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ESSAY REVIEW

ANOTHER LIVINGSTONE?

The centenary of David Livingstone's death in 1973 produced numerous publications which, taken together, added considerably to our understanding of the man and his achievements.1 This was the first real overview of Livingstone from a post-colonial vantage point, which, however, seemed not to have produced any significant change of interpretation. The change that has taken place, foreshadowed by Martelli in 1970,2 has been the development of a much more critical approach to Livingstone as a person, exemplified notably in the centenary works of Jeal and Listowel; these, however, do more to 'debunk' than to improve our understanding of Livingstone's complex character.

Luckily John Murray, Livingstone's original publisher, saw that there was still a gap to be filled and so in 1978 published Ransford's sympathetic, but not uncritical, biography, David Livingstone: The Dark Interior — a title that neatly points to both the psychological nature of the study as well as the journeys into the heartland of 'the Dark Continent'.3 Ransford's basic thesis is that Livingstone suffered from a hereditary condition of cyclothymia, a manic depressive disorder, that rocks the sufferer back and forth between longish phases of depression and inertia on the one hand and phases of exuberant vitality and remarkable achievement on the other. In neither phase is such a person easy to get on with, as he swings from a general anxious misanthropy to an assertive, ruthless disregard of others (and even of the truth) in pursuance of personal ambitions which verge on delusions of grandeur. Such a psychological explanation is, I believe, very helpful in explaining what appear to be inconsistencies or flaws in Livingstone's character which earlier biographies either glossed over, so that they almost disappear, or exaggerated, so that they become simply dishonesty and greed for fame. With Ransford's interpretation, one is able to understand better Livingstone's unfeeling attitude towards the death of other missionaries, like the Helmores and Mackenzie, his hounding of associates, like Thornton, Bedingfeld and Kirk, his reckless insistence on the navigability of the Zambezi, and his months of inertia at Bambarre in 1870 followed by a transcendental belief that he was part of God's plan to reveal the sources of the Nile in Central Africa. This is not to imply, however, that Ransford's biography is simply an attempt to prove a medical thesis, for it is a general, full biography which, in view of the range of sources used (many of them for the first time), is the nearest to a definitive study that we are likely to have for some time.

But in history and biography, of course, there is never absolute definitiveness and at the very time that Ransford was producing his book, others were laying a new basis on which the next generation of Livingstone scholars will build.


Firstly, there is still room for further discussion of Livingstone's psyche, for Professor Gelfand has indicated that he does not accept Ransford's diagnosis of cyclothymia. He would explain Livingstone's 'difficult' personality as due to an obsessional neurosis, as indicated by his repeated visits to obstacles like the Cabora Bassa rapids and the Rovuma. Unfortunately Gelfand has not published a detailed explanation of this hypothesis (although there are several references to it, in passing, in his published work); nor, on the other hand, has Ransford published the detailed, chronological mood-chart of Livingstone on which his interpretation rests, which formed an important appendix to the doctoral thesis that preceded the published biography. There is obviously room for further debate and it would be interesting to see medical authorities argue the case out.

Secondly, there has been considerable bibliographical activity that will greatly ease the path of students of Livingstone. In 1976 appeared an annotated bibliography of Livingstone and Stanley, with some 800 entries (but no variants thereof) on or by Livingstone which usefully include letters and reports in The Times. Another bibliography appeared two years later, compiled by Lloyd and Lashbrook, which contains some 700 entries for which the numerous variants are supplied; for Missionary Travels and Researches (one of the most influential books ever written), for example, 25 variants are given. This bibliography is also useful in that its publication was deliberately delayed so that the 1973 centenary publications could be included (although neither Gelfand's article of 1974 nor Ransford's of 1975 is included — or in Casada's bibliography for that matter).

Then in 1979 came an even greater step forward with the publication of a catalogue of Livingstone's letters numbering a remarkable figure of 2,032 believed to have survived. This vast undertaking arose from a centenary seminar at the University of Edinburgh and its successful compilation owes much to the knowledge and indefatigability of G. W. Clendennen whose study of Charles Livingstone is also eagerly awaited. The catalogue consists of two sections. The first lists each letter chronologically and gives its physical description and location and details of where it has been published, in part

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4 Personal Communication.
5 'Livingstone's contribution to Malawi ...', in Pachai, Livingstone, 179; and 'David Livingstone — As I now see him', South African Medical Journal (1974), XL, 2637, 2640, 2641. There have, of course, been several, but unsystematic, references to Livingstone having an 'obsession' or being 'obsessive' or 'compulsive'; see M. Gelfand, Livingstone the Doctor (Oxford, B. Blackwell, 1957), 14; D. J. Siddle, 'David Livingstone; Mid-Victorian field scientist', and R. C. Bridges, 'The problem of Livingstone's last journey', in David Livingstone and Africa, 90, 97, 165, 167, 170, 171; and Jeal, Livingstone, 10, 251, 362, 371 (this last author, however, also, contradictorily, refers to 'manic-depression', Livingstone, 224).
7 J. A. Casada, Dr. David Livingstone and Sir Henry Martin Stanley: An Annotated Bibliography (New York, Garland Publishing, 1976). 224 pp., $22.15. Also published was their interlocking story, presented in extracts taken from their published works, nicely illustrated, but of no academic value, S. Newson-Smith, Quest ... (London, Arillion, 1978), 267 pp., illus. £5.95.
8 T. A. Simons (ed.), and B. W. Lloyd and J. Lashbrook (comps), A Bibliography of Published Works by and about David Livingstone 1843 - 1975 (Cape Town, Univ. of Cape Town Libraries, 1978), 115 pp., no price indicated.
or in whole. The second section collects the letters together under names of the recipients, arranged alphabetically, and gives a résumé of the contents; it is difficult to exaggerate the usefulness of this Section 2, for there are few subjects in the history of south-central Africa which are not touched upon in Livingstone's wide-ranging correspondence.

The result of all this work is, it is hoped, to lay a new standard of excellence for those who embark upon the study of Livingstone; but for the immediate future, probably, the sheer magnitude of the sources available will lead to a diversion of interest away from David towards those associated with him (like his brother, Charles, on whom Clendennen is working) or neglected aspects of the missionary endeavour in south-central Africa. One obvious example of this in the context of psychological interpretation — not treated by Ransford — is the whole question of the sexual behaviour of these missionaries and explorers. Enforced celibacy can “trigger” cyclothymia — but did David Livingstone in fact remain celibate in the interior, or was there a coloured son? Was Mary unfaithful to David and, if so, what effect did it have on David and his relationships with his family and the colleagues in question? Were homosexuals like Charles Livingstone and Thomas Baines attracted, because of their disposition, to leave the constraints of Victorian society and seek freedom in exploration; and how far were the homosexual relations of these two on the Zambezi-Expedition responsible for its problems? Some, no doubt (Freud notwithstanding), will find such questions distasteful; but the more we know, the more important such matters become, particularly if we do aim to provide psychological explanations.

It is therefore to be hoped that Dr Ransford and Professor Gelfand, with their knowledge of the sources and their medical training, may one day enlighten us further.

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