No. of Women remaining on Register on 31st December of previous year.	280	174	249	229	188	49	46	21	31	40	41	26	17	11
No. of Women placed on Register.	174	234	279	246	50	69	72	11	9	5	4	20	9	10
No. of Women removed from Register.	280	159	209	287	189	72	47	4	..	1	19	29	15	2
No. of Women examined ..	454	408	528	475	238	118	118	35	40	45	45	30	26	21
European	200	208	282	244	87	60	18	2	..	..	..	..	..	1
Coloured	194	200	246	231	151	58	100	33	40	45	45	30	26	20
Voluntary Submissions ..	454	408	528	475	238	118	118	32	38	45	45	30	26	21
Compulsory Submissions ..	..	..	..	..	..	..	..	3	2	..	..	..	..	..
No. of Women found diseased..	139	129	180	96	31	39	440	5	6	9	2	6	10	4
Proportion of Individuals found to be diseased per centum of women examined	30.6	31.6	34.1	20.2	13.0	25.4	33.8	14.3	15.0	20.0	4.4	20.0	38.5	19.0

*No. of new cases first half of 1905 = 96, and up to the 12th July another 5. No. of women taken off the Register during first half-year only 2, who died, but 40 failed to attend, several of whom have turned up.

†During present half-year 59 admitted and two from Wynberg (these include any re-admissions). At present 32 inmates in Hospital, 11 of whom are Syphilitic. Only one woman is white.

TABLE—continued.

	SIMON'S TOWN.							EAST LONDON.						
	1899	1900	1901	1902	1903	1904	1905	1899	1900	1901	1902	1903	1904	1905
No. of Women remaining on Register on 31st December of previous year.	43	37	40	39	34	37	35	24	23	23	41	43	42	25
No. of Women placed on Register.	5	5	4	7	11	8	12	8	35	31	17	9	6	11
No. of Women removed from Register.	11	2	5	12	8	10	5	9	35	13	15	10	23	2
No. of Women examined ..	48	42	44	46	45	45	47	32	58	54	58	41	33	34
European .. .. .	..	2	2	2	2	2	..	..	3	6	12	1	1	..
Coloured,	48	40	42	44	43	42	47	32	55	48	46	40	32	34
Voluntary Submissions ..	48	38	39	40	38	39	43	32	58	54	58	41	33	34
Compulsory Submissions ..	..	4	5	6	7	6	4	..	..	..	..	..	..	..
No. of Women found diseased..	36	33	28	36	37	23	9	3	17	36	26	19	6	10
Proportion of Individuals found to be diseased per centum of women examined.	75.0	78.6	63.6	78.3	82.2	51.1	19.1	9.4	29.3	66.7	44.8	46.3	18.2	29.4

TABLE—continued.

	KING WILLIAM'S TOWN.							PORT ELIZABETH.						
	1899	1900	1901	1902	1903	1904	1905	1899	1900	1901	1902	1903	1904	1905
No. of Women remaining on Register on 31st December of previous year.	11	20	5	10	6	5	7	92	99	150	112	125	100	81
No. of Women placed on Register.	14	5	17	3	3	10	6	40	78	69	45	9	8	4
No. of Women removed from Register.	5	20	12	7	4	8	9	33	27	107	32	34	21	18
No. of Women examined ..	25	25	22	13	9	15	13	132	177	219	157	134	108	79
European	1	1	..	..	..	1	2	55	84	76	45	21	18	7
Coloured	24	24	22	13	9	14	11	77	93	143	112	113	90	72
Voluntary Submissions ..	25	25	22	13	9	15	..	116	154	181	118	102	78	53
Compulsory Submissions ..	..	..	..	..	..	..	13	16	23	38	39	32	30	26
No. of Women found diseased..	12	10	9	6	4	4	3	57	81	71	64	45	29	46
Proportion of Individuals found to be diseased per centum of women examined.	48.0	40.0	40.9	46.2	44.4	26.7	23.1	43.2	45.8	32.4	40.8	33.6	26.9	58.2

TABLE—continued.

	UITENHAGE.							ALL DISTRICTS.						
	1899	1900	1901	1902	1903	1904	1905	1899	1900	1901	1902	1903	1904	1905
No. of Women remaining on Register on 31st December on previous year.	11	11	13	13	15	15	11	485	395	520	488	437	265	219
No. of Women placed on Register.	2	2	4	2	..	..	..	254	368	409	321	102	110	115
No. of Women removed from Register.	2	..	4	..	..	4	1	344	243	441	372	271	156	84
No. of Women examined ..	13	13	17	15	15	11	9	739	763	920	809	512	356	321
European .. ..	..	..	4	5	5	1	1	318	298	370	308	116	84	29
Coloured	13	13	13	10	10	10	8	421	465	559	501	396	272	292
Voluntary Submissions ..	9	9	13	9	9	7	7	716	730	882	758	467	316	276
Compulsory Submissions ..	4	4	4	6	6	4	2	23	33	47	51	45	40	45
No. of Women found diseased..	10	12	16	12	4	3	..	255	277	331	233	146	105	112
Proportion of Individuals found to be diseased per centum of women examined.	23.1	7.7	5.9	20.0	26.7	27.3	0.0	34.5	36.3	36.0	28.8	28.5	29.5	34.9

NOTE.—Part I. of the C.D.P. Act, 1885, came into force in District of Umtata on 29/3/04. Figures for this centre not included in above Table. Act No. 36 of 1902 (Betting Houses, Gaming Houses and Brothel Suppression Act) promulgated 1/2/02. Proclamation No. 261 of 1902.

NOTE.—Admissions under Part II. have not materially altered. These are not prostitutes.

EXTRACTS from District Surgeons' Reports for 1904 and 1905
as to the prevalence of Syphilis.

Cradock.

Hospital Accommodation for Infectious Disease.—The Contagious Diseases Hospital was closed in 1905 by order of the Government. Syphilis appears to have markedly increased recently, whether as a sequel to the closure, or not, I am unable to say. It does not seem to me possible to undertake the treatment of Syphilitic Natives as out-patients. They are careless about taking medicine, neglect cleanliness, and, worst of all, disregard the District Surgeon's most stringent injunctions as regards the danger of contact.

Segregation, and most stringent segregation, is to my mind the only possible means of stamping out, or even checking the spread of, this disease. On the East Coast, I was informed, that whole tribes of Natives were infected with Syphilis, and it does not need a wise prophet to foresee a similar fate awaiting our Natives even in the near future, while perfunctory and individual treatment is considered sufficient recognition of our duty to the Coloured people in this respect.

My experience, during the last fifteen years, has taught me the uselessness of advising a Native and pointing out to him the danger of infection; he, like his European neighbour, is disposed to consider his own comfort of vastly more importance to himself than the well-being of the rest of the community.

Laingsburg.

There is no hospital accommodation of any sort in the District; and this is a great want, especially for Coloured people, for small operations and the treatment of many cases which at present die for the want of care and nursing.

While syphilis is increasing and spreading so much, each district should be provided with a lock hospital, in which such cases can be confined and treated until they are no longer a danger to the community. For sick paupers also there should be some accommodation available, if only a room, kept for the purpose, in which they can be housed while sick.

There was one death from Enteric Fever, and one directly and one indirectly from Syphilis.

In regard to the last-named disease, I would suggest that the measures now in force are inadequate to cope with its spread, and that, as a rule, in Natives its manifestations are much milder in the primary and secondary forms, and in these forms the disease tends to become quiescent, even without treatment, and is therefore much more insidious and widespread than it is easy to form a correct estimate of, and considering the danger to which the large majority of young children are exposed, owing to their being handled and even kissed by their Coloured nurses, I think it is the duty of those medical men and others who have the safeguarding of the public health to urge upon the Governments of the various South African Colonies the necessity of taking stronger measures for its suppression before it gets too great a hold on the Coloured people and Natives, to say nothing of the farming population, among whom I have reason to believe it is spreading.

From a hygienic point of view, I think the importance of the State control of this disease is only equalled by that of Tuberculosis.

Taungs.

No infectious diseases such as Enteric Fever, Diphtheria or Small-pox. Our one great infectious disease is Syphilis, and I do not find that it is perceptibly on the decrease, on the contrary, my impression is, that since the circumcision of 1904, a small, and that of 1905, a very large one, it is on the increase. So many utterly neglected cases do not now come, people seem to have grasped the fact that they had better seek relief at an earlier period, and this augurs better for the future.

But I have great trouble to get them to come, when they are nearly well, or consider themselves to be so. People marked in my notes, "nearly well," "another month," etc., etc. It is hardly stretching a point to say that probably as many as two hundred of these patients, practically speaking well, fail to report, so that they appear in the Lapsed instead of the Cured column, where their place should properly be. I come across them later on, hear of them from different sources, and know they are well, but the Official column, "cured," cannot be filled in. A good many again, old and indifferent, come once, perhaps twice, and then stop attending, and it is difficult to find them out amongst so many thousands, but a very large number avail themselves of treatment, until, as I have pointed out, they dismiss themselves as cured. With Hospital treatment or some regular supervision, combined with good

diet, most of these people, with some few exceptions, would be much more quickly relieved, as it is, the want of sound nourishment, good meat and herd, seems to me to be a great drawback in treatment, and renders length of time, required for treatment, longer than would otherwise be necessary.

With regard to circumcision carried out, as of course it is, with aseptic instruments, and no surgical cleanliness, it cannot do otherwise than help to spread the disease. There were patients of mine at the last circumcision, 1905, and within the last ten weeks of 1906, I have had cases of secondary disease in persons, who were then circumcised.

There are, of course, other aspects of this Bogwera, social, political and religious, which do not come within my province to write about, whatever my opinions may be on the matter.

Pearston.

There are eight patients on the Contagious Diseases Register, but that number is only a small percentage of the actual number of cases of Syphilis in the District. I think it would be well if all employers of Native labour had their servants examined periodically. I believe this would limit the disease and at the same time would lessen the risk of infection of the employer and his family.

Hopetown.

I regret that the Government decided to close the Contagious Diseases Hospital in November, 1904, which I think was a most retrogressive step. Since then I have had trouble in getting contagious diseases patients to attend regularly for their medicine.

Herbert.

There is no Hospital accommodation of any sort. This fact surely forms a very serious blot on the Douglas escutcheon. What a boon a Cottage Hospital would be to the whole District; one frequently has cases requiring careful nursing and daily personal attention, which it is hopeless to think of getting without such an institution. Then the absence of a Contagious Diseases Hospital is a terrible thing, in face of the fact that Douglas is in the centre of so many thousands of Natives, and the Location Inspector informs me that the huts under his supervision teem with untreated cases in all stages of the disease.

Gordonia.

Again I have to report the total absence of any kind of Hospital accommodation in this village.

This is a very serious matter, and I beg once more to refer to my reports for 1902 and 1903, *re* the urgent necessity for a Lock Hospital in Upington if the working of the Contagious Diseases Act is to be bettered in this District.

Contagious Diseases apart, it has often fallen to the District Surgeon's lot to have to perform the most serious operations on pauper patients in a hired hut or a hastily-erected, draughty tent, sometimes with very bad effects on the patient. *Hospital accommodation of all kinds is urgently required.*

Clanwilliam.

None. The only Hospital is that under the Contagious Diseases Act, and does a useful work in limiting the spread of Syphilis. As a result of its operation, the village of Clanwilliam is now, as far as I know, quite free from disease. Lambert's Bay at present supplying all the cases. I have here to thank the Police for the excellent manner in which they have co-operated with me in my efforts to stamp out the disease.

Caledon.

There is no hospital accommodation for the isolation and treatment of infectious disease in the district. We had an apology for a hospital in the way of a lazaretto for syphilitics, but owing to retrenchment it was thought fit to dispense with the patients—a great pity—as now there are a goodly number of syphilitic patients scattered throughout the district spreading the disease, notwithstanding the home treatment.

Bizana

In 1904 twenty-seven cases of Syphilis were treated under the Contagious Diseases Act, of whom seven were released from treatment as cured; two (children) died and one absconded to Johannesburg uncured. There is a great need for a small Hospital for these people. All stay at home, and I fear that much of the medicine supplied is not used effectively. I think the most of these people are grateful for what is done for them, and on the whole appear with regularity at the appointed time. Some have to come a very long way, which, in bad weather, is an undoubted hardship, to which an Hospital would put an end.

In 1905 nineteen were treated under the Contagious Diseases Act, of whom nine were released cured, two removed from the District uncured, and one (an infant) died. Undoubtedly these figures do not represent anything like the degree of the prevalence of the disease. If Headmen knew that the disease was one which required to be dealt with and reported cases, many more would be known, as certain affected persons, men especially, must, owing to the customs of the people, sow the disease broadcast. One case came under my notice, where it was reported to me that a Syphilitic man, unable to gratify his lusts in his own neighbourhood, owing to the women getting knowledge of his state, went far away to the sea-side where he was unknown, there to continue his abominable ways. Both of his wives and two of his children were on the Government list of patients. Of this man it was stated amongst his tribe that had the Government not been in possession of the country he would have been a dead man.

Willowmore.

I had one case of Scurvy in the gaol, the prisoner was removed to another station. There is nothing further calling for comment, except that since the closure of the Contagious Diseases Hospital, no cases of Syphilis have been treated, the patients discharged, uncured, have been lost sight of, they do not come for examination or medicine.

Victoria West.

The Native Location requires careful supervision. There has been no outbreak of infectious disease. Syphilis is, however, very prevalent, and I consider it necessary that provision for treatment of the secondary phase of the disease should be made in the Hospital.

Indwe.

The Municipal Location is kept fairly clean, and good order, as a rule, prevails, the general health of the Natives during the two years has been good, but Syphilis and Phthisis seem to be spreading.

Whittlesea.

Syphilis.—Nothing has been done by the District Surgeon. The Resident Magistrate suggested that the syphilitics should be sent by the Field-cornets and Cape Police to the gaol as a rendezvous on a fixed date in each month. This is a feasible plan. Unless these cases, or suspected cases, are unearthed by Field-cornets, Cape Police, or Headmen, and made aware that treatment can be obtained gratis, no really effective results can be obtained.

Britstown.

In a former report I advocated the treatment of Natives suffering from Syphilis in Hospital only, where they could be kept under proper supervision, and for some years up to the end of 1904 I practically treated all Natives in Hospital with most gratifying results. Now, however, since the closing of the Contagious Diseases Hospital, I find that half the cases treated outdoor lapse from under treatment, many of them still suffering from the disease in an infectious stage. Of thirty-one cases so treated during 1905 fifteen lapsed from under treatment.

Barkly West.

The Contagious Diseases Hospital was not closed down, but was kept open for Syphilis in a primary stage, which condition is hardly ever seen in Natives, and one case has been admitted during the past eighteen months, and the building is rapidly falling into decay. I believe this to be a mistake, as no doubt hereditary syphilis is contagious, and on this account crops of cases are free about the district, there being very little control over their movements. I have visited the various Native Locations every quarter and have distributed iodide of potassium to such cases that have been found, and with very good results. I have also left drugs with the Inspector of Natives, who has dispensed them when required. There are about sixty-five cases scattered about, comprising several European families who have contracted the disease through Native servants.

Ladismith.

I regret to report that Syphilis, through the stoppage of free treatment of Coloured people, is increasing in the District. In the course of my practice I have come across some white families where the mothers and children have been infected by Coloured servants, and I have also frequently seen Coloured people, suffering from active Syphilis, in domestic service.

Coloured people cannot, and will not pay for continuous treatment, and so the disease is allowed to develop unchecked, and in a few years Coloured servants will be a decided danger in the home.

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