The Uncertain Future of White Supremacy and the Politics of Fertility in South Africa, 1930-1939

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"The trouble with birth control was that the wrong people were using it. The people who could provide the best stock were limiting their families...while the people overbreeding and producing an excess of inferior children were the very people, such as drunkards and 'poor whites,' whom it was practically impossible to induce to use contraceptives..."

- Letter to the Cape Times, 1930

"Some of us...feel that we are going to have the greatest difficulty in upholding our white civilization in this country, and this is a point upon which we must concentrate if we are going to pull through."

- Leila Reitz, first woman Member of Parliament, 1934¹

"There was the problem of the Native population. A white healthy life is of great value in this country."

- Leila Reitz, speaking at a conference organized by the national birth-control coalition, the South African National Council for Maternal and Family Welfare, 1936^2

At the beginning of the 1930s South African elites were anxious about the stability of the social order and their privileged position within it. They had good reason to be. Poor and working-class blacks and whites had engaged in unruly acts of resistance to their harsh living and working conditions since the beginning of the mineral revolution in the last third of the nineteenth century. Their actions had long undermined privileged whites' sense of control over their society. But the economic devastation wrought by the Great Depression (1929-32) intensely compounded the extent of poverty and resistance on the part of workers and the destitute, as well as middle-class whites' sense of insecurity.

In these years of intense social disruption, upheaval, conflict, and uncertainty, South Africans of all colours and classes were anxious about their future. Among the tiny minority of elites - comprised of Anglophone and Afrikaansspeaking professionals working in medicine, education, journalism, academia, religion and civil service; politicians; and the almost exclusively Anglophone urban manufacturing, mining and commercial capitalists - anxiety took many forms. Not least of these was intense concern about the pace of population growth among subordinate and undesirable social groups. Ultimately, nervousness regarding the future of "European civilization," the popular term of the day for white minority rule, sparked a movement dedicated to opening birth-control clinics.

This paper shows how the Depression and its immediate aftermath set the stage for the formation of a birth-control movement -- a social movement that in turn was intimately implicated in the nation's highly contested debates about race, ethnicity, class and, last but certainly not least, gender. In particular it probes how white concern for the survival of South Africa's social order inflected, energized and influenced the politics of fertility during the 1930s. The paper is part of a larger study that is the first historical examination of the history of the birth-control movement in South Africa. Until now, critical scholars have focused primarily on the National Party's (1948-1990) nefarious population-control policies and practices of the 1970s and 1980s that were intended to buttress apartheid. They showed how white anxiety over the growing population of Africans in absolute as well as relative terms was intensifying; whites feared the increasingly militant poverty-stricken and disenfranchised Africans who were beginning to evince interest in Communism. Exacerbated by intensifying preoccupations in the West with global population growth, this fear led to official sponsorship of studies in African fertility rates and patterns of contraceptive use. Then in 1974 the Ministry of Health established the Family Planning Programme in order to distribute free contraceptives among Africans while simultaneously neglecting their basic health needs. 5 State and medical coercion of African women also occurred: women

were threatened with job loss if they refused injections of the contraceptive Depo Provera; they were also inserted with intra-uterine devices, surgically sterilized by doctors performing caesarian sections, and injected with Depo Provera, all without their knowledge or informed consent.8

These were politically motivated acts aimed at containing black population growth in the interests of maintaining white minority rule. In 1997 the Ministry of Health admitted this to the South African Truth and Reconciliation Commission, established to ascertain the extent of human rights abuses perpetrated under apartheid: a ministry representative stated that family planning services were "directed at controlling the size of the black population." Conversely and at the same time as the state and members of the medical profession were taking steps to curb black fertility, officials exhorted whites (through incentives such as tax breaks for married couples who had numerous children) to increase their birth rate. In 1960, the Minister of Bantu Administration and Development urged every married white woman to have a baby in celebration of the founding of the Republic. 10 The central government also instituted a white-preferential immigration policy.

In contrast to these recent events, almost no attention has been paid to the formation of the birth-control movement and initial delivery of contraceptive services, which is truly striking when compared to scholarship elsewhere. This is in part a reflection of the relatively weak impact of

feminism on South African society and academy. In the early 1970s, a resurgent and powerful women's movement in Britain, Europe and North America created intellectual and institutional space for the recovery of women's history and the development of gender studies. One result has been the rich, sophisticated historiography on sexual and fertility practices (contraception, abortion, midwifery, illicit sexual behaviors, etc.) and social movements in these contexts. 12 But in South Africa, women have always been far too divided by race, class, and ethnicity for any broadbased women's movement to develop. 13 (Indeed, many African women across the continent working to improve women's status and social conditions, angry and alienated by white women's - including self-identified feminists'14 - complicity in the disenfranchisement and exploitation of African peoples, have rejected the term "feminist." 15) Consequently, the South African academy was relatively untouched by feminism, and research into women's past public and private lives, including their experiences in the realm of fertility control, is relatively undeveloped.16

Among feminist scholars who did produce women's history beginning in the late 1970s, many emerged out of a Marxist tradition that long opposed the National Party. Their concerns and theoretical approach were shaped within an analytical framework that placed primary importance on the roles and relationship of the state and capital in the formation and dynamics of modern South Africa. As with

Marxists, feminists were writing in an era of enormous repression when the state appeared to be monolithic, and therefore they were especially attuned to its role in creating and reinforcing women's subordination. Thus the scholarly focus on women's oppression by the state has meant that extra-state (voluntary) organizations which had an ambiguous impact on women, such as the birth-control movement, have been overlooked.

Moreover, among scholars who concentrated on women's history (mainly white, English-speaking academics), most felt morally impelled to write about African women and their oppression and resistance. 18 Indeed, for all historians opposed to apartheid there was a natural tendency to avoid writing white social history: blacks, not whites, were in need of whatever support politically-engaged academic research could offer. This has meant that the members of the birth-control movement - mainly middle-class white women and their impact on the original targets of their work -"poor white" women - have largely remained hidden from history. 19 For these and other reasons bound up in South Africa's unique socio-political history, it was a Canadian student, one trained to see the importance of reproductive politics in social history, who asked when and why a birthcontrol movement emerged in South Africa. Sometimes the historical assumptions of a cultural outsider can be fruitfully distinct from local research agendas.

Racism towards blacks and "alarming" race ratios

South Africa was struck extremely hard by the global crisis in capital accumulation of the early 1930s. Agricultural export prices plummeted, the value of livestock products fell by half, wool prices collapsed, total income from industrial manufacturing dropped by 20 percent, and bankruptcies were common. 20 Workers suffered dramatically as a result. Twenty-two percent of white and Coloured men were officially deemed unemployed (statistics do not exist for women's unemployment), and poverty among Africans was endemic and exacerbated by the central state's "civilized labour policy" of replacing black workers with unemployed whites. Government reports even warned of the possibility of "mass starvation" among Africans crowded into desperately poor "Native Reserves." 21 Poverty-stricken blacks and whites were driven into overcrowded slums in the cities where many turned to charity for survival and some joined radical political organizations.

Even before the hard times of the 1930s, there had been an upsurge of African protest and political radicalism in rural and urban South Africa, the consequences of rapid and far-reaching changes to their societies wrought by such epic processes as colonization and the development of the mining industry and capitalist agriculture that inexorably eroded pre-modern African societies and lifeways. African workers in rural areas seriously disrupted production on white-owned farms with strikes, cattle maiming, desertion from white

farms and other forms of protest.²³ And despite attempts to control the flow of Africans into urban centres, the economic collapse of the Native Reserves and oppressive control over African labour tenants on white farms forced growing numbers to flee the countryside for cities.

Meanwhile, in towns and cities throughout the country, many took part in riots, boycotts and anti-pass campaigns. By the early 1940s, the acute housing shortage for urban Africans also led to a series of organized and determined squatter movements. For example, one group attempting to settle on common land outside the Native location of Orlando in 1947 faced violent resistance by police.²⁴ In the eyes of whites by the 1930s, especially whites living in cities, Africans were becoming disturbingly visible and their struggle for political and economic freedoms were increasingly unnerving.

Asians, in particular Indians, also contributed to whites' sense of insecurity. In the mid-nineteenth century, a shortage of labour on Natal sugar plantations (caused by the unwillingness of Africans to work for cash) led to the importation of male and female indentured labourers from India (mainly Hindus from Madras). By the end of the nineteenth century 100,000 Indians lived in Natal. In addition, waves of Muslim Indian traders began arriving in the 1870s and established businesses in Natal, Transvaal and the Orange Free State. Feeling the effects of the competition in trade, whites demanded their removal and voiced concern over the potential "danger" of allowing

Indians to vote. Beginning in 1896, Natal and later

Transvaal passed a series of restrictive laws designed to

end Indian immigration and pressure those already settled to
return from whence they came.

By 1930, white nervousness over black competition in trade, worker resistance, and increasing visibility in the cities soon crystallized in a panic over differential population sizes and fertility rates. Official concern over black population growth dated back at least to 1923. That year the central government's Drought Investigation Committee reported that in the Karoo the white population was on the decline while the number of Africans on Native Reserves was growing rapidly as a result of forced repatriation and a relatively high birth rate. 26 But anxiety intensified in the subsequent decade as the rapid rate of African urbanization greatly amplified whites' sense of numerical insecurity. The urban influx that began in the 1920s severely undermined the state's attempt to segregate Africans and whites, and by the 1930s the urban African population was a serious political problem. In 1929, the socalled "Black Peril" national election reflected and fostered the white minority's fear of Africans; by then it had become common parlance to claim that blacks were "swamping" whites with their numbers. (A decade later, during World War II, efforts to block African access to the cities collapsed altogether as wartime industrial expansion and a concomitant severe shortage of skilled workers led to

sharp demands for labour and spectacular growth in the employment of Africans: 134,000 African men entered the industrial sector between 1939 and 1946.²⁷)

To anxious observers in the 1930s, blacks, always the large majority of inhabitants in South Africa, appeared to be rapidly widening their lead over whites in what the latter perceived as a demographic race. This was declared a serious threat to white rule. In 1937 a Member of Parliament pointed out the gravity of the situation for whites who were increasing at the slowest rate in relation to Africans, "Coloureds" and Asians. He cited the population statistics shown below in Table 1.1.

Table 1.1. Population Size and Rate of Growth in South Africa, by Race, 1921 to 1936

Year	Europeans	Bantus	Coloureds	<u> Asiatics</u>
1921	1,519,488	4,697,813	545,548	165,731
1936	2,003,512	6,597,241	767,984	219,928
% Increa	ise 31.85	40.43	40.77	32.7

Source: Debates of the House of Assembly, Vol. 29 (8 March-16 April 1937), 1 April, 4042.

As he pointed out, the figures indicated that while the white race was growing, it was doing so at a far slower pace than blacks.

Making matters worse in the minds of already anxious whites was troubling news that the white birth rate was

dropping. In 1931, in a move that signaled growing concern about the implications of current population trends for future race ratios, the Union government released statistics showing that the overall European birth rate had been falling relentlessly during the previous two decades (see Table 1.2).

Table 1.2. Rate of Natural Increase Among "Europeans" in the Union, per 1,000 of Population, 1936

	PCI I/000 OI IO	Paracron, 1990	
<u>Year</u>	Birth rate	Death rate	Natural Increase
1911	32.2	10.4	21.8
1912	32.2	10.3	21.9
1913	31.7	10.3	21.4
1914	30.2	9.5	20.7
1915	29.3	10.3	19.0
1916	29.3	10.2	19.1
1917	29.0	10.3	18.7
1918	28.6	17.2	11.4
1919	26.9	11.9	15.0
1920	29.0	11.1	17.9
1921	28.4	10.4	18.0
1922	27.5	9.5	18.0
1923	26.7	9.8	16.9
1924	26.3	9.6	16.7
1925	26.5	9.4	17.1
1926	26.2	9.6	16.6
1927	25.9	9.7	16.2
1928	25.8	10.2	15.6
1929	26.1	9.5	16.6
1930	26.4	9.7	16.7
1931	25.4	9.4	16.0
1932	24.2	10.0	14.2
1933	23.5	9.3	14.2
1934	23.4	9.7	13.7
1935	24.5	10.6	13.9

Source: Annual Report of the Department of Public Health, (Pretoria: Union of South Africa), 1936, 16.

Alarmist commentators, pointing to these numbers, went so far as to claim that whites were "depopulating" - dying out - as a result.

A few years later the Annual Report of the Department of Public Health (DPH) stated that the European birth rate had fallen precipitously to an all-time recorded low. The Department did point out that "European" (white) South Africans still had a relatively high birth rate in comparison to western European countries; however, this was small comfort, the report continued, because birth rates in those contexts were so low that Europeans "face[d] the threat of extinction." The next year, the DPH called the worldwide decline in European population growth one of the most serious social problems of the day.

An additional cause for concern was the high incidence of white infantile mortality. In 1932 the rate of mortality per 1,000 live births was 68.51 - much higher than in other "civilized" (white-ruled) countries and almost double the figures for New Zealand, as repeatedly pointed out by politicians (see Table 1.3). (African infantile mortality was much higher: in 1943, for example, among Africans in Alexandra Township the infantile death rate was estimated at 380 per 1,000 births.³⁰)

Table 1.3. National European Infantile Mortality Rate per 1,000 Births, 1919-1936

Year	Death-rate per 1,000 Births
1919	81.81
1920	90.07
1921	77.09
1922	72.91
1923	74.42
1924	73.73
1925	68.39
1926	64.82
1927	70.63
1928	70.49
1929	64.22
1930	66.84
1931	63.07
1932	68.57
1933	61.01
1934	60.79
1935	62.81
1936	59.06

Source: Annual Report of the Department of Public Health, 1937, 72.

Politicians exploited these numbers by noting that a relatively small white race with a high death rate among its infants would find it extremely difficult to maintain its rule over far larger subject races.

The high rate of white maternal mortality was yet another source of worry. Between 1921 and 1928, the rate of white maternal mortality was an average of 5 per 1,000 live births.³¹ It climbed to 5.99 in 1934, amongst the highest

recorded worldwide. 32 By comparison, between 1930 and 1934 the maternal mortality rate was relatively low in the Netherlands (3.15) and Scandinavia (e.g., 3.74 in Denmark); in New Zealand it was 4.62; in Australia 5.45; and in England and Wales, a common reference for South Africans, it was 4.3.33 As had long been realized in South Africa, the main cause of the high incidence of death associated with pregnancy and childbirth was a shortage of medical and midwifery services for women in rural areas and for poor women in urban areas. 34 Poor rural women who faced a particularly high risk of maternal mortality: frequent pregnancy and childbearing in conditions of isolation and poverty forced them to give birth alone or else utilize untrained birth attendants. 35 By the 1930s white maternal mortality had become increasingly visible and politicized. The problem was raised in Parliament by an opposition member who suggested to the Minister for Public Health, DF Malan, that the government strike a commission to investigate the matter. By the early 1930s the issue demanded careful attention. The political prominence accorded to white maternal mortality was a symptom of whites' sense of racial vulnerability. It was also a sign of the growing importance of the poor white problem (see below).

Leading politicians deplored South Africa's race ratios, the statistics on white health, and the future these numbers appeared to predict. Malan reflected and reinforced a sense of crisis regarding the demographic situation

numerous times during the 1930s when Leader of the Opposition with provocative speeches in Parliament. In 1937 he proclaimed: "We notice in all countries in the world...that the process of propagation of the different peoples has been tremendously impeded, in other words, that the birthrate is dropping tremendously...and the most serious thing that we notice about the matter is that the rate is dropping just with those people that are most highly developed, just with the people who were the creators and exponents of European civilisation. This is an extremely serious phenomenon." 36 Another Member of Parliament called for legislation requiring a minimum of five children per white couple and the imposition of a tax on unmarried men to compel them to marry and start a family. 37 Still another made the following alarmist population projections and plea for government action regarding the low white birth rate:

There is another point which I hope the Government will give serious attention to. It is a problem which is vexing many parts of the world and especially in South Africa, I refer to the growing difference between our European and Non-European population...At the same rate of increase in 15 years we will have about 2,650,000 Europeans, 9,300,000 Bantu, 290,000 Asiatics and 1,100,000 Coloured, making a total of 13,340,000 and in 30 years, only one generation, we shall have about 3,500,000 Europeans, 13,000,000 Bantu, 385,000 Asiatics

and 1,550,000 Coloured. I think for this country that is a very serious matter and we have to consider the best means of overcoming it, whether by wholesale immigration of selected immigrants or in some other way. In my view we have too many motor cars and garages and too few children and nurseries. I hope that this matter will engage the serious attention of the Government.

The "Poor White Problem"

Whites worried about the future of "civilization" in South Africa found not just the quantity of whites wanting; they also questioned their quality. Members of the middle classes became increasingly convinced that inferior whites were proliferating, and to such an extent as to constitute a threat to white racial fitness and thus to white supremacy itself. According to commentators, a weak European race that was also numerically insignificant in relation to the dominated majority would have difficulty maintaining power. The source of their anxiety was the "poor whites."

"Poor whites" was the official term for a social group that emerged in South Africa during the uneven development of capitalism. They were mostly Afrikaans-speaking descendants of the *voortrekker* (pioneer) Boers who, starting in the 1830s, migrated northwards from the Cape Colony into the sub-continent where most subsisted as *trekboere*

(itinerant pastoralists), as bywoners (squatters and tenant labourers), or else as small-scale farmers. Following the mineral revolution, the capacity of many Boers to maintain their rural way of life was severely undermined. The development of capitalist agriculture by landowners keen to supply the new urban centres and overseas markets limited trekboere and bywoner access to land as land prices rose and owners fenced their properties. By the turn of the century, the devastation of the Anglo-Boer War, the Boers' Roman-Dutch law of inheritance requiring equal division of land among male heirs, and recurrent droughts and agricultural crises in the 1880s, 1900s and 1920s further loosened their marginal hold on land. 40 Consequently, a steady stream of impoverished Boers in search of livelihoods flowed from the countryside into urban centres where they became a highly visible underclass concentrated in mixed-race slums. Unable to compete in the burgeoning industrial economy with European immigrants in terms of education and skills, and unwilling to compete with Africans for low-paid manual labour - what they called "kaffir" work - they were a fractured group comprising self-employed petty commodity producers (e.g., brick-makers) and casual service-providers, as well as the "truly destitute." ⁴¹ By 1930 as many as 400,000 whites (in a total white population of just over two million) were living in destitution. 42 In official as well as popular circles, they became known simply as "the poor whites, " or the "poor white problem."

Poor whites had always been a troubling phenomenon but with the onset of the Depression, which caused a dramatic increase in the extent of urban white poverty, this population became a widespread social problem of crisis proportions. Professionals, businessmen, local and national politicians, social welfare reformers, and other educated, privileged members of the middle classes perceived poor whites as a threat to the social order in a variety of ways. Some feared they were potential recruits for communists intent on forging a cross-race alliance among the poor. Others accused them of dissolving the porous colour line through fraternization, cohabitation and miscegenation with blacks also residing in the slums, leading to cries for urban segregation. A Dutch Reformed Church (DRC) minister from the northern Cape, for example, reported that extreme poverty was eroding the colour barrier: "Some of our people live in the bushes [where]...there is the danger that a fraternisation may begin amongst some of our sinking countrymen. We have witnessed cases where our whites knocked at the doors of natives while on the road, to ask for food (and rest)..." An influential inquiry into the causes and solutions to "poor whiteism" in the early 1930s also anxiously highlighted the race-leveling effect of poverty: "Long-continual economic equality of 'poor whites' and the great mass of non-Europeans, and propinquity of their dwellings, tend to bring them to social equality. This impairs the tradition which counteracts miscegenation, and

the social line of colour division is noticeably weakening." 44

Still others feared that poor whites would drag down the health and vitality of the white race to a dangerous degree. This reflected a common assumption among Anglophones and Afrikaners alike that poor whites were physically and mentally inferior. For evidence they pointed to studies of the day that reported alarming statistics, such as the large proportion of "defective" white children - reportedly as much as 65 percent of the student population in the Orange Free State - and the high rate of rejection of military recruits (26 percent). 45 Most whites believed that poor whites' ill-health and indigency were socially constructed, but a small, determined group of professionals promulgated a biological determinist (eugenist), rather than environmental, explanation. Eugenists from both white ethnic groups were a small but vocal group of proponents of a biological interpretation of poor whiteism. Leading eugenists included prominent figures such as Herbert Fantham, the British biology professor at Witwatersrand University and founder of the Race Welfare Society, and the moderate Afrikaner nationalist E.G. Malherbe who was also a prominent academic. Both men called for restrictions to be placed on the fertility of inherently "inferior" poor whites in the name of preserving white civilization.

Uncertainty about white racial vitality crystallized into a discourse of national decline during the 1930s.

Indeed, some politicians believed the country had already fallen from an A.1 (first class) to a C.3 (third class) nation and spoke of an eclipse in national status as though it were common knowledge. One anxious Member of Parliament declared, "[w]e want to make the South African nation an A.1 nation. We do not want a C.3 nation here, and the only way to get an A.1 nation is to have a healthy population..." While new knowledge about deteriorating African health was a source of concern about the nation's vitality, many blamed the drop in global status specifically on the proliferation of low-quality poor whites. Teila Reitz, the first woman elected a Member of Parliament, bluntly spoke to the prevalent feeling that inferior poor whites posed a threat to the very survival of white civilization:

We all know that the problem always at the back of the minds of everyone in this country is how to maintain...our white civilization. Some look at the problem from the liberal point of view, and others look at it from the repressive point of view, but our aims are the same: to protect our white civilization and to give our white children that quality that will make them, shall I say, the aristocrats of this country. If we do not remain the aristocrats of this country our white civilization is doomed. This country is especially interested not only in the quantity of the children that will grow up, but also in their quality.

We are vitally interested in the quality. We know perfectly well that the children of our poor lack vital energy...and without that they will sink below the level at which they can keep themselves apart as a separate race.⁴⁹

Overall, the prevalence of whites so obviously failing to thrive in modern South Africa was disconcerting for their social betters. The slums in which poor whites lived, as with slums elsewhere in the industrializing world, signified social disorder to a middle-class culture whose faith in progress was vulnerable. 50 In other words, poor whites were a disturbing sign that the white race was not coping well in the context of a modernizing economy. As such they both reflected and fostered a general sense of unease over the future of the nation. 51

Anxiety over the proliferation of poor whites, like over blacks, manifested in a negative preoccupation with their fertility. Poor-white couples were notorious for having far more children than their middle-class counterparts. Upwards of ten or twelve was not uncommon, and disconcerted observers perceived such large families as both a trait and a cause of poor whiteism. From at least the late 1920s, professionals such as magistrates and doctors from around the country urged the state to control poor-white fertility, and in the 1930s others joined in. But the most important event to draw public and official attention

to poor whites' propensity to produce large families was the Carnegie Commission of Inquiry into the Poor White Problem (1929-1932). The Commission, funded by the Carnegie Corporation of New York, had five members including English-speakers and Afrikaans-speakers. Its mandate was to investigate the causes and solutions to white poverty. The multi-volume report produced by the commissioners was widely read and highly influential, and it included a number of significant references to poor-white fertility.

Three of the Commission's investigators signaled an interest in poor-white fertility. In his volume on education, E.G. Malherbe wrote a chapter entitled "Education, Poverty and Size of Family." 53 The opening sentence declares, "The fact that there are different rates of increase in population at different socio-economic levels of society lies probably at the bottom of most of our social and economic problems." 54 He purported to show that the fertility of the poor was much greater than that of the middle class, the less intelligent section of the population multiplied more rapidly than the more intelligent, and therefore the poor were less intelligent than the middle class. The rapid proliferation of poor whites, he cautioned, would lead inevitably to a drop in the general level of intelligence of the white population, leaving South Africa unable in future to meet the requirements of an industrial economy. 55 Indeed, mentally inferior poor whites already threatened the survival of white supremacy. In order to

prevent the disappearance of South Africa's intellectual assets, he wrote, 'the poor and weaker classes' should restrict their fertility through the practice of contraception. 56

Malherbe's observations on the threat poor whites posed to European civilization were included in two of the Joint Findings and Recommendations of the Carnegie Commission:

- 88. Poor families tend to be markedly larger than more prosperous ones, and the children of the former more often show lack of intelligence (as determined by retardation and poor progress at school). This fact has bearings on the quality of our future European population. More than half of our school children are from poor families, and not only is the development of their intelligence often hampered by unfavourable circumstances, but in some cases there are also chances of the child's heredity being poor.
- 89. If this process is not counteracted and stopped it points to a future possibility of the numbers of the lowest section becoming so large that the burden placed on the shoulders of the more prosperous part of the population...may be too heavy to bear....Education and industry will have to reckon with this in the future. Similar processes are, naturally, also taking place in other countries, but is [sic] deserves special attention in our case, since it affects our relatively

small European population as [the] bearer of European civilization in South Africa (emphasis added). 57

The oblique reference to fertility restriction in the passage was the closest the Carnegie Commission came to endorsing birth control. Possibly the Report avoided the topic of contraception because one of the Commission's investigators, J.R. Albertyn, was a Minister of the conservative DRC, which opposed the practice. Albertyn's volume on the sociology of the poor white problem displayed the church's conservative ideology on questions of marriage, family and morality.⁵⁸

Malherbe presented his research to colleagues at the annual meeting of the South African Association for the Advancement of Science in 1932, and as a result the meeting passed 'by a large majority' a resolution proposed by the eugenist H.B. Fantham (president of the Race Welfare Society), urging the DPH to establish birth-control clinics in rural and urban areas as a means of social reform. This agreement demonstrates that, despite their ethnic differences, there was little separating interpretations of poor whiteism between the relatively sympathetic Malherbe and stringently anti-poor-white campaigners like Fantham. Fantham and Malherbe were two highly educated professionals that subscribed to the same racist ideology: both were committed to maintaining white supremacy, assumed that poor whites were inferior, and believed preserving white

civilization required resolving poor whiteism. Class resentment and racism created a great deal of common ground among Afrikaans- and English-speaking eugenists. The difference between them lay in their proposed solutions.

Malherbe, himself an Afrikaans-speaker, simultaneously subscribed to environmentalist and biological explanations of white poverty, but primarily the former. Therefore, he believed in the possibility of 'uplifting' poor whites through social support programs. Fantham, on the other hand, a British immigrant, was an extreme biological determinist who found such programs an expensive waste of resources.

R.W. Wilcocks, in his study of the psychological dimension of the poor white problem for the Commission, claimed that "immorality" (having children out of wedlock) was more prevalent among indigent Afrikaans-speakers than among upper-class whites. This, he said, was in part because the former group used contraception less frequently than the latter. Wilcocks's statement might have been another tacit endorsement of birth control.⁶⁰

Marie Rothmann (the sole woman commissioner) also demonstrated eugenic anxiety regarding poor-white fertility in her volume "The Mother and Daughter of the Poor Family." Rothmann, an ardent Afrikaner nationalist, repeatedly remarked on the large numbers of children found among poor-white families and the prevalence of people of "subnormal intelligence" among them. She stated that the "propagation of the unfit" was a "very urgent problem," and "the

irresponsible reproduction of children by parents who are quite obviously unfit," was breeding a lazy, stupid and criminal type of poor white. 62 Her concerns were shared among her colleagues in the Afrikaanse Christelike Vroue Vereniging (Afrikaans Christian Women's Union, or ACVV), an Afrikaner nationalist women's welfare organization whose efforts at "uplifting" the *volk* (Afrikaner people/nation) included calling for a reduction in the excessively large size of poor-white families. 63 In 1933, Rothmann wrote a pamphlet, "Irresponsible Parenthood," in which she called for "scientific, ethical and healthy birth control" on eugenic grounds (see Chapter Seven). 64 However, the ACVV placed far less emphasis on curbing poor-white fertility as a means to prevent the production of the "unfit" than on lobbying the central state to develop midwifery and contraceptive services as rehabilitative measures, discussed further in subsequent chapters. 65 Indeed, despite the hereditarian strand in its analysis, the Carnegie Commission's final report as a whole was far more concerned with environmental, especially economic, causes of white poverty than with a biological explanation and recommended social welfare measures for rehabilitation.

The commission's environmental approach reflected the dominant attitude towards the poor-white problem in the 1930s. The racial imperative to rescue poor whites for the sake of the race, which was contending with an increasingly visible and militant black majority; and the political

requirement to transcend the white-ethnic division for Anglophones and moderate Afrikaners, both of whom feared emergent extreme Afrikaner nationalism, 66 led inevitably to the optimistic conclusion that poor whites could, and should, be rescued. Despite poor whites questionable racial value and loyalty, prosperous South Africans needed them to succeed. Therefore, alarmist observations about poor whites were usually accompanied by demands for steps to be taken to "uplift" them. For example, Leila Reitz called on the government in 1934 to improve conditions for poor whites for racist reasons: "And this country in particular, with its native population and its coloured population and its Asiatic population, can least of all afford to disregard the conditions under which its white people live."

Nervousness about the poor white problem was strikingly similar to the anxiety produced by American "poor whites," or "poor white trash," common names for the poverty-stricken population of landless whites that emerged in the United States in the nineteenth century. Before the American Civil War, poor non-slaveholders comprised 30 to 50 percent of whites and many, like their South African counterparts, subsisted as farm labourers and sharecroppers. American poor whites also constituted a "troubling presence" in a society where racists (pro-slavery advocates) equated white skin with respectability and black skin with manual labour. There, too, poor whites' personal, often co-operative, sometimes intimate interactions with blacks (slaves) raised

doubts about their racial loyalty. In an observation that could equally apply to South Africa, Charles Bolton writes that American poor whites undermined southern desires to create a society "in which economic and social levels divided neatly along colour lines." Resentment in both national contexts was transposed into a negative cultural stereotype of a rural, illiterate, superstitious, lazy, shiftless, irresponsible, and fecund public nuisance who voluntarily chose to live life contrary to respectable society. Yet, at the same time, the need to maintain white supremacy in both countries rendered poor whites' less of a threat than blacks.

As historians have shown, the churches, state, and other institutions did attempt to rehabilitate poor whites. Relief schemes implemented first by the DRC and eventually by the central state were explicitly intended to raise the living standard of poor whites above that of poverty-stricken blacks in a bid to avert a cross-race alliance and make certain that they upheld a sense of "civilized" whiteness. As early as 1893, the DRC, which comprised the three white Afrikaans-speaking churches, adopted the cause of the destitute members of the volk by establishing labour colonies in order to draw them out of Babylon and "back to the land." (In the process, the DRC became a broad-based church that claimed a membership of about four-fifths of the Boer population.)

State recognition of the poor white problem also began in the late nineteenth century. In hopes of uplifting poor whites and capturing their allegiance, successive governments from Union onward implemented redistributive social welfare programs. 74 After the Afrikaner National Party (NP) assumed power in 1924 with the support of the South African (whites-only) Labour Party, the central state redoubled its efforts in this direction. Government introduced the "civilized labour policy," a series of laws aimed at returning poor whites to the land, providing others with a "firm-footing" in the cities, and generally ensuring that they attained a "civilized" (white) standard of living. Indeed, the Union Department of Labour was created in 1924 with the explicit object of finding work for indigent whites. 75 Relief measures abounded, including, as one example, preferential employment in government-funded sectors like the railway system that entailed replacing blacks with unemployed whites. 76 Appalled by African poverty and starvation on the collapsing Native Reserves, liberal historian William Macmillan angrily commented in 1930: "Gestures from the Government of white masters show...that they have chosen this of all moments to decide that poor whites in particular must be protected against the 'Native menace.'"

However, such measures were ineffective. Whatever government tried to do was severely constrained by orthodox economic thinking concerning the limited role of the state

and strongly held views that charity should be a private, not a public, matter. This limitation was evident, for example, in the policies governing official aid projects that imposed stringent financial control and moral strictures on the poor whites gathered into rural settlements for re-education and moral improvement. Most significantly, continued economic hardship, exacerbated by the Great Depression, drastically accelerated the process of poor whiteism in the late 1920s and early 1930s as small-scale farmers were wrenched from the land in ever-greater numbers.

Conclusion

By the 1930s Afrikaans-speaking and Anglophone elites politicians, leaders within the DRC, academics, members of
the medical and legal professions and those in their
cultural milieu - were worried about their nation's
survival. They felt under siege on two fronts: blacks were
widening their demographic lead over whites, and poor whites
were threatening the race from within. Of the two intimately
articulated social problems only one appeared amenable.
Curbing black population growth was never considered, and
the relatively small size of the white population was
clearly an intractable source of vulnerability. But the
quality of whites could and must be improved. This required
resolving the poor white problem. To some, the very survival
of South Africa depended upon it. And it was the desire to

do so that persuaded a small but determined group of whites to take up the banner for birth control.

In 1930, birth-control advocacy groups formed in the two largest cities, Johannesburg and Cape Town, and in subsequent years groups formed in other urban centres around the country. Between 1932 and 1936 these independent organizations established private birth-control clinics in urban communities throughout the country that served thousands of poor women - mostly, though not exclusively, poor white women. Then in 1935 five organizations located in the Transvaal, the Cape, and Natal came together to form the South African National Council for Birth Control (renamed the South African National Council for Maternal and Family Welfare the following year), a development that reflected the birth-control movement's growing confidence and social legitimacy. Within another three years the Union Department of Health was providing substantial funds to support the national council (£1000 per year), especially efforts to expand contraceptive services to poor-white women in rural areas. In a mere ten years, the birthcontrol movement, hand-in-glove with the Department of Public Health, had brought about a shift in popular and official perceptions of birth control from a marginal,

shameful topic to an intensely contested, widely debated, and ultimately respectable matter of public health policy.

Endnotes

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²⁹ Ibid., 1937, 29.

- ³³ Irvine Loudon, "Some International Features of Maternal Mortality, 1880-1950," in V. Fildes, L. Marks and H. Marland eds., Women and Children First: International Maternal and Infant Welfare 1870-1945 (London and New York, 1992), 12.
- ³⁴ Debates of the House of Assembly, (17 Jan. to 4 Apr. 1930), 77; Annual Report of the Department of Public Health, Year Ended June 30, 1938, 57-9.
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- 36 Debates of the House of Assembly, (8 March-16 April 1937), 19 March, 3524-5.

²⁶Davenport, South Africa, 546.

²⁷O'Meara, *Volkskapitalisme*, 24.

Annual Report of the Department of Public Health, (Pretoria: Union of South Africa), 1936, 16.

 $^{^{30}}$ Debates of the House of Assembly, Vols. 45 and 46 (16 January-27 April 1943), 31 March, 4403.

Debates of the House of Assembly, (17 Jan. to 4 Apr. 1930), 77.

³² Annual Report of the Department of Public Health, Year Ended June 30, 1935, 57.

³⁷Ibid., 3547.

³⁸In 1937 the "Purified" National Party, comprised of extreme Afrikaner nationalists, won an amendment to the Aliens Bill banning the immigration of Jews and other "races" who "cannot be readily assimilated" and overturning the recognition of Yiddish as a European language.

 $^{^{39}}Debates$ of the House of Assembly, (8 March-16 April 1937), 1 April, 4042.

⁴⁰ See the collection of essays in White But Poor: Essays on the History of the Poor Whites in Southern Africa, 1880-1940, ed. Robert Morrell (Pretoria: University of South Africa, 1992); Timothy Keegan, Racial Transformation in Industrializing South Africa: The Southern Highveld to 1914 (Basingstoke: Macmillan, 1987); O'Meara, Volkskapitalisme;

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- ⁵⁴ Ibid., 212.
- ⁵⁵ Ibid., 212-25.
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