The South African War as humanitarian crisis

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Abstract
Although the South African War was a colonial war, it aroused great interest abroad as a test of international morality. Both the Boer republics were signatories to the Geneva Convention of 1864, as was Britain, but the resources of these small countries were limited, for their populations were small and, before the discovery of gold in 1884, government revenues were trifling. It was some time before they could put even the most rudimentary organization in place. In Europe, public support from pro-Boers enabled National Red Cross Societies from such countries as the Netherlands, France, Germany, Russia and Belgium to send ambulances and medical aid to the Boers. The British military spurned such aid, but the tide of public opinion and the hospitals that the aid provided laid the foundations for similar voluntary aid in the First World War. Until the fall of Pretoria in June 1900, the war had taken the conventional course of pitched battles and sieges. Although the capitals of both the Boer republics had fallen to the British by June 1900, the Boer leaders decided to continue the conflict. The Boer military system, based on locally recruited, compulsory commando service, was ideally suited to guerrilla warfare, and it was another two years before the Boers finally surrendered. During this period of conflict, about 30,000 farms were burnt and the country was reduced to a wasteland. Women and children, black and white, were installed in camps which were initially ill-conceived and badly managed, giving rise to high mortality, especially of the children. As the scandal of the camps became known, European humanitarian aid shifted to the provision of comforts for women and children. While the more formal aid organizations, initiated by men, preferred to raise funds for post-war reconstruction, charitable relief for the camps was often
provided by informal women’s organizations. These ranged from church groups to personal friends of the Boers, to women who wished to be associated with the work of their menfolk.

**Keywords:** South African War, Anglo-Boer War, Red Cross, humanitarian aid, concentration camps.

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**Introduction**

Although the South African War¹ could be described as a “small” war, involving a limited number of combatants in a fairly remote colonial outpost, it raised questions about the conduct of war and the treatment of combatants and civilians that were to recur in the era of total war that followed in 1914 with the First World War. Many elements of the South African conflict had already emerged in the course of the nineteenth century. In the Crimean War (1853–56), journalists, using the telegraph, enabled the public to follow events closely in cheaper mass-produced newspapers. As a result, public opinion became a more important factor in responses to war, especially in democracies like Great Britain. The American Civil War (1861–65) saw terrible devastation of the land during Sherman’s march to Atlanta, and the dreadful suffering of soldiers in such prisoner-of-war camps as Andersonville, foreshadowing the misery of twentieth-century “total” war. The swift victory of the Germans in the Franco-Prussian War of 1870 did much to transform European military bureaucracy, including that of Britain, contributing to a harsher military culture in which warfare against civilians sometimes became part of military strategy. The American academic Isabel Hull describes this as “institutional extremism”, when “necessary-seeming routines” led the military to gravitate towards final or total solutions. Similarly, Jonathan Hyslop has pointed to the importance of the emergence of the professional army, with “instrumental rationality as a core value”.² Two examples in colonial conflict were the Spanish–American war of 1896 (the Cuban War of Independence), when General Weyler cleared the countryside of civilians so ruthlessly that well over 150,000 women and children died, and the Philippine–American War in 1899, where the concentration of civilians in camps led to an even greater number of deaths.³

Many of these features coalesced in the South African War and were to be still more fully realized in the strategies of total war in the twentieth century. The South African experience of British officers like General Lord Kitchener and General Sir John Maxwell, with their “scorched earth” policies that deliberately

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¹ This is the preferred term for those who see the war as embracing the larger population of South Africa.


destroyed the land and cleared it of civilians, did nothing to mitigate the ruthlessness with which they conducted war in 1914–18. Conversely, according to his most distinguished biographer, the South African Boer guerrilla leader Jan Christiaan Smuts, who was a member of the British War Cabinet in the First World War, was influenced by the suffering of his own country in the South African War. In the First World War he favoured the negotiated surrender of Germany and, at the Paris Peace Conference of 1919, he worked for reconciliation with Germany and limited reparations. His desire for cooperation between nations to prevent further war also influenced him as a major contributor to the framing of the Covenant of the League of Nations.

The South African War occurred at a time when the European political left was already uneasy about imperial conquest and sympathy for the Boers was widespread, informed by the number of journalists following the conflict. The term “pro-Boer” embraced a disparate range of people, from British liberals and Irish nationalists to a surprisingly broad section of the Russian public. While their governments were never willing to give military aid to the Boer republics, pro-Boers found an outlet for their sympathies either by volunteering to fight or by supporting their National Red Cross Societies and other charitable organizations, many of which sent ambulances, medical staff and equipment to the medically under-resourced Boer republics. The experience that these organizations gained almost certainly expanded their understanding of working in unfamiliar and difficult terrain, with limited support from the governments engaged in conflict.

The British experience was somewhat different. While there was certainly a considerable opposition to the war and its conduct, there was also vigorous public support for the war. At first the British Army was reluctant to accept civilian intervention in the conduct of war in any form. For some time this included professional nurses or humanitarian aid through Britain’s own National Red Cross Society, or any other charitable organization. It was only after the scandal of a serious typhoid epidemic gave rise to public inquiries about the medical welfare of the troops that the military moderated its stance. The Central British Red Cross Committee (CBRCC), formed in 1899, was able to trade on public sympathy and thereby raise considerable sums to establish hospitals for the troops and to coordinate relief efforts in South Africa.

4 In the First World War Kitchener was secretary of State for war, contributing to the decisions that led to the massacre of trench warfare, while Maxwell gained notoriety for ordering the execution of the Irish rebels in the Easter Rising in 1916.

5 Smuts had been attorney-general of the Transvaal and became a formidable commando leader. Later he was to be prime minister of South Africa, a member of the British War Cabinet in both the First and Second World Wars, and one of the founders of the League of Nations. W. Keith Hancock, Smuts, Vol. 1: The Sanguine Years, Cambridge, Cambridge University Press, 1962, p. 128.


7 Central British Red Cross Committee, Report by the Central British Red Cross Committee on Voluntary Organisations in Aid of the Sick and Wounded during the South African War, London, HMSO, 1902;
After June 1900, combat shifted from conventional warfare, with sieges and set battles, to a guerrilla phase. Most of the foreign volunteers returned home, along with their National Societies. The need for humanitarian aid shifted from the troops to civilians – above all to the Boer women and children who were being “concentrated” in internment camps that had been established in haste, poorly conceptualized and badly administered, contributing to considerable mortality. Although there was a great need for such comforts as clothing, the British rejected outside assistance as far as they could. From June 1901, when more information about the camps became available, a public outcry from pro-Boers in Britain and abroad forced the British government to accept some aid, mainly in the form of clothing. Bibles and other comforts. A handful of Quaker and Dutch aid workers were also allowed to enter the camps.8

Assistance did not reach everyone. Although the South African War has been described as a “white man’s war”, this was far from being the case. Black people formed the majority of the population. The impact of white settlement had forced many to adapt to new conditions, and a considerable, if unrecorded, number of black people lived and farmed in the areas of white occupation. Although both sides often denied it, British and Boers used black men in combat and, very widely, for labour. Black families were swept off the land along with the Boers. However, far less provision was made for them, and their fate in the early months of the British invasion is largely unknown until June 1901, when a Native Refugee Department was established and more information was recorded. These families received virtually no humanitarian aid, partly because the plight of black women and children aroused no interest abroad. In this sense, the South African War remained a colonial war in which the plight of the indigenous inhabitants aroused little interest or concern in the imperial nations.9

The South African War: A brief history10

The South African War (also referred to as the Anglo-Boer War) of 1899–1902 was both a conventional war, with set-piece battles and sieges, and a colonial war in


Figure 1. Map of South Africa at the outbreak of the war. B. Nasson, above note 10, p. 34.

which there was a vast discrepancy between the resources of the metropolitan power and those of the colonial insurgents. From 1795, when it had first captured the Cape from the Dutch during the Napoleonic Wars, Britain had dominated the subcontinent. Many of the Dutch settlers, widely known at this stage as Boers (farmers) and later as Afrikaners, rejected this hegemony, trekking further north to escape British rule and establishing the two independent States of the South African Republic\textsuperscript{11} and the Orange Free State (Free State). Between 1834 and 1899 Britain repeatedly tried to reassert its control, only to withdraw after expensive and inconclusive conflict. The last such occasion had occurred when Britain was humiliatingly defeated at the Battle of Majuba on 27 February 1881. The peace that followed gave the Transvaal self-government under British suzerainty, with British control over foreign relations.

The burghers of the Boer republics considered themselves to be members of civilized independent States, not a colonized African peasantry. However, their countries were fragile, with small white populations, little money and somewhat inefficient political structures. Their history, particularly that of the Transvaal, was marked by constant conflict with the black societies on whose lands they had encroached – and with one another, for their independent spirits did not make for easy cooperation.

Origins of the war

Since the impoverished Boer republics had little to offer the Empire before the 1880s, conflict with Britain was the product of local circumstances rather than an imperial desire to expand in southern Africa. By this time the Free State was beginning to establish a relatively competent government, making it the “model republic”, but the South African Republic continued to be inefficient. All this changed in 1884 with the discovery of rich gold deposits on the Witwatersrand (modern-day Johannesburg, in Gauteng). Britons poured into the country to work the mines, considerably altering the demographic distribution of the Transvaal and, over time, giving rise to demands for political rights. These demands ultimately became the official \textit{casus belli}, as the Transvaal president, Paul Kruger, and his government resisted an extension of the franchise to the new arrivals. Underlying these political demands was control of the gold, for this was a world on the gold standard and Britain’s place as the foremost financial power now rested on its access to this rich source.

In the face of these changes, President Kruger remained a wily but ill-educated farmer who was resistant to modernization. However, more sophisticated men were entering government. Amongst them was the young Cambridge-educated attorney-general, Jan Christiaan Smuts, and a coterie of Dutch, who were often disliked by the locals but brought much-needed skills. The most outstanding of these was Willem Johannes Leyds, who was recruited

\textsuperscript{11} Variously known also as the Zuid-Afrikaansche Republiek, the Suid-Afrikaanse Republiek or the Transvaal.
initially as legal adviser but who played a critical role in foreign affairs after he became State secretary. The Transvaal State geologist, Gustav Adolf Frederik Molengraaff, was another man whose influence gave the South African Republic credibility abroad. This tendency of the Transvaal government to bring in advisers from the Netherlands, and the building of the Netherlands South Africa Railway Company line to Portuguese-owned Delagoa Bay, led Britain to view the foreign relations of the Boer republic with alarm, particularly since this new wealth would enable the Transvaal to dominate the subcontinent.12

Debates about the origins of the war continue but, broadly, this was a war for the control of a vital asset, exacerbated by the aggressive imperialism of men like Cecil John Rhodes, prime minister of the Cape Colony and owner of the world’s largest diamond mines. He entered the fray at the end of 1895 by instigating the Jameson Raid, an ill-advised and badly managed incursion into the Transvaal to overthrow the Kruger regime. The fallout from the Raid was considerable. From this point the Free State, which had no quarrel with Britain, supported its compatriot to the north. The Cape Afrikaners, too, were turned from their long-standing loyalty to the empire, with many of them embracing the Transvaal cause. The German Kaiser’s telegram to President Kruger, congratulating him on the capture of the Raiders, contributed to the growing animosity between Britain and the European powers. The South African War, then, was both a local conflict and the product of global tensions, giving it an international significance on a scale that set it apart from most colonial wars.

When war broke out on 12 October 1899, therefore, it engaged not only the Boers from the two republics but Afrikaners from the Cape and Natal as well. Yet, although the Boers were able to rally substantial forces in the beginning, by no means all their men were hotly committed to this fight for freedom. As the war continued, many returned home to bring in the crops and care for their families. Black people were in a particularly invidious position. In seventy years of conflict with the Boers, tribal societies had been reduced in numbers and territory. Still, many retained an ethnic identity and some independence. Although they were drawn into the conflict on occasion, this was not their war. The situation was very different for those who were in the white-dominated areas. Many black people lived and worked on Boer farms, while some farmed independently, profiting from the new markets on the Witwatersrand. When war broke out a number of black men rode to war with their Boer masters as agterryers (military orderlies), leaving their families behind.13 Of those who remained, some disappeared quietly, while others stayed to help with the farm work. The British Army, for its part, wanted black men as labour and, initially, drew largely on men from the Cape. Later on, it used mine labour since the mines had closed down. This was, therefore, far from a “white man’s war”.14

13 There were probably about 9,000 to 11,000 black men on commando. Fransjohan Pretorius, The A to Z of the Anglo-Boer War, Lanham, The Scarecrow Press, 2010, p. 5.
14 P. Warwick, above note 9.
Despite its experience of twenty years before, Britain expected an easy victory, while the Boers, also influenced by the Majuba triumph, and hoping for international support, believed that Britain would come to terms fairly readily. The Boers had been able to import sufficient arms to make them formidable enemies, while the British had failed to make provision for more than a minor colonial war. The result was a series of defeats for Britain, especially during “Black Week” on 10–17 December 1899, when the British lost the battles of Stormberg (in the Eastern Cape), Magersfontein (in the Cape) and Colenso (in Natal). The Boers, however, failed to capitalize on their victories. They tied up their forces in the sieges of Ladysmith, Kimberley and Mafeking, and they did not break through to the Natal coast. Once Britain had thrown in more resources and removed its less efficient generals, the Boers were defeated in the field. The turning point came with the prolonged battle of Paardeberg on 18–27 December 1899, opening the way for the fall of the Orange Free State capital of Bloemfontein in March 1900 and the Transvaal capital, Pretoria, in June 1900. The Boer republics were annexed as the British colonies of the Transvaal and the Orange River Colony. New governments were installed in the erstwhile Boer republics.

**British treatment of the Boers**

At first the British dealt relatively leniently with the defeated Boer men. Provided that they returned home, handed in their weapons and took an oath of neutrality, they were promised protection. The great majority of them returned to their farms. The Boer leadership, however, now shorn of its older and more incompetent generals, took the decision to continue the war. Their reasons for doing so are not entirely clear, for men like Jan Christiaan Smuts and President Marthinus Theunis Steyn of the Orange Free State had studied law in Britain and understood the might of the British Empire. The stubborn desire for independence and the hope of foreign intervention (which never materialized), fuelled by the number of foreign volunteers who had been fighting for them (about 2,000), perhaps drove the decision, despite the fact that European governments had shown no inclination to rally to the Boer cause, for diplomatic considerations dominated their alliances. No country wanted to alienate Britain too much, and many were engaged in their own colonial conflicts. Nevertheless, the hope of such backing encouraged the Boers to continue the war after the fall of Pretoria in June 1900. But the decision was divisive, for by no means all Boer men wanted to fight on – probably at least 20,000 resisted the new call to arms. In making this choice, the Boers also recognized that their women and

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16 This is a subject which has been avoided until recently. Albert M. Grundlingh, *The Dynamics of Treason: Boer Collaboration in the South African War of 1899–1902*, Pretoria, Protea Boekhuis, 2006.
children must be sacrificed, although they were ignorant of what that sacrifice would be.\textsuperscript{17} As President Steyn of the Free State explained later:  

We must not think of our wives and children anymore, but must fight for our independence. It is but a short time that our women and children will suffer, but that is preferable to ourselves and our children and our children’s children becoming slaves [\textit{knechten}] of the enemy.\textsuperscript{18}

**British tactics against civilians**

It took the British another two years to defeat the Boers. The Boer military system, the commando, was an ethnic institution. Dating back to the eighteenth century in the Cape, it had been developed and refined in the Boer republics, particularly in conflicts with black people. In law it was obligatory for every man between the ages of 16 and 60 to perform commando service when required, bringing to the commando a horse, a saddle and a gun. The commando unit was drawn from the local district and, for young Boer men, commando duty was a rite of passage. Burghers could buy themselves out of commando service, however, and it proved to be a somewhat inefficient institution for conventional warfare, depending on loyalty rather than bureaucracy and coercion. On the other hand, the commando proved remarkably flexible and effective for guerrilla warfare.\textsuperscript{19} In December 1900, General Lord Kitchener was appointed as commander-in-chief of the British forces. He had a reputation for conducting pitiless colonial warfare in India and the Sudan, but the Boers had not anticipated such ruthlessness, for they had never anticipated that the methods of colonial warfare would be directed against them, and they had never encountered such a determined attempt at conquest. Kitchener’s “scorched earth” policy aimed to clear the land of anything that might provide the commandos with support.\textsuperscript{20} Some 30,000 farms were burnt, crops and orchards were destroyed, and livestock was captured or killed. There remained the problem of the farm residents, both black and white; in the end, British officers decided to bring them into the towns and to place white civilians in camps.

**The concentration camps**

The reasons for the decision to round up the families and install them in camps are complex.\textsuperscript{21} Although it is rarely mentioned, it seems likely that underlying the

\begin{itemize}
\item \textsuperscript{17} E. van Heyningen, above note 8, p. 48.
\item \textsuperscript{19} On the meaning of the commando, see Sandra Swart, “‘A Boer and His Gun and His Wife are Three Things Always Together’: Republican Masculinity and the 1914 Rebellion”, \textit{Journal of Southern African Studies}, Vol. 24, No. 4, 1998; for a history of the commando in the South African War, see Fransjohan Pretorius, \textit{Life on Commando during the Anglo-Boer War, 1899–1902}, Cape Town, Human & Rousseau, 1999.
\item \textsuperscript{20} S. B. Spies, above note 18.
\item \textsuperscript{21} Ibid.
\end{itemize}
decision was the fear that white women would be left vulnerable to marauding black men. European pro-Boer literature was already depicting this war as a black onslaught against women and children. Such racist fears had little grounding in reality, but they were certainly widespread amongst the Boer women, and “black panics” were a regular feature of white psychology in South Africa in times of crisis.  

The policy of sending civilians to camps was ill-considered and ill-managed, for Kitchener had no interest in non-combatants. Until the end of 1901, when reforms were set in place, conditions in the camps were dismal, with worn tents as accommodation and inadequate rations. Ultimately about forty-five white camps and sixty-four black camps were established by the British Army, holding at least 150,000 whites and probably a higher number in the black camps.  

By June 1901, mortality was rising rapidly; it reached a peak in November 1901 in the white camps and December 1901 in the black camps. The official figure for whites is 27,927, of which 22,074 were children—half of the camps’ child population. In total, some 10% of the Boer population died in the camps. The numbers of black people who died will never be fully known, since records were not kept for many months, although it has been estimated that at least 20,000 civilians fell victim to the war. In total, civilian deaths must have amounted to about 50,000, the great majority being children. Ultimately, female and juvenile civilians suffered far more than male combatants. Some 6,189 Boer combatants died, and about 21,000 British soldiers lost their lives, over 13,000 from disease—primarily typhoid, since this was the last of the so-called “typhoid wars”. Up to this point, disease had almost always been a greater killer in warfare than wounds suffered in battle. The First World War was to be the first major conflict in which disease played a smaller part in mortality than fighting.

For months little was known of the camps, for Kitchener was innately secretive and he failed to report on the camps to the War Office. Rumours reached Cape Afrikaners and spread abroad. Their worst fears were confirmed in June 1901 when Emily Hobhouse, a pro-Boer English philanthropist who had spent about five months in the Free State camps, published a report on behalf of

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24 P. Warwick, above note 9, p. 151; S. V. Kessler, above note 9, pp. 213–254.

the South African Women and Children Distress Fund.\textsuperscript{26} She had grasped clearly the failures of the military. Worn, overcrowded tented accommodation and an inadequate ration scale coincided with a measles epidemic that had decimated the children. For the British government, the conduct of this war by “methods of barbarism” was an embarrassment. The War Office recruited a group of women to investigate conditions,\textsuperscript{27} and full management of the camps passed from the War Office to the Colonial Office. Major reforms were set in place, including the expansion of medical care and improved ration scales, and mortality declined abruptly.

**Black South Africans in camps**

The position of families in the black camps has been far less well documented. The destruction of records and the tendency of whites at the time to ignore any black presence means that we have only fragmentary knowledge of black civilian suffering in the war, even though black people were an integral part of republican society. It is clear that until June 1901, almost no provision was made for black people. Before that date, camps were eventually set up for them in the Orange River Colony, but nothing is known of the fate of black farmers in the Transvaal during this earlier period. The little information that is available for the Orange River Colony suggests that nutrition and accommodation were very inadequate and mortality must have been high.

In June 1901, the gold mines began to reopen and the British Army lost an important source of labour. To deal with the problem, a Native Refugee Department was established. The refugee women and children were moved into farm camps, where they were expected to grow their own food, while their men were employed by the British Army. Although this provided some income for the families, the parsimonious management of these camps ensured that conditions were harsh and mortality soared, as the scant surviving records indicate. Medical care was minimal; some doctors were provided, but there is no record of any nursing.\textsuperscript{28}

Emily Hobhouse claimed that she did not have the resources to investigate the black camps and accused the Ladies Committee of neglect in failing to visit them. However, this was not part of the Committee’s brief and correspondence indicates that, when they were able, some of the women did visit black camps. They found nothing to complain about, as Lucy Deane, one of the Committee members, explained. She thought that Klerksdorp black camp was “beautifully run” and “cost practically nothing at all”. She added: “Everything is beautifully clean and sanitary, the people so amiable and cheerful, all of which is a sad contrast to the Boer Camps with their terrific cost and appalling difficulties, discontent and

\textsuperscript{26} Emily Hobhouse, *Report of a Visit to the Camps of Women and Children in the Cape and Orange River Colonies*, London, Friars Printing Association, 1901.


\textsuperscript{28} Ibid., pp. 150–178; S. V. Kessler, above note 9.
worry!" In the end, it was missionaries or local ministers who protested most against the miserable conditions. The Reverend R. Matteson, the Wesleyan minister in Heilbron, was outraged by the treatment of local black people. “Their treatment is a great contrast to the generous way in which Boer needs or professions of needs, are met,” he pointed out. “I cannot believe until officially informed that this is the intention of the administration. It outrages British ideas of humanity and justice, and were all the facts known, would arouse strong indignation.” But that did not happen, and it was only in the 1980s that historians first began to explore the plight of the black camps. For black people this remains a forgotten history, blotted out by the suffering of the twentieth century.

Outside perspectives on the war

In South Africa the war was fought, in the early stages at least, in the full glare of modern publicity; as Donal Lowry has observed, this made it the most publicized war outside Europe between the American Civil War and the First World War. This intense scrutiny was not simply the product of modern journalism. The war also became a touchstone for international morality, attracting military support and philanthropic aid, and this set it apart from most colonial wars.

The reality was that many Europeans found it easy to relate to the struggle for independence of small white republics against a powerful imperial nation, for the conflict resonated with many European struggles of this era. In contrast, the Aceh (Indonesian) fight for freedom against the Dutch, for instance, had no such echoes. The history of the foreign volunteers who fought for the Boers – from Ireland, France, Scandinavia and Russia, among others – has been well documented. Less has been written about humanitarian aid, although the contribution of Russia, in particular, has attracted attention both because a Russian émigré to South Africa has written on the subject and because, after the fall of the Soviet Union, several Russian historians with access to new sources have explored the subject. However, help came in the form not only of advice and ambulances but of personnel as well, ensuring that there were an unusual number of foreign witnesses to the war, at least until about June 1900 and the fall of Pretoria.

Most foreign participants withdrew from South Africa after June 1900, although six nurses, sent by the Netherlands government, went to work in the concentration camps. The scandal of camp mortality was exposed a year later by

29 Letter from Lucy Deane to her sister, 4 October 1901, London School of Economics, Streatfield Collection, LSE 2/11.
32 Ireland and Russia are examples. See below.
33 F. Pretorius, above note 13, pp. 480–481. Most histories of the war mention these volunteers.
34 A. Davidson and I. Filatova, above note 6; E. Kandyba-Foxcroft, above note 6.
Emily Hobhouse in her report on the Free State camps. Questions were asked in the British House of Commons and reforms were put in place. In Europe, a fresh effort was made to help the camp inmates, usually in the form of “comforts” as Britain refused any other assistance. Women played a prominent role in this work, since the earlier, male-dominated aid organizations preferred to dedicate their funds to post-war reconstruction. Mortality declined, and better nutrition, accommodation and administration greatly improved the lot of the Boer civilians in 1902.

The end of the war

The war ended on 31 May 1902 with the signing of the Treaty of Vereeniging. By this time the majority of Boer combatants were prisoners of war in exile, in India, Ceylon (Sri Lanka), St Helena and Bermuda. About 17,000 remained in the field, but there were now also about 5,500 Boers who had joined the British forces. The terms of surrender were not unreasonable, although the Boers had to take an oath of allegiance to the British sovereign. The “rebels” from the British colonies of the Cape and Natal were disenfranchised for five years. £3 million was provided for reconstruction. Repatriation from the camps was slow since the families could not be left un-provided for on their ruined farms, but by early 1903 all the camps had closed. Repatriation from the black camps was more strictly controlled, for the British now intended that every black man should have a white “master” rather than farming independently. Many black people were reluctant to return to their old employers and the coercive labour conditions they had sometimes endured before. While Britain did not wish to force them to return to farms where they had been ill-treated, under a share-cropping system that it regarded as inefficient, at the same time it was determined to assert a modern waged labour system rather than the more casual relations that had existed before. Although the process has been little studied, it would seem that black people lost significant independence as a result of the war.

For Afrikaners, however, relative political freedom was soon acquired. By 1907 both the Transvaal and the Orange River Colony had received self-government, with the Afrikaner parties winning the elections that followed, and in 1910 all four colonies joined together to create the Union of South Africa. The real losers of the war were the black population, for the new colonies retained the racist legislation of the Boer republics rather than adopting the more enlightened race-free franchise of the Cape, and this discrimination was incorporated into the Act of Union.

35 E. Hobhouse, above note 26.
36 E. van Heyningen, above note 8, pp. 181–283.
38 The Union of South Africa left the British Commonwealth in 1961 to become the Republic of South Africa. In 1994, after a new constitution was introduced, granting the vote to all adult South Africans, the country returned to the Commonwealth but retained the name of Republic of South Africa.
Humanitarian aid in the South African Republic

Neither republic was well prepared for war as far as medical services were concerned, as weak administration and a pre-industrial medical culture had inhibited investment in efficient institutions. Both the Free State and the South African Republic had adopted the Cape practice of district surgeons, government employees who provided some basic medical services such as post mortems or vaccinations and who were to form the backbone of wartime medical services, particularly in the Free State. In the South African Republic, medical practitioners were registered; in 1898 there were 271 doctors listed in the *Staats Almanak*. No less than 106 of these gave no place of residence, but they were probably on the Witwatersrand since British doctors had immigrated to the goldfields in significant numbers, leaving abruptly when war broke out. Of the remaining doctors, there were seventy-one in Johannesburg and twenty in Pretoria. The rest were scattered thinly across the country. Poverty meant that few doctors could make a viable living in the rural areas, where a single consultation could mean a day’s journey over treacherous terrain—and the likelihood of no payment at the end. Medical institutions were equally sparse. There were only twelve hospitals in the Transvaal in 1899 and fewer in the Free State, and most hardly deserved the name.

The consequence of this meagre medical provision was that most republican Boers had little experience of modern scientific medicine. The medical knowledge that they took north had its origins in Galenic thought, combined with European folk remedies. To this had been added some knowledge learnt from South Africa’s indigenous people. Patent medicines in the form of the Huis Apotheek—a box of simple remedies that, by 1899, were manufactured in South Africa—enhanced their pharmacopoeia. Boer men were more likely to embrace the masculine values associated with Paul Kruger, who, when his hand was hurt by a rhinoceros as a young man, had cut away parts of the rotting flesh himself with a penknife. In this spirit, General Piet Joubert rejected the aid of a Russian ambulance on the eve of the war. Joubert was a “kindly, well-meaning old man” but unfit for the burden of modern warfare, the young Deneys Reitz felt. As an example, just before the war started, Joubert showed Reitz a telegram he had received from “a Russian society” offering to equip an ambulance should war break out. To Reitz’s dismay, he had refused the gift. “He said, ‘You see, my boy, we Boers don’t hold with these new-fangled ideas; our herbal remedies [bossie-middels] are good enough.’”

41 F. Pretorius, above note 13, p. 275.
42 Elizabeth van Heyningen, “Women and Disease: The Clash of Medical Cultures in the Concentration Camps of the South African War”, in G. Cuthbertson et al. (eds), above note 7; E. van Heyningen, above note 40.
44 Deneys Reitz, *Commando: A Boer Journal of the Boer War*, London, Faber & Faber, 1929, p. 17. Deneys Reitz was the son of Francis William Reitz, the fifth president of the Orange Free State and, at the outbreak of war,
Het Transvaalsche Roode Kruis

This was rough terrain in which to establish a viable medical service in wartime, and it is to the credit of a handful of Dutch doctors, who realized the need for better care for the commandos, that such a feat was achieved. They turned to the International Committee of the Red Cross (ICRC) for advice and assistance. In the wake of the Jameson Raid, the Volksraad (the South African Republic parliament) approved the establishment of the Pretoria Ambulance Corps early in 1896. Shortly after, on 30 September 1896, the South African Republic became a signatory of the Geneva Convention of 1864, with British permission in terms of the London Convention of 1884.\(^45\) The Pretoria Ambulance Corps was renamed and expanded to become Het Transvaalsche Roode Kruis (TRK), and it was formally recognized as the National Red Cross Society of the South African Republic. Two of the doctors who had driven the movement, Goswijn Willem Sanne Lingbeek and Johan Balthazar Knobel, formed part of the new executive, the Hoofdbestuur, but men like the State geologist Gustav Adolf Frederik Molengraaff were also drawn in. Intensely aware of their position as members of a modern State, these men were alert to the demands of the Geneva Convention, realizing the need to maintain impartiality and neutrality; however, as de Villiers observes, the TRK moved perilously close to government when President Paul Kruger, General Piet Joubert and Willem Johannes Leyds were appointed as honorary office bearers, increasing the organization’s dependence on government and weakening its ability to maintain impartiality.\(^46\)

The objectives of the newly established TRK were ambitious. Not only did it want to establish a section of the Red Cross in every town in the Transvaal, but it also intended to form an ambulance service, organize a temporary hospital system and enrol staff to care for the sick and wounded in the event of war. Without much financial support and without an adequate medical structure in the country, the TRK had considerable difficulty in setting up these bodies. Although there was an enthusiastic response when the TRK advertised for volunteer workers in 1899, many who applied had neither the skill nor the knowledge required. The best were probably women like Mrs Cassie O’Reilly, the wife of the Heidelberg doctor. Under the guidance of her husband, she worked enthusiastically in the hospital that was hastily established when it became clear that the only facility in town for caring for the wounded was the local jail, as she explained in a letter to her family:

One night about this time Dr. was called up out of bed to attend a man who had fallen off a train. He was a young Burgher who was on his way to the front. He had fallen asleep on top of a truck & about midnight the accident happened.

\(^{45}\) Available at: [www.icrc.org/ihl/INTRO/1207OpenDocument](http://www.icrc.org/ihl/INTRO/1207OpenDocument) (all internet references were accessed in December 2015); J. C. de Villiers, above note 7, p. 46.

There was no hospital in Heidelberg, so the poor fellow was carried to the gaol hospital, being the only place available at the moment for Dr. to operate in. … We had great difficulty in getting anyone to nurse this man as there was no trained nurse in Heidelberg & we had to depend on volunteers. Naturally the gaol was not a nice place for any woman to be in. This accident showed the public that a hospital of some kind was absolutely necessary.\textsuperscript{47}

But this short-lived enthusiasm was no replacement for the needs of a sophisticated modern organization. Red Cross sections started only in the larger towns, and there was always a deficiency of ambulances and staff. Worse still, the Hoofdbestuur was distinguished by indecision and disorganization. It was unable to direct and guide the foreign ambulances, the medical staff were mismanaged, and relations with government were poor. De Villiers considers that the main reason for the failure of the TRK, leading ultimately to its closure, was the lack of financial support from government. Although the TRK was, in essence, expected to provide the primary medical service for the South African Republic military forces, it received no more than £4,100 from the government between 1896 and 1900, in dribs and drabs.\textsuperscript{48} Instead, the TRK turned to the public and overseas donors for support. Of the latter, the Nederlandsch-Afrikaansch Bijstandsfonds was the most important, but it was never enough. Indecision and inefficiency also marked the work of the TRK, leading inevitably to strife within the organization and a breakdown in relations with the government. This incompetence was not unique to the TRK, for it was a feature of much administration in the Transvaal. The provision of relief during the war was so corrupt that the historian Bill Nasson has commented: “it seems that only bibles for commandos were entirely exempt from requisitioning deals”.\textsuperscript{49}

More important, perhaps, was the fact that the TRK was attempting to establish a relatively sophisticated medical organization within a society which lacked a modern medical infrastructure and had little understanding of the value of scientific medicine. Red Cross workers were regarded with suspicion, as shirkers from military duty – but what made the TRK even more suspect was the belief of ordinary Boers, suspicious of anything new and strange, that the TRK was a foreign structure, even an \textit{Uitlander} or English organization. This hostility was exacerbated as people like O’Reilly, British-born naturalized citizens, sought to give service through such work rather than by joining the commandos.

Despite these difficulties, all over the Transvaal local people sprang to the aid of their commandos. While men, often local English-speaking businessmen anxious to prove their loyalty, formed the Red Cross committees, women provided most of the care. Doctors gave lectures in basic nursing and awarded Red Cross certificates. Some sections were relatively clear about their obligations under the Geneva Convention, but others were less certain. In Johannesburg there was a fairly well-funded structure working in association with the St John

\textsuperscript{47} Letter from Mrs Cassie O’Reilly, 3 May 1901, National Archives of South Africa (NASA), A432.
\textsuperscript{48} J. C. de Villiers, above note 7, pp. 48–49.
\textsuperscript{49} B. Nasson, above note 10, p. 61.
Ambulance Association, but such alliances were often tense since the organizations’ relations with the inefficient TRK could be conflicted and the loyalty of the organizers was suspect. The battle of Elandslaagte on 21 October 1899 was the first major Boer defeat, a bloody slaughter in which the Boer forces were devastated by a vicious cavalry advance. The battle demonstrated only too clearly the need for effective care on the battlefield. The Boer general, Johannes Kock, was mortally wounded and taken into Ladysmith to die. Annie Rothmann, a TRK nurse, was allowed into the besieged town to nurse him. It is not clear how many Boer ambulances were present, but a Johannesburg ambulance was certainly there. However, its resources were very limited, consisting of three medical men, six dressers and a wagon, as well as a stock of drugs. An Indian store was used as a hospital. There was also an ambulance of the German Corps which was fighting with the Boers. Although the German ambulance was fairly well supplied, after the battle it was ordered to join another commando unit. In the end, most of the Boer wounded were left to the care of the British medical services. The situation at Elandslaagte was not unique. Medical care for the Boers on the Natal front deteriorated so badly that in most cases, it did not exist at all. The western front was somewhat better served, as the Netherlands South Africa Railway Company had provided three well-equipped ambulance trains; two of these ran from Bloemfontein and Kroonstad to Pretoria, while the third ran from the Natal front, all carrying Boer wounded to the capital.

By early 1900, the TRK had collapsed. On 8 January 1900, the Hoofdbestuur wrote despairingly to the South African Republic government begging for improved cooperation. Above all, it needed the right to act independently, and to order the medicines and equipment that it required. The letter was, de Villiers observes, “an indictment of the ZAR Government for its miserly attitude and lack of insight and understanding”. But it is also a comment on the need for a social context that is favourable for a modern institution like the Red Cross to function. In response to the TRK letter, the Volksraad created a new structure, the Medische Commissie, to act on behalf of government and to create ambulances for the commandos. The Medische Commissie was a government organization, not part of the Red Cross, although it had to work with foreign Red Cross ambulances. The reality, however, was that the Boers were already losing the war; they had few resources, and it was difficult for any medical bureaucracy to operate. Medical help for fighting Boers was now ad hoc, and came largely from European ambulances of which only some were from National Red Cross Societies.

50 J. C. de Villiers, above note 7, pp. 62–73.
52 Annie Rothmann, diary, 1899–1900, NASA, A321.
53 J. C. de Villiers, above note 7, pp. 54, 561–564.
54 F. Pretorius, above note 13, p. 275.
55 J. C. de Villiers, above note 7, p. 55.
A successful initiative: The Orange Free State and the Identiteits Buro

The Orange Free State signed the Geneva Convention of 1864 shortly after the Transvaal, on 28 September 1897. Unlike the South African Republic, however, the Free State did not immediately establish any Red Cross organization. It was only when it became clear that war was imminent, in September 1899, that an Ambulance Commission was set up by Dr Alfred Ernest William Ramsbottom, who became head of the Orange Free State Red Cross Ambulance, to which some £2,000 was devoted by the government. The resources of the little Free State were small, but it already had a more efficient medical service than the Transvaal. Working through district surgeons, Ramsbottom was able to set up a structure which served the commandos relatively effectively. Ever conscious of the need to function as part of the “civilized” world, Ramsbottom went to some lengths to ensure that the local Free State Red Cross ambulance crews that were established in 1899 were properly informed about the demands of the Geneva Convention. They were supplied with copies of the Geneva Convention and encouraged to maintain a non-combatant and neutral status. The result was a service, de Villiers suggests, that “can be regarded as a model of how a small country with limited resources could accomplish such a huge task”.

The bleak story of the TRK had one bright spot: this was the work of the Identiteits Buro, formed after the Battle of Elandslaagte on 21 October 1899. The confusion that followed this skirmish about who had died or been wounded, who had been taken prisoner and who had survived, created panic amongst the families. Since the Boer commando system was more than usually dependent on community support, the republics could not afford to alienate distressed citizens. The State geologist, Molengraaff, rapidly grasped the need for reliable information, and he proposed and organized an office which could collect information on the whereabouts of combatants and distribute it to families. This need was particularly acute because many families were almost illiterate and there was no effective postal system; sometimes months could pass before families would discover the fates of their menfolk. Operating under the aegis of the TRK, the Identiteits Buro registered all the men who had been called up for commando duty and issued them with identity cards which they were expected to carry at all times (Figure 2). The Free State was soon brought on board as well. What made the system particularly effective was that Molengraaff was able to persuade the British military to cooperate. By November 1899 a process was set in place whereby each side provided information weekly on the dead, the wounded and prisoners of war.

Since both the work and the commitment to neutrality demanded by the TRK were unfamiliar to Identiteits Buro workers, Molengraaff issued very precise instructions for work on the battlefields. These were intended to ensure that the

56 Available at: www.icrc.org/ihl/INTRO/120.
57 J. C. de Villiers, above note 7, p. 58.
Identiteits Buro workers confined themselves strictly to Red Cross work, were unarmed and were clearly identified as part of the Red Cross. Like the TRK, the Identiteits Buro was poorly funded, and it survived only because of foreign donations, mainly that of the Nederlandsch-Afrikaansch Bystandsfonds. Despite difficulties, the Identiteits Buro functioned well in the first months of the war. Once the guerrilla phase started, from about September 1901, conditions changed completely. For one thing, the two republics were formally annexed by Britain, thus ending their independent Red Cross organizations. In addition, after General Lord Kitchener arrived as commander-in-chief in December 1900, cooperation with the British ceased. Although the Identiteits Buro struggled on, in 1902 Kitchener forbade any information to be given to the Buro, and from this point families received little information about their men on commando; indeed, it was often months before they even knew if the men were held as prisoners of war.

The involvement of foreign National Red Cross Societies

The weaknesses of the TRK, including its lack of funding and its maladministration, meant that foreign contributions were critical to the care of the Boer wounded in the first months of the war. In de Villiers’ view, “this injection of medical foreign aid saved the Boer medical service from disaster”. Fortunately the sympathy for the Boers that the war aroused ensured that substantial contributions were forthcoming. In all, fourteen well-equipped ambulances from European and American National Red Cross Societies reached the Transvaal between November 1899 and June 1900, along with over 200 doctors, nurses and assistants.

58 Ibid., pp. 84–85.
59 Ibid., p. 405.
60 Ibid., p. 401; F. Pretorius, above note 13, p. 275.
In other contemporary colonial wars, like those of Cuba and the Philippines, there was little humanitarian aid of this kind, and the explanation for assistance on this scale must be found partly in Europe. For one thing, Europeans could identify more easily with the Boers as white and apparently Western in their culture than they could with the Cuban or Filipino peasantry. But there were other reasons as well. For Ireland, this war had a particular resonance because the plight of the Boers seemed to bear close parallels to their own struggle for independence from British rule.61 Russia was equally engaged (Figure 3). In faraway Kiev, the young Konstantin Paustovsky recorded the excitement that the war had generated amongst his contemporaries:

We children were tremendously excited by the war. We were sorry for the Boers fighting for their independence, and we hated the English. We knew every detail of the battles being fought at the other end of the world. … We were not alone in this. The whole civilised world was tensely watching the unequal struggle in the plains between the Vaal and the Orange River, and even the organ grinders in Kiev … now had a new song: “Transvaal, Transvaal, my country burning in flames”.62

61 A. M. Davey, above note 6, pp. 130–144; D. P. McCracken, above note 6. The American contribution was also largely influenced by Irish politics.
Indeed, support for the Boers in Russia was so widespread that it has been described as “Boer mania”. “Russian society was seldom as united as it was in its sympathy for the Boers”, Apollon Davidson and Irina Filatova observe, for support came from both the left and the right. The pacifist Leo Tolstoy, who followed the events of the war closely, apparently saw this war as a special case, overriding his convictions about non-violence. In the United States, Theodore Roosevelt saw the Boers as ethnic cousins, sharing a Dutch, Huguenot, Scots and Irish heritage, worth supporting against the British empire.

Even before the war started, the Netherlands Red Cross had provided advice and financial support to the two republics. When it became clear that war was imminent, the ICRC also called upon local societies for aid, and the Germans and Dutch responded promptly (Figure 4). The French Société de Secours aux Blesses donated two auxiliary field hospitals and a substantial quantity of supplies to the TRK. The Russians were particularly generous, and their contribution has been very fully explored. In the United States, the Holland Transvaal Association was formed in Detroit, and an American Committee to Aid Red Cross Work in the South Africa War was also established, both to raise funds to assist the Boers. By no means all of these organizations operated under the aegis of the Red Cross; the town of Alençon in Normandy donated small horse-drawn carts bearing the words “Homages au peuple Boer”, and this appears to have been an independent initiative (Figure 5).

The disorganization existing in the TRK often made it difficult for the foreign ambulances to operate efficiently. The Dutch and German Red Cross ambulances coped best, as these organizations had planned more adequately for

63 A. Davidson and I. Filatova, above note 6.
64 Ibid., pp. 180–181.
65 D. Lowry, above note 31, pp. 208–209. One should not forget that the USA was engaged in conflicts at this time which were, in reality, imperial wars, especially against Spain in the Philippines.
67 J. C. de Villiers, above note 7, p. 401. The caption to the illustration suggests that the donation was from the Carcassonne.
South African conditions (Figure 6) and the Dutch had the advice both of Dr W. J. Leyds, who, during the war, was appointed as ambassador extraordinary and minister plenipotentiary for the South African Republic in Europe, and of the Netherlands South Africa Railway Company. De Villiers, who has examined their activities most fully, devotes considerable space to the foreign ambulances. With two exceptions, their crews were careful to function within the terms of the Geneva Convention.

One of these exceptions was the Chicago Irish-American Ambulance, most of whose crew members, apart from the doctors, discarded their Red Cross insignia as soon as they arrived in Pretoria, and joined the local Irish Brigade instead.68 The second, more problematic exception was the actions of the members of the Belgian section of the Belgian-German ambulance. Pro-Boer sentiment ran particularly high in Belgium, leading to substantial donations for the Boer cause. The organization that was thus established, the Volontaires Internationaux de la Croix-Rouge, was unauthorized, partly because the participants were linked to the Antwerp branch of the Alldéutscher Verband, the ultra-nationalist Pan-German League. The German Red Cross operated entirely separately, and the Belgian Red Cross

68 Ibid., p. 402.
disowned it. For this reason the Belgian-German ambulance could not operate under the flag of the country of origin, and it failed to fulfil the demands of the Geneva Convention in other respects too. Over time, a host of other difficulties emerged. The ambulance that went to South Africa continued to operate under the Red Cross insignia without authorization from either the Belgian or the German National Societies. The behaviour of some of the personnel was questionable. Men were quarrelsome, while some of the women were accused of “flirting” and other improper behaviour. Whatever the truth of the rumours that swirled around its members, it was clear that this group was ill-managed. The self-interested account of one of the nurses, Alice Bron, gives some indication of their failure to inculcate a proper understanding of their role as neutral non-combatants. The actions of both the Chicago and Belgian groups were sufficiently disturbing for the ICRC to discuss their behaviour at the Seventh International Congress of the Red Cross at St. Petersburg in 1902.69 Both for the ICRC and for the National Societies, there was probably more to be learnt from these minor failures than from the impeccable conduct of most of the foreign ambulances. Above all, they learnt the need for adequate preparation beforehand and some knowledge of local conditions.

The British Red Cross

On the British side, the war was fought on an imperial stage. Contingents of Australians, Canadians and New Zealanders joined the British forces. Pro-imperialist propaganda, which attempted to portray the war as a fight for human rights, attracted this loyal support. While the claim was largely unconvincing, many anti-imperialists were reluctant to oppose the war with any vigour. The socialist Fabian Society considered the war unjust but necessary, and the Quakers were equally cautious in their opposition. They compromised by sending a Quaker member of parliament, Joshua Rowntree, out to South Africa to investigate the rumours about the high mortality in the women’s camps. But he visited only a few camps, and his report failed to make any mark. This pusillanimous attitude affected the medical care of ordinary soldiers as well, since it was only after the scandal of the typhoid epidemic that action was taken to employ more female nurses and to improve sanitation.

Despite the well-publicized work of reformers like Florence Nightingale in the 1850s, the British military remained hostile to any structure that was peripheral to the work of fighting. The officer-doctors of the Royal Army Medical Corps were notoriously despised by other officers. The Royal Army Medical Corps, in turn, resisted the introduction of female nurses, and as late as the end of 1898, there were less than 200 nurses in the Army Nursing Service and the Army Nursing Reserve Service. There was no intention of employing them at the front in any capacity. The appalling sanitary conditions which made the South African War the “last of the typhoid wars” were one product of the British military’s arrogant neglect of its soldiers.

Britain’s attitude to the Geneva Convention of 1864 and the Red Cross should be seen partly against this background. Although Britain became a signatory to the Geneva Convention on 18 February 1865, it was slow to form a National Red Cross Society and it was only in response to the Franco-Prussian War in 1870 that the British National Society for Aid to the Sick and Wounded in War was created. But the view of Lord Wantage, the chairman, that Red Cross assistance was unnecessary in Britain’s colonial wars hindered any effective development in the national movement. Others did not share Wantage’s view, and the result, in Britain, was a proliferation of humanitarian organizations, of which the most prominent was the St John Ambulance Association.

When war broke out in 1899, then, Britain was ill-prepared to provide the medical support it needed for its troops, and nobody anticipated a long and bloody conflict. It was largely the warning of Surgeon-Major W. Macpherson of the Royal

71 S. Marks, above note 7, pp. 159–85; P. D. Curtin, above note 25, pp. 119–120.
72 Available at: www.icrc.org/ihl/INTRO/120.
73 Central British Red Cross Committee, above note 7; J. C. de Villiers, above note 7, pp. 33–38.
Army Medical Corps\textsuperscript{74} that, in the event of war, Britain was likely to be swamped by ill-managed voluntary aid that encouraged the establishment of another Red Cross organization to serve in colonial wars. This was the Central British Red Cross Committee, formed specifically to “serve the British Empire and its dependencies”, and it brought together the National Society, the St John Ambulance Association, the Army Nursing Reserve and the War Office.\textsuperscript{75}

Neither the Cape nor Natal had Red Cross organizations at the outbreak of the war. In Cape Town the Good Hope Society managed much of the voluntary aid, along with various civilian relief structures, including the Mansion House Fund and the Absent-Minded Beggar Fund, the latter named after a poem by Rudyard Kipling and particularly well publicized.\textsuperscript{76} In January 1900 a Central Good Hope Red Cross Committee was formed as a branch of the CBRCC, to coordinate humanitarian assistance work in South Africa. The heightened emotions of the war, particularly after such episodes as the relief of Mafeking, led to an outpouring of support from the British public and, as a result, British humanitarian aid was well funded. There was enough money to establish two hospital ships and two hospital trains, as well as to send gifts and comforts for the troops. These must have come as a great relief as the troops were often poorly fed while they were on the march, sometimes for weeks at a time, in a difficult climate. National Societies were formed in many of the small towns in the Cape Colony, and these were coordinated from Cape Town.

Despite popular enthusiasm for the British cause, neither the military authorities nor the Royal Army Medical Corps were enthusiastic about Red Cross assistance. Nor were they willing to accept assistance from abroad. As De Villiers observes, “[t]he Red Cross agent was effectively reduced to the level of a commercial traveller calling at military establishments to ask whether anything was needed but eliciting no response”.\textsuperscript{77} Even at the height of the typhoid crisis, the military hindered Red Cross aid. Medical aid for the troops was so poor that a scandal erupted, leading to a government enquiry.\textsuperscript{78} Ultimately the failures of the British Red Cross in this war had more to do with military arrogance and intransigence than with incompetence and lack of enthusiasm on the part of the British Red Cross Society.

But Britain’s empire consisted of far more than the white settlement colonies. It is likely that many indigenous colonists were alert to the opportunities of the war.

\textsuperscript{74} Although a military medical service had existed since the seventeenth century in Britain, it had always been unsatisfactory and disregarded by the military establishment. The Royal Army Medical Corps was only formally established in 1898; see: www.ams-museum.org.uk/museum/history/ramc-history/ https://en.wikipedia.org/wiki/Royal_Army_Medical_Corps#History.

\textsuperscript{75} Central British Red Cross Committee, above note 7, p. 63.

\textsuperscript{76} This is a poorly developed aspect of the history of the war. See Elizabeth van Heyningen, “Refugees and Relief in Cape Town, 1899–1902”, Studies in the History of Cape Town, Vol. 3, 1980; Vivian Bickford-Smith, Elizabeth van Heyningen and Nigel Worden, Cape Town in the Twentieth Century, Cape Town, David Philip, 1999, pp. 12–16.

\textsuperscript{77} J. C. de Villiers, above note 7, p. 39.

Almost certainly many men saw the war as an occasion to display their manhood in fighting and, in laying down their lives, their loyalty to the British civilizing mission. While Africans beyond the borders of South Africa had no prospect of participating, Indians did, usually in support positions. In South Africa itself, officially black men did not bear arms but in practice they were widely used in combat on both sides.  

The role of women: The transition from aid to the troops to aid for civilian victims of war

Although women had begun to contribute formally to aid in war at least as far back as the 1850s, by 1899 nurses were far better trained and many more had entered the profession. In 1899 by no means every woman was demanding the vote or desired to nurse troops, but women were moved by the issues of the war. Many women also hoped that an active support for the war might strengthen their claims to participate more fully in the political life of the nation. As Antoinette Burton has argued, British feminists claimed that women acted as “moral agents” in the life of the nation. Their engagement in this war was predicated on this argument that they brought compassion and humanity to the conflict. While this sense that women acted as a moral force was probably most strongly developed amongst British feminists, the war also stirred Afrikaner women who had been politically passive up to now. The pro-Boer movements in Europe, too, attracted considerable female support.

The plight of the women and children in concentration camps aroused international concern as well, but the nature of the aid was partly determined by gender. Organizations like the Nederlandsch Zuid-Afrikaansche Vereeniging were dominated by men and tended to favour medical aid to combatants (often through the Red Cross) rather than civilians. As the war continued, these Dutch

79 This includes people of mixed birth, the so-called “coloured” people, but also those of Khoe-khoe origin like the Nama. P. Warwick, above note 9; Bill Nasson, Abraham Esau’s War: A Black South African War in the Cape, 1899–1902, Cambridge, Cambridge University Press, 1991. The presence of Mohandas Karam Chand Gandhi added an unusual dimension to the participation of black people in the war. Gandhi had arrived in South Africa in 1893 on the invitation of the Natal Indians, to combat the increasingly hostile legislation of racist South Africans. At this stage of his life, Gandhi was still loyal to the British imperial cause, despite his personal sympathy for the Boers. Even before the war Gandhi’s desire for service had led him to volunteer as a nurse and dispenser at St. Aidan’s Mission Hospital, so he was not without medical experience. Both he and other Indian traders saw the war as a moment to demonstrate that they were fully British subjects. He offered to the Natal government the services of an Indian stretcher bearer corps. Eventually two such corps were established. They functioned for a brief time only, between 15 December 1899 and 14 February 1900, despite their obvious value to the overstretched Royal Army Medical Corps. While Gandhi’s corps were not affiliated with the Red Cross, as medical personnel they had its protection, he believed, for he stated in his autobiography: “Though our work was outside the firing line, and though we had the protection of the Red Cross, we were asked at a critical moment to serve within the firing line.” J. C. de Villiers, above note 7, pp. 318–319; Mohandas Karam Chand Gandhi, An Autobiography: The Story of my Experiments with Truth, London, Jonathan Cape, 1972, pp. 169, 179, 180.

aid organizations preferred to see their money going towards reconstruction in the erstwhile Boer republics, rather than to charity in the concentration camps.\footnote{V. Kuitenbrouwer, above note 15, pp. 146–148, 169–176.} As a result, the collection of clothing and other comforts tended to fall to the less formal organizations of women. Nonetheless, the Nederlands Bystands Fonds probably made the most substantial contribution, sending Bibles, hymn books and food as well as clothing. The work of the German Buren Hilfsbund was also considerable, as a female correspondent told Mrs Tibbie Steyn, wife of the Free State president:

> A shipping agent was here from Hamburg the other day and he told us his sheds were just full of cases of things sent mostly to private people & he could not get them off, but of course that was before the British government had promised the German government that the things would be allowed thro’. I do hope you will be able to find out what has been received by the Bloemfontein camp. We of course have been using all the little influences we have on its behalf and our friends here will be anxious to know what has reached there. They are so pleased to know their labours have not been in vain & that their efforts have really been a help to the Boers.\footnote{Elbie Truter, \textit{Tibbie: Rachel Isabella Steyn, 1865–1955: Haar Lewe was Haar Boodskap}, Cape Town, Human & Rousseau, 1997, p. 53.}

One of the most useful contributions from the Dutch government was a group of eight qualified nurses. They did “the work of angels”, the inmates affirmed.\footnote{Emily Hobhouse, \textit{The Brunt of the War and Where it Fell}, London, Methuen, 1902, p. 254.}

From the point of view of the British authorities, these gifts were undesirable, but they had no desire to fuel pro-Boer fever by banning them. For some time the supplies were blocked, but eventually they were allowed through, albeit reluctantly.\footnote{Baron Gericke, Chargé d’Affaires, Netherlands, to the Foreign Office, 25 June 1901, and related comments, NASA, FK 525, CO 417/331 IV 222025/01.} The medical officers complained that the clothing was “old rubbish” and even that some was “inflammatory”, like a consignment from Germany which included handkerchiefs depicting Boer leaders. Eventually a compromise was reached whereby the cases were opened in the presence of the camp superintendents and the Germans undertook only to send new goods.\footnote{Sir Henry McCallum, Governor of Natal, to the High Commissioner, 27 May 1902, Pietermaritzburg Archives Repository, GH 1331/182/02.}

Probably the greatest value of the donations was to remind the camp people that they were not forgotten, as the Reverend E. Dommissie affirmed: “I was present when the clothes and other goods arrived from Cape Town; with what grateful hearts people received those gifts!”\footnote{Letter from Rev. E. Dommissie to \textit{De Kerkbode}, Vol. 5, No. 6, 1914, pp. 116–117.}

British pro-Boers also contributed substantially. Apart from the major role played by Emily Hobhouse, whose report had initiated major reforms in the camps, and her South African Women and Children Distress Fund,\footnote{E. Hobhouse, above note 26 and above note 83; Jennifer Hobhouse Balme, \textit{To Love One’s Enemies: The Work and Life of Emily Hobhouse Compiled from Letters and Writings, Newspaper Cuttings and Official Documents}, Cobble Hill, Hobhouse Trust, 1994; R. van Reenen (ed.), \textit{Emily Hobhouse: Boer-War Letters}, Cape Town, Human & Rousseau, 1984.} the Quakers also sent
out volunteer nurses, for humanitarian aid sat more comfortably with them than the political controversy that would have arisen if they had been more critical of the policy of establishing concentration camps for civilians. A South African War Victims’ Committee was established at the end of 1899 and, after a Women’s Relief Committee was also set up on 1 November 1900, two women, Frances Taylor and Anna Hogg, were recruited to work in the camps. They were accompanied by an unofficial representative, Helen Harris. None was medically trained, so their primary task was to distribute clothing and check on the welfare of the families. Harris did not remain for long, but all three were popular; they travelled widely through the country distributing cases of goods. Frances Taylor eventually ran the Belfast camp orphanage.  

The plight of the camp inmates also galvanized Boer women who had, until now, played a very restricted role in public life. In almost every town and village near a camp, women’s organizations were formed to provide support for the hapless inmates (Figure 7). Probably the best known are the group of six Pretoria women who worked as volunteers in Irene camp. In Bloemfontein the president’s wife, Mrs Steyn, was a catalyst for the formation of an active group that included the pro-Boer Jewish families of the Leviseurs and the Baumanns. Further away, in Cape Town, Mrs Marie Koopmans de Wet and her associates collected clothing and funds for the relief of upcountry families. While all these groups are well

88 H. H. Hewison, above note 70, p. 218, 205–224.
89 E. van Heyningen, above note 8, p. 276.
known, they were only the tip of the iceberg, for similar groups operated all through
the Boland and even in such strongly British centres as Pietermaritzburg and
Durban, although their work has been little recorded.\textsuperscript{91}

The Dutch Reformed churches also played an active role in coordinating
relief efforts, but the camp authorities were often suspicious of their initiatives.\textsuperscript{92} In
the Transvaal the camps tried to control local philanthropy by establishing a
Burgher Relief Fund which collected small sums of money. Notices of money over
£1, collected by “reliable” people locally, were published in the \textit{Government
Gazette}, with sums under £1 acknowledged “in bulk”.\textsuperscript{93} In time the camp
authorities tightened their control over the distribution of relief, employing camp
nurses for the work rather than relying on the inmates.\textsuperscript{94} For Afrikaners themselves
these initiatives were probably most important in laying the foundations of the
“welfare feminism” that characterized post-war Afrikaner women’s activities, for
political feminism was often discouraged in their patriarchal world.\textsuperscript{95}

\section*{Conclusion: A white man’s war}

In so many ways, this war was a precursor to the greater war that was to follow.
Perhaps its greatest significance was the extent to which it drew attention to
civilian suffering in war. Of course, Europeans were well aware of this, but the
suffering of civilians in the South African War was the direct result of military
strategy, rather than the broader distress that is always incidental to war.
However, the fact that this was regarded as a “white man’s war” meant that the
implications of colonial warfare for indigenous people were disregarded. The war
that followed shortly after in German South West Africa was more vicious than
Cuba, South Africa or the Philippines, with the Herero hunted down like animals
and the Nama incarcerated under atrocious conditions.\textsuperscript{96}

Since the 1980s, when some historians began to incorporate black history
more fully into their understanding of the South African past, scholars have
looked at the experience of black people in this war. It is clear that they played a
much larger part than was previously thought, but gaps remain. We know almost
nothing about the treatment of black men on the battlefield and only a little more
about their fate in the camps.\textsuperscript{97} On the contrary, in the aftermath of the war the

\begin{itemize}
\item \textsuperscript{92} Johannesburg camp report, May 1902, NASA, DBC 12.
\item \textsuperscript{93} Circular No. 33, 24 April 1901, NASA, DBC 59; Circular No. 19, 26 March 1901, NASA, DBC 46.
\item \textsuperscript{94} General Superintendent of Burgher Camps, Transvaal, to Military Governor of Pretoria, 1–2 July 1901, 30
July 1901 and 17 August 1901, and related correspondence, NASA, MGP 121.
\item \textsuperscript{95} Marijke du Toit, “Women, Welfare and the Nurturing of Afrikaner Nationalism: A Social History of the
\item \textsuperscript{96} I. V. Hull, above note 2, pp. 5–90.
\item \textsuperscript{97} There is no reference to aid to black men in J. C. de Villiers, above note 7; or in Pieter Labuschagne,
\textit{Ghostriders of the Anglo-Boer War (1899–1902): The Role and Contribution of Agterryers}, Pretoria,
University of South Africa, 1999.
\end{itemize}
independence of black people was further reduced. In the new colonies, the British retained the racist legislation of the Boer republics which denied black people the franchise and restricted their rights to own property or live where they chose. After the Union of South Africa was established in 1910, such discrimination was further entrenched and reinforced through the twentieth century.

For the British, the war had direct consequences. The value of female military nurses was established, as Shula Marks explains:

[T]his was the first war in which large numbers of female nurses were employed and actually nursed in the field hospital close to the battle front, and the deficiencies revealed in South Africa led directly to the transformation of British military nursing services evident in World War I.  

The importance of the Red Cross in managing aid to the wounded had also been demonstrated. For Europeans, too, the South African War gave fresh experience in the management of Red Cross work in a complex and messy situation, while their doctors gained new surgical skills. 

For South Africans, the consequences were rather different. The war left bitter division between English- and Afrikaans-speakers, which grew deeper in the years that followed. The creation of the Union of South Africa in 1910, and the prominent role of General Jan Smuts, prime minister of South Africa, in the formation of the League of Nations, gave South Africa a place on the international stage which confirmed the country as part of the international world order.

98 S. Marks, above note 7, p. 159.