
**A HISTORY OF SEXUALLY TRANSMITTED DISEASES IN
COLONIAL LAGOS**

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ABSTRACT

The spread of venereal diseases was a major health challenge that devastated the people of Colonial Lagos and it led to the death of several STD patients. Therefore, this research addresses the level of effective management, prevention and cure of STDs among patients in Colonial Lagos. This work establishes the fact that there were venereal diseases in colonial Lagos and it was due to preponderance of prostitution which came with colonization, poverty which came due to the fact that many had to abandon their farmlands in search for blue-collar jobs, and the burden of urbanization which exposes a lot of the locals, both young and old. This work identifies the negligence and discrimination of the colonial government in handling this scourge as treatment was only given to colonial officers even when it was clear that this was a scourge in the whole of colonial Lagos. By extension, the locals had to resort to using local treatment. This work studies how the people resorted to local treatment and the eventual use of the orthodox treatment that came with the establishment of the STD Centre in 1954.

1.0 GENERAL BACKGROUND

This work examines the history of sexually transmitted diseases in colonial Lagos. It has been argued that colonialism introduced untold hardship and other social vices which made the people to scramble for survival through different means including prostitution which to a very large extent led to the escalation of sexually transmitted diseases in different African States.¹ This is not to conclude that sexually transmitted diseases in different African States were practically non-existent before the introduction of colonialism. In colonial Lagos factors such as unemployment, poverty, existence of brothels among others aided the escalation of prostitution and sexually transmitted diseases in the area.²

Therefore, the study will attempt to examine the background of STDs in colonial Lagos. In addition, this study will also attempt to examine the responses of the colonial government and other stakeholders to the problem of sexually transmitted diseases. Also, to be examined in this study is factors that encouraged the spread of sexually transmitted diseases in colonial Lagos.

¹ Interview with Olalekan Coker, 68 Years, Lagos Island, Retired Health Worker, July 16th, 2013.

² Ibid.

Furthermore, this study will also attempt to examine different types of sexually transmitted diseases, the level of spread and their impact on the people of Lagos during our period. Other issues such as the problems and challenges facing effective prevention and management of sexually transmitted diseases, adolescent and sexual behaviour among others will all be examined.

2.0 SOCIAL CONFIGURATION AND LIFESTYLE OF COLONIAL LAGOS

Lagos colony was a British colonial possession centred on the port of Lagos in what is now known as Southern Nigeria. British traders and missionaries had established their bases in and around Lagos before the new area was conquered. Foreign traders competed not only among themselves, but also with local traders. In some cases the contact between foreign traders and indigenous ones produced conflicts. For instance, the desire of some local traders to maximize profits coupled with the events that were orchestrated by the Yoruba civil wars led to a series of conflicts between the indigenous people and foreign traders. These and other issues made the British authorities to conclude that the best way to solve these problems was to take control of the administration of the territory. For this, the abolition of slave trade became a ready excuse.³

Colonial Lagos was characterized by different groups. Suffice to mention that metropolitan nature of Lagos gave it such a blessing of being inhabited by a conglomeration of different tribes and races who inadvertently affected the social colouration of Lagos as a crown colony.

The Aworis are said to be the original inhabitants of Lagos and they trace their ancestry to an hunter named Ogunfunminire. The Aworis occupy places that are regarded as old and had existed prior to the advent of colonialism. The Aworis occupied places such as Lagos Island, Alimosho, Ikeja, Oshodi-Isole, among other places. Aside the Aworis, there were also the Ijebus in Epe as well as Ikorodu while the Eguns who inhabited Badagry. It is important to note that the peoples of Badagry, Ikorodu, and Epe were not under the control of the Oba of Lagos until the merger which came during colonialism. These tribal groups constituted the early inhabitants of Lagos Colony prior to the advent of colonialism.⁴

The advent of colonialism which eventually conferred the status of crown colony on Lagos brought many other African tribal groups to Lagos. Amongst these were the Hausa who stayed majorly around Zabo (now called Sabo), the Igbos, who were actually drawn to Lagos given the search for formal education or/and greener pastures, as well as some other Yoruba-speaking tribal groups.⁵

The abolition of slavery also brought into Lagos a lot of African returnees who had been sold into slavery but had gained their freedom as a result of the abolition of the slave trade. These returnees settled mainly on the Island and came with Western surnames. One interesting thing

³ A. Aduwo, "A Historical Review of Town Planning in Lagos", in *Urban and Regional Planning in Nigeria*. (ed.) A.M. Laseni (Lagos: NITP, 1999): 1-184.

⁴ Ugboajah, A., *A History of Lagos*. An Unpublished Research on Colonial Lagos.

⁵ Ibid.

was that these foreign surnames became a status symbol such that many Aworis also began to take up such names so as to appear Western.⁶

Aside the African groups that made up colonial Lagos, there were also Europeans who had been brought to Lagos as colonial administrators, missionaries, traders or their respective families. These Europeans were left with no other choice than to settle in colonial Lagos in order to carry out their expected functions. It will be erroneous to assume that these Europeans were majorly Britons as there were also Portuguese (the name Lagos was actually a Portuguese statement, *Lagos da curano*, and this means port of slaves) as well as Americans. It must be pointed out that the multiplicity of tribes and tongues made Lagos a melting point for different civilizations and cultures. In fact, one's race was a factor in wealth and resource distribution in the colony. The inequality in wealth and other possession made social stratification inevitable in Colonial Lagos. It is worthy to note that Lagos life is about a specific and peculiar cultural amalgam in which different ethnic groups, classes, and types of persons attempt to make their own lives, find their own ways, express themselves as they can, and experience the many-sided realities that are both theirs and of others.

Therefore, this life, like life in any other large city, was however not just about polarities and contradictions, but also about mixtures and interspersions. It is about simultaneously borrowing from, while lending to others and of existences between extremes, yet not being of either. It is this many-sided quality that some observers have referred to as the "Cosmopolitan" character of Lagos. It is this cosmopolitan character of Lagos that is expressed in both its fluidity and holistic nature. In other words, it is to all other urbanities in Nigeria, and in his or her own perception, in relation to everybody else in Africa and at times, the rest of the world. Lagos life, therefore, simultaneously embodies sophistication and vulgarity, finesse and crudity. It is indigenous and imported at the same time.⁷

In addition, referring to these actors as working people rather than working class is a recognition of the plural nature of urban economies in Africa, and the need to avoid trapping these varying actors within a monolithic set of social relations of production, organization, and consciousness that conventional class theories and analyses might imply.⁸

Among these working class, we find casual laborers, petty traders and other petty producers, artisans and craftsmen, petty entrepreneurs, low status and lowly paid factory, clerical and other workers in the formal sector. All of these are united, or have in common, the fact of living in low income urban settlement, with certain specific characteristics such as inadequate basic services, low incomes, and a disadvantaged and subordinate placing in the urban power and social structure, which is sometimes referred to as the "Urban poor".⁹

On the other hand, Colonial Lagos was stratified socially to the extent that the distinction between the high class and low class was quite visible. Some geographical areas were

⁶ Ibid.

⁷ Michael J.C. Echeruo, *Victorian Lagos: Aspects of Nineteenth Century Lagos Life* (London: Macmillan, 1977), 1-124.

⁸ Ibid.

⁹ Tade, Akin-Aina, "Working People's Popular Culture in Lagos". *Leisure in Urban Africa* (eds.) P.T. Zeleza and C.R. Veney (Asmara: African World Press, Inc., 2003), 175-193.

exclusively reserved for the rich while the poor occupied the undeveloped area of the region. In addition physiological needs were also available to the high class. All these distinctions were quite visible in almost every aspect of colonial peoples' life. These differences later had negative impact on the society as social vices such as armed robbery, prostitution among others evolved.¹⁰

The lifestyle of the people of Colonial Lagos was such that was characterized by mixture of influence from different groups. The cosmopolitan nature of the area during the period made it possible for people from different works of life to frequent the place. One important component of the lifestyle of the people of Colonial Lagos is sports and physical recreation. An important feature of entertainment and recreation particularly as it affects both sports and other activities. For sporting events, metropolitan Lagos had stadia and sports accessible to ordinary people that included the National Stadium, the Lagos State Stadium at Onikan, the former UAC Stadium at Surulere, the Race Course, Lagos, the Shell Sports Ground at Surulere, and the Rowe Park Grounds at Yaba, Lagos. The stadia were used mainly for organized sports meetings at which ordinary people were consumers and audiences while the other sports grounds had restricted access based on membership and user fees.¹¹

Therefore, as David Aradeon, pointed out in his article on the "Unmaking of Tradition" the physical planning and development process gradually appropriated all available open spaces either for private or public development increasingly limiting the space within which ordinary people could play, exercise, or just merely sit, stand and stare.

Moreover, another important feature of the lifestyle of the people of Colonial Lagos was music. Perhaps more than any other aspect, with maybe the theatre coming next, it has received a lot of serious attention. In terms of types popular music has ranged from the asiko variant, juju, sakara, highlife, waka, afrobeat to the imported variants of jazz, reggae, and rap. Popular music in Lagos is popular in terms of access. It is also more than any other aspects of popular culture, multi-class with regards to the range of adherents and consumers. As for contents it has absorbed and recreated many elements of the indigenous forms which include praise-singing and adulation, satire and social criticism of deviant practices and even of political authorities.¹²

In many ways, the reactions of the youth among the working people to these are plural and multiple ranging from genuine enjoyment to attempts at imitation of lifestyle through fashion, hairstyles, language and accents, and even the consumption of narcotic substances and modes of relating to members of the opposite sex.

Music is also an important aspect of the entertainment and recreation mentioned earlier on. It features at festivals, parties, spectacles, and in the activities of social clubs and convivial associations. In spite of its highly organized and often capitalist production, source, the inhabitants of popular settlements domesticate and appropriate in their own ways, different modes of access to its products. In the petty entertainment enterprises of local bars, pepper-soup shops, barber shops, and drinking parlors, current music of different tastes is blared

¹⁰ Tade, Akin-Aina, *op cit*.

¹¹ Michael, J.C. Echeruo, *op cit*, Pp. 37-85.

¹² Ibid.

from heavily amplified hi fi sets and are often duplicated and acquired with little or no regard for copyright or broadcasting rights. In these circumstances, what matters is access, availability, and enjoyment.¹³

It is important to note that night life was an important feature of Colonial Lagos. This idea of night life in colonial Lagos can be divided into the formal aspect and the informal aspect.¹⁴

By formal aspect, one is referring to those aspects of Lagos life which is seen as conventional and patronized by the government functionaries and missionaries. These revolves round the growth and development of drama and concerts in the period. There were series of concerts which were organized during this period both by the European community as well as the Brazillian community in Colonial Lagos. These concerts were validated with the patronage of the Church. Suffice to mention that the organization of concerts in Colonial Lagos started first without the support of the missionaries but the missionaries started to get involved when they felt that the concerts were being gradually used to promote what they called '*the exhibition of low forms of heathenism*' by both the natives and even Europeans cum Brazillians. Essentially, these concerts were so popular because they met the social and cultural needs of the Lagos Colonial community. Aside concerts, there were also drama productions but these were not as common place as common place as the concerts. The government's support for this is evident in the fact that the government started investing in constructing public halls that are used for this concert and these projects became a source of revenue for the colonial government.¹⁵

The informal sector of the night life is the establishment and patronage of clubs and dance houses. These centres were mostly visited by the younger generations and the popularity of these centres was one of the reasons why the church started promoting concerts in Colonial Lagos as they saw it as an avenue to divert the attention of the teeming youths from '*things of the world*' to better things. Dance halls and music clubs were also patronized by the government functionaries but it was sparsely done so as not to incur the wrath of the missionaries. The African youths also saw it as an avenue to explore and exert their youthful zest, among other things.¹⁶

Since Lagos was a cosmopolitan city, red lights districts were also a common feature although they were not as announced as they were today. Given the fact that colonial Lagos still reverberates with the moral consciousness of the African man, most residents visit the red lights districts under the cover of the night. In fact, the sex hawkers were also discreet about their business and things became worse when there was a promulgation against prostitution in Colonial Lagos. Suffice to mention that the sex workers were mostly from outside Lagos and so bore no shame to sell their bodies for money. They were patronized by low income earners who needed to satisfy their sexual urge, among other things.¹⁷

¹³ Michael, J.C. Echeruo, *op cit*, Pp. 37-85.

¹⁴ Michael, J.C. Echeruo, "Concert and Theatre in Late Nineteenth Century Lagos". In: *Drama and Theatre in Nigeria*. Retrieved from www.libraries.is.edu. Pp. 357-369.

¹⁵ Michael, J.C. Echeruo, "Concert and Theatre in Late Nineteenth Century Lagos" *op cit*, Pp. 360-63.

¹⁶ *Ibid*.

¹⁷ *Ibid*.

3.0 BELIEFS ABOUT DISEASE AND HEALTHY LIVING

Generally, the people of Colonial Lagos believed that good health is very important. In fact there is a general saying that "*ilera l'oro*" which literally translates to men that health is wealth. It is important to note that the concern and attachment of each of the groups in colonial Lagos towards medical treatment was a function of the race as well as educational level of the individual.

For those who were Europeans or non-Africans, the exploration of the opportunities and treatment available in orthodox medicine was utilized. For these people, there is always a rational and medical explanation for every ailment that may occur and so the best thing was to get a medical attention. The logico-rational orientation of these people was fundamental to their preference for orthodox medicine. The educated elites, returnees, and students were also in the same league with the non-Africans. Since they had been integrated into the European value system, they accept the primacy of traditional medicine and diagnosis over herbal treatment.¹⁸

The reverse was actually the case for the Africans. For them, two explanatory models are adopted in unraveling an ailment. The first and basic is the physicalist explanation in which the sick gets herbal medical attention to cure his ailment. It is only after this has failed that the African employs a spiritual intervention in the issue. The belief is that herbs will cure whatever ailment is natural but not all ailments are actually natural. In the light of this, only a spiritual intervention can be valid in combating a spiritual attack or ailment. Thus, in doing this, they consult Oniseguns of different ilks.¹⁹

It must be noted that the colonial period in Lagos as earlier noted was ravaged by series of diseases of which sexually transmitted diseases (STDs) were highly predominant. For instance, before the outbreak of World War II, British Colonialists sought to tolerate prostitution because crime, STDs and other activities known to be associated with it did not pose a recognizable threat to imperialism. The official policy of regulation or toleration changed to one of prohibition from 1940, when military authorities feared that the increasing incidence of STDs among the African rank-and-file of the colonial army was attributable to their promiscuous sexual affairs with prostitutes.²⁰

Furthermore, rumours about the connection between sexually transmitted diseases and heart diseases also created a formidable fear among civil and military authorities. Confirming the popularity of this rumour, Colonel Bringham (the assistant director of medical services-military) insisted that medical authorities should not dismiss the assumption that the African type of gonorrhoea was more deadly than the Western type because it caused "*a cold in the heart*".²¹

¹⁸ Moses Makinde, *A Critical Analysis of Causality in Colonial Nigeria*. Ile-Ife: Obafemi Awolowo University Press Ltd, 198, PP. 23-53.

¹⁹ Ibid.

²⁰ Interview with Mrs. Agnes Kolawole, 68 Years, Retired Headmistress, Surulere, October 14th, 2013.

²¹ Ibid.

There were common ailments and other chronic diseases that ravaged the people of Colonial Lagos. For instance, some of the common ailments include Malaria, Tetanus, Debility, Diarrhea and Enteritis. All these diseases could be treated. However, there were others which usually last very long on the carrier. Some of these chronic diseases include Epilepsy, Bronchitis, and Whooping Cough among others. The people of Colonial Lagos worked hard to ensure that healthy living is promoted.²²

4.0 STDs IN COLONIAL LAGOS

The history of Sexually Transmitted Diseases in Colonial Lagos can be said to be as old as the people themselves. In other words, the existence of sexually transmitted diseases among the people of Lagos preceded the coming of the colonial masters.²³ Research has shown that the people of pre-colonial Lagos also suffered from Sexually Transmitted Diseases. During this period, there were no biomedical services and as a result, the people engaged the services of traditional healers who were the major source of health care delivery of the period.²⁴

However, the colonization of Lagos by the British colonial government from 1861 upwards greatly increased the prevalence of Sexually Transmitted Diseases in the area. Several factors were responsible for the spread of Sexually Transmitted Diseases in Colonial Lagos. Some of these factors include poverty, prostitution, urbanization, the late intervention of colonial government among others.

5.0 POVERTY

STDs had existed in Lagos before the coming of the colonial masters. However, the imposition of colonial rule increased the menace. For instance, the poverty level of the period made a sexually active segment of the population to migrate from the hinterland to the urban areas in search of greener pasture. In the process of their search, some of them were lured into having sex indiscriminately. According to Mr. Ezekiel Lewis, "*Young girls especially hawkers on the process of selling their goods, were lured into having sexual intercourse with those working in colonial sites.... Which usually resulted in the spread of sexually related diseases and unwanted pregnancies?*"²⁵

Poverty continued to aggravate Sexually Transmitted Diseases in Colonial Lagos, because the economy of that period was more favourable to the colonial officials. The few existing jobs were often given to the wives of the colonial administrators at the expense of their African counterparts, thereby making it extremely difficult for indigenous people to make ends meet.

On October 6th, 1946, following the controversial new Lagos Township Ordinance of 1943, the *Lagos Daily Service* published an unsigned letter from one of its readers who wrote in to complain about the 1943 ordinance. Although the law had been passed three years prior, it

²² Interview with Mrs. Agnes Kolawole, 68 Years, Retired Headmistress, Surulere, October 14th, 2013

²³ Interview with Alhaji Habibu Sukura, 70 Years, Rtd Colonial Clerk, Yaba, March 2nd, 2014.

²⁴ NAI Iba. Div. 1/1 File NO. 138, Annual Report for the Colony of Lagos, 1903, p. 21.

²⁵ Interview with Mr. Ezekiel Lewis, 78 Years, Former Indigenous Colonial Clerk, Isale Eko, October 5th, 2013.

had gone unenforced pending the end of the Second World War. When it was finally put into effect, contemporaries observed that it featured two fundamental innovations in child welfare legislation for colonial Lagos.²⁶

It is also very important to note that this ordinance helped greatly to control the activities of young people particularly that of girl hawkers. The first innovation, which was roundly lauded, concerned the establishment of juvenile courts and a juvenile justice system. For the first time in the history of Lagos, child offenders were to be managed through a distinct set of legal policies and institutions from adults. However, the second innovation, which was generally condemned, was also the specific target of the anonymous letter writer's criticisms. It concerns a section of the ordinance that restricted street trading by children in Lagos. The street trading regulations of the children and young person's ordinance of 1943 were the first of a string of similar laws passed in the latter half of the 20th century that made itinerant trading or hawking by children a punishable offense. The regulations prohibited all children under 14 from selling petty goods in the street and from playing, singing or performing for profit. Older girls between ages 14 and 15 were subject to additional specific restrictions, the social geography of the city and whether or not they were biologically related to their supervisors. According to Mr. Isaac Oluwole one of the clerks in colonial court that "*The exclusion of girls under the ages of 14 and 15 from hawking in the central business district, heavily European neighbourhoods and in the vicinity of bars, brothels and military barracks, was to control the regular reported cases of sexual molestation on these girls.*"²⁷

In addition to the above, reduction in the area of sexual activities means reduction in the level at which Sexually Transmitted Diseases are spread. However, the indigenous Lagosian did not at first understand the importance of these regulations. They understood them to place a de facto ban on hawking by girls. Few questioned the overall aim of the ordinance. As the anonymous letter writer remarked, "*Every worthy citizen should understand this ordinance as having been designed to achieve a worthy end.*"²⁸

It is also worthy to note that girls were not the only hawkers in Lagos, but hawking was a distinct practice of mainstream Lagos. Boys also hawked although hawking was not viewed in Yoruba societies as having the same pedagogical value for boys as it did for girls. Hawking was widely viewed by Lagosians as a normal part of the training of girls. But to critics, hawkers were associated with notions of crime, pollution, and illicit sexuality.²⁹

Girl hawkers, unlike boys or women who hawked were also highly sexualized in the imagination of critical observers who believed that hawking facilitated sexual trading among some girls while it made others vulnerable to sexual assault. The itinerancy of their work was

²⁶ NAI Iba. Div. 1/2 File No. 187, Township Ordinance No. 3, 1946.

²⁷ Report Presented by Mr. Isaac Oluwole, Former Clerk in Colonial Court.

²⁸ Ibid.

²⁹ Ibid

said to encourage some girl hawkers to imagine that they could escape the sightlines of respectable society and immerse them, unnoticed, in a hidden world of fast sex and money.³⁰

6.0 PROSTITUTION

Closely related to poverty and girl hawking in the area of factors that promoted the spread of Sexually Transmitted Diseases in colonial Lagos was prostitution. In other words, prostitution promoted the spread of sexually related diseases among Lagosians during the period under review. Prostitution does not enjoy a single universally acceptable definition. It has been defined differently by different authors. However, for the purpose of this study, we shall define prostitution in line with that of G.R. Scoth in his work titled *History of Prostitution*. According to the author, prostitution is defined as the act of engaging in sexual activities for some kind of reward such as monetary, personal satisfaction or in order to achieve a particular objective. In other words, prostitution involves receipt of reward, inform of money for sexual act.³¹

Therefore having examined what constitutes prostitution, it is also very important to note that prostitution preceded colonialism. However, it became highly prevalent during the colonial era in Lagos and other parts of Nigeria. Some scholars have also argued that even though, the illicit trade existed in the pre-colonial period, it only became worse during colonial rule. According to John Stewart, "*Colonial rule brought an increasingly monetized economy especially during the period 1912 and 1946 when modern currency and wage labour became the order of the day.*"³²

In addition, to buttress the above assertion, Professor Adebayo Lawal pointed out that workers in the railways, sea ports and harbor as well as the mines were paid in the new currencies. The new currencies were portable and quite easy to carry about unlike manillas, coppers, and cowries that were quite heavy. Thus, the excitement which came with the new currencies enticed young women to sell sex as a means to receive or get paid in the new currencies. It has also been argued that money remains the most enticing factor that led young women into prostitution. In colonial Lagos workers in the above mentioned places easily convinced these young girls through enticement using money. This has made some people to blame the men for their roles in promoting prostitution which in turn aggravated the spread of STDs.³³

More so, it has also been noted that the attitude of men toward sex is key to prostitution. For instance, most men seek sex outside marriage for pleasure, but women do so to augment their other means of livelihood. Therefore, as earlier noted, monetary gains was a major contributing factor that promoted prostitution in colonial Lagos. The prevalence of prostitution in colonial Lagos created serious avenue for protests. For example in reaction to the demands made by the Lagos elite women on the need to recruit women between the ages

³⁰ Saheed Aderinto, "Of Gender, Race and Class: The Politics of Prostitution in Colonial Lagos Nigeria, 1923-1958", *Frontier: A Journal of Women's Studies* 33, No. 3 (2012), Pp. 79-80.

³¹ Saheed Aderinto, "Of Gender, Race and Class: The Politics of Prostitution in Colonial Lagos Nigeria, 1923-1958", *Frontier: A Journal of Women's Studies* 33, No. 3 (2012), Pp. 79-80.

³² John Stewart, *Colonial and African Economy, 1900-1945* (Oxford: Oxford University Press, 1971), 16-31.

³³ Ibid.

of 40 and 50 years into the Nigerian police, so that they can better handle the issue of arresting prostitutes who have accused the male police of assaulting them, the then Commissioner of Police W.C.C. King made the following statement;

I cannot subscribe to the view that in Nigeria, women police between the ages of 40 and 50 years will be better able than the existing policemen to prevent prostitution.... I, cannot visualise them dealing with the screaming and swearing prostitutes, drunken merchants, seamen of all nationalities, touts and the rest of the unsavoury fraternities.³⁴

Therefore, the proposal for enlisting women in the Nigerian Police Force (NPF), which was first, brought to public notice by the Lagos Ladies League (Later the Lagos Women's League (LWL) in a petition to the governor of Nigeria in 1923, was officially rekindled by the Nigerian Women's Party (NWP) in 1944. The women believed that female offenders especially prostitutes were safer in the hands of women police as frontiers against the traditional male police. These women also argued that women police could best help in policing the influx of women of "bad" character who polluted the moral atmosphere of Lagos and lured underage girls into "houses of ill fame", as brothels were colloquially called. The advent of women police in Nigeria is therefore, closely connected to the history of prostitution.³⁵

It is also very worthy to note that Lagos's educated elite women were members of prominent Christian families of nineteenth and twentieth-century Nigeria. Representative personalities like Charlotte Olajumoke Obasa, Oyinkan Abayomi and Kofoworola Ademola among others, received Western education and later distinguished themselves in careers ranging from music, law and social science, to education, nursing and journalism in both Nigeria and the United Kingdom.

Moreover, the reaction of the LWL, the WWC and the NWP aid interpretation of how social and educational status influenced attitudes toward casual sex work. First, elite women viewed prostitution as a profession of uneducated, poor, and criminally minded women from the interior. However, even though, they decried the government's ineptitude regarding female education and worked to improve women's literacy by holding informal classes, they thought poverty should not motivate women to practice prostitution. Hence, they separated morality from social and economic circumstance.³⁶

7.0 URBANIZATION

Urbanization was one of the major factors that promoted the spread of sexually transmitted diseases in colonial Lagos. The metropolitan nature of Lagos at that period lured many people into Lagos. Even prostitutes in far away lands saw Lagos as a place where they could

³⁴ LASRAB Lag., W.C.C. King, the then Commissioner of Police addressing the issue of recruiting Females in the Nigerian Police Force, 1923.

³⁵ Ibid.

³⁶ LASRAB Lag., W.C.C. King, the then Commissioner of Police addressing the issue of recruiting Females in the Nigerian Police Force, 1923.

make quick money. STDs continued to escalate as prostitutes continued to go after colonial officials because, these colonial officials had the money and as well used it to lure aged and under aged girls into sexual immoralities. According to a young girl who was lured into prostitution by a senior woman in 1945;

She asked me to follow her to Ikeja, where I shall be better trained. We arrived Ikeja and I was given to a certain army who took my virginity and he paid 3 pounds to this woman, from there I was forced by her to become a harlot.... Please sir, ask me and I will tell you how I a little girl was forced to keep three oversea soldiers at a time.³⁷

Therefore, project sites were also a centre of making contact by these sex workers. Some went to the Railway Stations, while others patronized the bars, cinemas, brothels among others. The military also promoted the spread of STDs through their promiscuity.

8.0 LOCAL TREATMENT OF STDS IN COLONIAL LAGOS

Therefore, as earlier noted, there are different types of sexually transmitted diseases and some of these diseases were already known during the colonial period. The most commonly known sexually transmitted diseases in colonial Lagos especially at the earliest state of colonialism were gonorrhoea, syphilis and herpes. These STDs ravaged the people who had limited medical services.³⁸ Therefore, the following are some of the common STDs in colonial Lagos include Gonorrhoea, Chlamydia, Syphilis, Genital Herpes, Genital warts, and Trichomoniasis.³⁹

The people of colonial Lagos depended more on local or traditional medicine in treating their sicknesses which included sexually transmitted diseases. Several factors were responsible for their actions. The primary factor that is responsible for the local treatment of STDs in colonial Lagos was because the people reposed much more confidence in local medicine than in orthodox medicine. The local treatment was what they have been using for ages prior to the advent of colonialism and it had proven efficacious. They could not place how the drugs and injections which orthodox medicine offers could cure these ailments well and better than the herbal treatment. It is in view of this that the people settle for the local treatment in preference to the orthodox medicine.

For instance, during the early period of colonial administration, the people of colonial Lagos had limited access to modern health care services. The colonial government concentrated

³⁷ Saheed Aderinto, "The Girls in Moral Danger: Child Prostitution and Sexually in Colonial Lagos, 1930-1950". *Journal of Humanities and Social Sciences*(1, No. 2, 2007): 1-3.

³⁸ Idris Animashaun, *The Development and Growth of Medical and Health Services in Lagos, 1873-1960*. M.A. Thesis. An Unpublished publication submitted to the Department of History and Strategic Studies, Faculty of Arts, University of Lagos (Nov., 2011): Pp. 1 – 61.

³⁹ It is quite difficult to get the local names for these diseases. This is because the local refer to most STDs as Atosi and it could come in variants such as *atosi eleje, atosi ako, atosi abo, atosi oloyun, atosi elero*, et al. Herpes is referred to as *kurukuru oju ara*.

more on the treatment of those diseases that constituted serious threat to them, thereby relegating the treatment of sexually transmitted diseases to the background. As earlier noted, among those diseases that enjoyed special attention were malaria, chickenpox, smallpox, and leprosy.⁴⁰

Furthermore, another factor responsible for the people's dependence on traditional method of treating sexually transmitted diseases was that of poverty. Even when the colonial government created a sexually transmitted disease centre in the colonial hospital in the first half of the 1950s, the cost of treatment in this hospital was higher than what majority of the people (who were mostly poor) could afford. It then made these poor people to continue to patronize the traditional model. Similarly, the orthodox hospital was located at the cosmopolitan centres of the region, thereby making it very difficult for those residing in the rural areas to access because of the problem of inadequate or practical absence of infrastructural development.⁴¹

Traditional medicine practitioners in most cases were preferred by the people who believe that orthodox medicine can only cure sexually transmitted diseases temporarily. They rely on traditional health attendants because according to them, "Sexually transmitted diseases can only be cured permanently through the use of herbs". During the early period of colonialism in Lagos, people patronized traditional healers because of the belief that these traditional healers had spiritual powers capable of knowing what caused these sicknesses. In addition, the colonial people also preferred traditional medicine practitioners because they were more affordable when compared with the modern doctors.⁴²

Some scholars have argued that the availability of local herbs made the treatment of sexually transmitted diseases locally more pronounced in colonial Lagos. Native doctors also trained interested candidates who wanted to learn the practice. This made it possible for colonial Lagos to have many traditional health practitioners that were highly patronised. For instance, while Lagos doctors of orthodox medicine faced discrimination in the colonial medical service, native doctors continued to be well respected. They received high patronage from Lagos residents. Notable traditional health workers of colonial Lagos were able to cure some sicknesses using the following medicines.⁴³

9.0 COLONIAL AND TRADITIONAL METHODS OF TREATMENT

Traditional method of treating sexually transmitted diseases dominated the colonial period in Lagos. Local health attendants engaged in the treatment of several other diseases which included malaria, tuberculosis, and leprosy among others. In addition, some of these local

⁴⁰ Idris Animashaun, *op cit*.

⁴¹ Ibid.

⁴² NAI Iba. Div. 1/1 File NO. 138, Annual Report for the Colony of Lagos, 1903, p. 21.

⁴³ Uwaezuoke, U. Okonkwo, *Drinking in Lagos*. A Paper Presented at the 8th Biennial International Conference of the Drugs and Society in Africa, in Abuja, 23rd– 24th July, 2008.

health workers are also traditional birth attendants who delivered pregnant women of their babies.

S/N	Description	Mixtures	Response
1.	Malaria	Lemon grass, cent leaves, bark of mango tree and lime.	Cures any form of fever and acute malaria.
2.	Typhoid Fever	It is a yellow mixture, combining skin of pineapple, grape, lemon grass and pawpaw leaf.	It cures typhoid.
3.	Pile	The mixture contains dogo yaro, garlic, onions and camphor.	Cures pile.
4.	Sexually Transmitted Diseases	Cent leaves, whisky or hot (ogogoro) lemon grass, garlic and ginger.	Cures different types of sexually transmitted diseases.

Source: *U.U. Okonkwo, "Drinking in Lagos", 2008.*

The use of water and alcohol to prepare medicine for patients was and is still very common among traditional health workers.⁴⁴ Moreover, as earlier noted, notable traditional medicine men and women were scattered all over the area. Among these traditional health workers are:

Names and Residence of Colonial Traditional Health Workers

Name	Residence
1. Bayinbo Egba	Ita Onikoyi
2. Agbe	Ebute Metta
3. Adabioniweju	Idumagbo
4. Alabi	Idoluwo
5. Brimah Agoro	Ebute Ero

⁴⁴ Uwaezuoke, U. Okonkwo, *Drinking in Lagos*. A Paper Presented at the 8th Biennial International Conference of the Drugs and Society in Africa, in Abuja, 23rd– 24th July, 2008.

6. Otun Jaguno Ereko
7. Songotade Ereko

Sources: Payn, J.A.O. *Table of Principal Events in Yoruba History*.

The factors pointed out so far in this chapter have shown that several factors were responsible for the high patronage of the traditional health worker by the people of colonial Lagos. The inadequacy of health care services in the rural areas, coupled with the high cost of modern medical services collectively promoted the prevalence of traditional medicine in colonial period.⁴⁵

1.0 ORTHODOX TREATMENT AND CONTROL OF STDS IN COLONIAL LAGOS

Some scholars of African tradition have argued that the colonial government deliberately paid more attention to other diseases such as malaria, and contagious diseases such as chickenpox, smallpox, tuberculosis, leprosy among others, because they posed more threat to them than sexually transmitted diseases. Most of the colonial officials came to Nigeria with their wives or female partners and as a result felt that Sexually Transmitted Diseases constitute more danger to Nigerians.⁴⁶

Therefore, as earlier noted, during the period under review, the most common sexually transmitted diseases that were known to the people were gonorrhoea, syphilis and herpes. Other types of sexually transmitted diseases such as hepatitis, genital warts and trichomoniasis became more prevalent, according to reports, towards the end of colonialism in the region.⁴⁷

The orthodox treatment of sexually transmitted diseases in colonial Lagos started very late. Even when the colonial health workers created the sexually transmitted disease unit in the colonial hospital, a vast majority of the people were unable to get treatment from this hospital because of those factors earlier discussed.⁴⁸

Prior to the commencement of STDs treatment, orthodox health practitioners usually carry out diagnosis to ascertain what type of disease was present and what type of drug was required to combat such disease. The use of laboratory at this preliminary stage is very essential. Modern technology has made it possible for diseases to be detected and drugs prescribed through the use of the laboratory. However, during the colonial period, these technologies were grossly inadequate. Even where they existed, inadequate health personnel also constituted a serious barrier to the treatment of sexually transmitted diseases. Most of the colonial health workers particularly the doctors were specifically trained in the areas of surgery and contagious diseases. For instance, Oguntola Sapara was a British trained surgeon who returned to the Lagos colony and was appointed in January 1896 as an Assistant Colonial Surgeon. He served continuously in different stations for the next thirty-two years. He made many contributions to improve public health. Sapara and many others contributed

⁴⁵ Ibid.

⁴⁶ Idris Animashaun, *op cit*, Pp. 34-9.

⁴⁷ Ibid.

⁴⁸ Interview with Mrs. Kayode Alagba, 76 Years, Retired Nurse, Lagos Island, October 5th, 2013.

significantly in improving the surgical department of the colonial hospital. However, the STD department lacked personnel of such status. Most of the doctors that handled STD cases were specialist in other areas.⁴⁹

Therefore, it is also worthy to note that apart from the treatment of STDs, prevention and control of sexually transmitted diseases were also very essential. Unlike many other serious diseases, simple measures can prevent STDs. For instance, the most effective preventive method of STDs was and is still abstinence. This means refraining from sex completely. No sexual contact means no risk of developing an STD. Also, the practice of monogamy in which two partners do not have sexual relations with anyone else but each other, also greatly reduces the spread of sexually transmitted diseases.⁵⁰

In addition early diagnosis and thorough treatment prevented the more serious consequences of STDs, while halting the spread of the infection from person to person. This was more critical in STDs that did not cause symptoms, because those infected often did not know they risked infecting their sexual partners. Therefore, the complete dosage of drug treatment must be completed, even if early doses of drugs appear to alleviate symptoms entirely. The infection may still persist in the absence of symptoms, leading infected individuals to unknowingly spread the disease.⁵¹

11.0 OFFICIAL SILENCE ON STDS IN COLONIAL LAGOS BEFORE 1954 AND THE ESTABLISHMENT OF STDS CENTRE IN COLONIAL LAGOS

The colonial health officers wasted much time before addressing the challenges posed by the prevalence of sexually transmitted diseases in Colonial Lagos. As earlier noted, the colonial government concentrated mainly on the treatment of contagious diseases. This led to the early establishment of the popular contagious diseases Hospital in Yaba in 1873. While all these were going on, the issue of STDs were relegated to the background.

The issue of Sexually Transmitted Diseases among the people of Colonial Lagos started to feature prominently in colonial archives during the period after 1954. It was in 1955 that the colonial government created a Sexually Transmitted Diseases Department in the Colonial Hospital in Lagos. It is very important to note that the creation of this STDs department came rather too late because several people had died of treatable STDs in the area.⁵²

It is also very worthy to note that even the establishment of the sexually transmitted diseases department in 1955 did not immediately enjoy efficiency. This was because, other challenges such as inadequate health personnel and that of drugs compounded the efficiency expected of this department. Even when this existed skeletally, discriminatory treatment became the order of the day.⁵³

⁴⁹ Ibid.

⁵⁰ Interview with Mrs. Kayode Alagba, 76 Years, Retired Nurse, Lagos Island, October 5th, 2013.

⁵¹ Interview with Engineer Raufu Makinde, 70 Years, Medical Doctor, Ebute-Metta, February 2nd, 2014.

⁵² NAI Iba. Div. 1/1 File No. 229, Ordinance No. 10, 1878, Town and Public Health Ordinance, 1917.

⁵³ L.A. Ademiluyi, and S. Aluko, "Infrastructural Distribution of Health Care Services in Nigeria: An Overview". *Journal of Geography and Regional Planning*. Vol. 5, 2(5), pp. 104-110, May, 2009.

However, while apportioning blame to the colonial government over its official silence, we cannot gloss over the contributing effort of Africans who were resident in Lagos at this time. Many people did not take into cognizance these sexually transmitted diseases and as such did not bother to report such to the colonial hospitals. The patronage of local herbsmen did not help matters as such cases did not get to the ears of the colonial government. This is made worse by the fact it is generally believed that only an adulterer or fornicator can contract such an ailment and as such, anyone diagnosed of the disease is viewed with scorn and as such made data difficult on STDs in colonial Lagos. This is even worse when it is the woman that has contracted this as she is tagged a prostitute. If it is the man, the belief is that his wife or one of his retinue of wives has contracted it. This explains why the resort to local treatment was a viable option for them.⁵⁴

The fact that Colonial officers had not contracted the disease also pointed to the official silence. As expected, much of the activities of the colonial governments were those that were tailored towards making life comfortable for themselves and not because of the colonized. In view of this, cases of STDs were not recorded among the Colonial officers before this time and as such the need to have such a department that will cater for the welfare and research on the disease was not there. This is not to say that the colonial officers were not philandering with prostitutes as well but the fact was that such cases had not been recorded amongst them.⁵⁵

This silence may also not be unconnected to the fact that there was a prohibition of prostitution in colonial Lagos and as a result of this, many who had the ailment were skeptical about going to the hospital for fear of being found out and arrested. This approach and attitude explains why Gonorrhoea was the only sexually transmitted disease with a traditional name. This would not mean that other sexually transmitted diseases were not existent. Rather, the awareness and knowledge of the people about others was a minimal, thereby people confuse them with Gonorrhoea.⁵⁶

Prior to the establishment of the sexually transmitted diseases' department in the Colonial Hospital, the people of Colonial Lagos patronized the services of traditional health workers. The reason being that they were the only known source, through which STDs can be treated. Even though, these traditional health workers failed in many ways, especially as some patients died, the people continued to patronize them.

The major reason which led to the establishment of STDs treatment centre was because many colonial officials suffered from sexually transmitted diseases. The need to establish the centre was to ensure that colonial government officials who are carriers of STDs were treated.⁵⁷

Furthermore, the sexually transmitted diseases centre established in 1955 was dominated by colonial health workers. The indigenous people of Lagos were not allowed to work in this centre. This led to the denial of the indigenous people their required treatment. It also denied

⁵⁴ Interview with Mr Dimeji Ajikobi. 61 Years, Lecturer, University of Lagos, 18th July, 2014..

⁵⁵ Ibid.

⁵⁶ Interview with Mr Dimeji Ajikobi. 61 Years, Lecturer, University of Lagos, 18th July, 2014.

⁵⁷ Saheed Aderinto, "Of Gender, Race and Class: The Politics of Prostitution in Colonial Lagos Nigeria, 1923-1958", *Frontier: A Journal of Women's Studies* 33, No. 3 (2012).

some qualified Nigerian doctors who were trained abroad of engaging fully in their area of interest.

During the period under review, the colonial STDs centres mainly treated the colonial officials and their families. At the early period, services provided by the STDs centre were scanty. This was because of lack of drugs, necessary diagnostic equipment and inadequate medical personnel. However, as time passed by, the centre began to improve and more patients were treated.⁵⁸

The structure of the STDs centre in Colonial Hospital was such that lacked so many important equipment particularly at the early period of its establishment. As earlier noted, the centre started as a department in the colonial hospital Lagos. The structure at that period could only cater for few patients who ironically were whites because of the discriminatory nature of the services rendered then. Staff structure in the centre was such that it was entirely Europeans. It was after the agitation of the local people that the colonial government changed their attitude in their manner of recruitment.

Therefore, the achievement of the STDs centre during the early period was very poor. The discriminatory services rendered did not also help matters at all. However, the major challenge that faced the centre was that of inadequate funding. Inadequate funding was responsible for the lack of required hospital equipment. It also made drugs unavailable, thereby limiting the achievement of the centres. Other challenges that faced the STDs centre was that of inadequate health personnel and absence of required health technology.⁵⁹

From the foregoing, it has been made clear that colonial Lagos witnessed series of events in the area of health care services. The colonial government concentrated more in the control of contagious diseases such as chickenpox, smallpox among others. This led to the establishment of the Contagious Diseases Hospital that was located at Yaba. Colonial Lagos experienced continuous growth in the area of health as health education, environmental health, among others were encouraged. As earlier noted, the colonial government started to pay serious attention to sexually transmitted diseases in the second half of the 19th century. This was as a result of several deaths that were associated with sexually transmitted diseases during the period. Health care services in colonial Lagos were characterized by series of events that had direct bearing on the people.

CONCLUSION

It is also very important to note that the prevalence of Sexually Transmitted Diseases in Colonial Lagos coupled with other social vices led to the promulgation of several ordinances to checkmate the activities of young and underage girls in the area of prostitution. For example, in 1943, the British colonial government promulgated the ordinance that banned the

⁵⁸ Ibid.

⁵⁹ Saheed Aderinto, "Of Gender, Race and Class: The Politics of Prostitution in Colonial Lagos Nigeria, 1923-1958", *Frontier: A Journal of Women's Studies* 33, No. 3 (2012).

girl child under the age of 14 years from hawking or engaging in any activity that can be viewed as a commercial activity.⁶⁰

The impact of Sexually Transmitted Diseases on Colonial Lagos cannot be comprehensively discussed if the issue of social strata is not mentioned. For instance, the prevalence of prostitution which is one of the major factors that aided the spread of STDs in Colonial Lagos led to the agitation of the Lagos elite women on the need for the education of the girl child. They were of the view that illiteracy is a serious factor that encourages prostitution. Their agitation yielded significant results in the 1927, when the famous Queens College was established in Yaba Lagos. This school produced several women of great repute during the colonial period in Lagos. They also agitated on the need for the inclusion of female in the Nigerian Police Force. Their argument was that, this inclusion will reduce the excessiveness of the male police who were accused of adulating female offenders particularly the prostitutes. They argued that women between the ages of 40 and 50 should be recruited into the force so that they will be concerned with female related cases. This agitation is so important because, the recruitment of women into the Nigerian Police Force has some connections with this agitation.⁶¹

Another important impact that the existence of Sexually Transmitted Diseases in Colonial Lagos had on the people was that, it increased research on Sexually Transmitted Diseases. There is a common saying that necessity is the mother of all invention. This saying is true about colonial Lagos in the area of researches to combat these STDs. Even though these researches came a bit late, the fact remains that they experienced reasonable improvement during the period. For instance, more vaccines were produced, while more STDs were discovered through the use of modern laboratories. Also awareness on how to prevent, control and cure some of these STDs were created through radio, TV, conferences among others. It has also been argued that the discovery of new sexually transmitted disease put fear on the people of colonial Lagos and this helped in reducing prostitution among the sexually active population.⁶²

From the foregoing, it has been proved that STDs had series of impacts on colonial Lagos. These impacts cut across the socio-economic and political lives of the people. Another important issue discussed in this chapter were the factors that promoted the spread of sexually transmitted diseases in colonial Lagos. Among these factors were prostitution, poverty, poor sex education, inadequate health care services and personnel among others. It is also worthy to note that the exigencies of the period were such that led to the development of the health care sector and other related sectors.

⁶⁰ Interview with Mr. Smart Bankole, 72 Years, Former Staff Nigerian Railway Corporation, Ebute-Metta, March 4th, 2014.

⁶¹ Saheed Aderinto, "Of Gender, Race and Class: The Politics of Prostitution in Colonial Lagos Nigeria, 1923-1958", *Frontier: A Journal of Women's Studies* 33, No. 3 (2012), p. 82.

⁶² Ibid.