Social History of Medicine in Colonial India

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Lecture 03

Reforms Movements and Indigenous Voluntary Organisations.

Hello and welcome to yet another lecture -Lecture number 33 and this is on Reform Movements and Indigenous Voluntary Organisations which participated and contributed to healthcare during the colonial period. This again comes under the broader topic of non-state actors, non-state interventions. We already saw the role of missionaries and most of them came from outside though hey took local routes and became indigenised and continue to this day. But these are indigenous voluntary organisations and movements. Even as the colonial state constantly fell short of its responsibilities towards healthcare and broader social issues like women and children welfare, the arena opened itself to fruitful roles by these kinds of social reform movements and organisations within India.

In this lecture, we will have a select sampling just to give an idea of - it is not going to be exhaustive, because there are several of them in several different parts of India - what were they and what were the various kinds of interests and initiatives they showed. One is the Ramakrishna Mission which is already famous for several reasons in India. They had their part to play apart from all their spiritual works for which they are more commonly known. This mission was started in 1897 inspired by the life and teachings of Sri Ramakrishna Paramahamsa and Swami Vivekananda. It also, like the missionaries that we have been talking about, involved itself in those kinds of social activities like famine relief, flood relief and medical relief - especially during outbreaks of plague, cholera and smallpox kind of epidemics. For example, Swami Vivekananda spearheaded the sanitary mission which inspired young Bengali men - who were led by Swami Vivekananda's famous disciple Sister Nivedita - to serve plague victims by directly going to their areas and giving them succour. A more direct and enduring example is the mission's Home of Service. The roots of this Home go back to 1900 when three young men at Varanasi who were inspired by the teachings of Vivekananda, laid the foundation for this - looking at the suffering of the people. In fact, they not only looked and felt compassionate, they actually proactively went searching for them

-wherever they were - in the gullies, the streets, roads and the riverside ghats - wherever they were. They went out proactively, and brought such suffering and helpless and sick people and took care of them in what was called the Orphanage or the Poor Men's Relief Association - that was the original name. Whatever fund was required for getting medicines as well as bed, clothes and other medicinal, medical accessories, all of it, - the funds for all of it, was got by either donations - voluntarily given, or by these disciples going and begging from people. All these people - the sick people - stayed in this Orphanage. When treatment, proper treatment was needed, they were taken to the government hospital. When that was not very sustainable, they felt the need to start their own small dispensary - which was started in a rented building in 1900.

This kind of work impressed Swami Vivekananda when he actually made a visit to Varanasi. He then renamed it as the Ramakrishna Home of Service or Sevashram and affiliated it to the Ramakrishna Mission. Not only that, he also appealed for funds, and after his death, his famous disciple Sister Nivedita raised funds. Through all, this they were able to get a new building which is in its current location in 1900 - with 6 wards and 3 isolation wards and in total about 46 patients could be accommodated. This is one example of a specifically medical mission hospital. Now this particular thing itself has grown to a 230-bedded hospital in a sprawling campus of 13 acres with all latest gadgetry and infrastructure. Beyond this, overall as a mission, Ramakrishna Mission all over India, runs several hospitals, mobile medical units, nursing training institutes -continuing the tradition which was started during the colonial period.

Moving on to the other side, the western side, we take Bombay Presidency, there were several such examples doing different organizations doing different kinds of works. For instance, the Arya Mahila Samaj founded by women reformers, focused among other things, on women's and children's health. They did services like providing free milk to mothers and babies to enhance their health and also personal attention to them, advice to them, exhorting them about the importance of taking care of babies especially in the early days and weeks of birth. The Hind Mahila Samaj was another women's organization which again organized classes in hygiene, nursing and first aid. The famous Servants of India Society (in Bombay Presidency), - among its other social work - also focused particularly on sanitary activities. And in the Bombay Presidency there were seva sadans in different locations like Ahmadnagar, Poona and elsewhere They ran maternity homes, female dispensaries and welfare centers. Then there was this specific society called the Bombay Presidency Infant Welfare Society which was established in 1921 specifically with the aim of promoting infant welfare, giving information and aid to pregnant mothers and helping particularly during childbirth. They also maintained infant welfare centers. All of these together, greatly helped in bringing down the infant mortality rates. Not only these kinds of specifically social service-oriented society but sometimes even literary societies also could contribute in their own ways to the health sector, to issues of health. For instance in the Hindi heartland in Varanasi, the Kashi Nagari Pracharini Sabha was started basically to promote writings in the nagari script on This Sabha instituted an award in 1916 for the best book written various subjects. generally on science. But the award itself was named after someone who was a medical practitioner and one of the founders of the Sabha - Channulal - so it was the Chanulal Award. But it was used as an effective platform - particularly for promoting western medical books in Hindi. Then, there was again in Varanasi, this other association, the Health Improving Association which was established in 1921 by a group of educated youth. The aim was to create awareness about good health and also training fit and muscular youth for building a healthy nation. By this time, because of all the various colonial depictions of the emasculated and weak nature of Indians (those kinds of depictions which on the one hand, produced internalization of those things - people themselves feeling weak - but at the same time), there were also efforts to rectify and come out of it - this was also part of the emerging nationalist spirit - this attention the body building, locating that nationalism in the body itself and its characteristics like virility, muscularity and strength. Healthy people, healthy bodies were needed for building a healthy nation - that kind of consciousness.

All of these associations also show how western medicine and its ideas of sanitary requirements, hygiene, maternal health, infant health and all that, had greatly influenced the youth. First of all, these people, these youth had to be influenced in order to be able to influence the populace at large - that is something you have to note.

The field of nursing in particular, benefited from many of such initiatives by these kinds of organizations. For instance, again in the Bombay presidency, Ramabai Ranade's Seva Sadan offered to help Brahmin widows to be self reliant. It opened a school for training of nurses in 1911 so that those ladies could be trained and they could stand on their own legs through entering the nursing profession. Similarly the Matru Seva Sangh established in Nagpur in 1921 by two eminent social workers, also offered general nurse training in association with the Dufferin hospitals to assist women - and again, especially, here also, to assist widows to earn a living. And coming down south, in the 1930s, training in nursing and midwifery was provided for destitute women at the Avvai Home in Madras which was established by the famous Tamil doctor and politician Dr. Muthulakshmi Reddy.

Two other important names which are inseparable generally from women's liberation, women's rights, women's education in the colonial period - but particularly with regard to medicine also: the Women's India Association, WIA and All India Women's Conference, AIWC - these were organizations. Of course, they were started by European

women but they had predominant presence of Indian women. These two organizations were advocating a variety of women's causes particularly related to education. With regard to health, they were particularly worried about the high rates of maternal and infant mortality. They canvassed for better provisions for maternal and infant welfare. The WIA was founded in 1917 in Adyar which is in Madras. This was by Annie Besant. The AIWC was started in 1927 by Margaret Cousins, an Irish lady -in n fact inspired by a couple of articles she read in the *Stri Dharma* which was the monthly magazine of the WIA. They worked for the creation of awareness about the problems of early marriage or child marriage in particularly the Delhi Women's League which was the Delhi branch of AIWC which had mobilized support for the Sarda Bill.

What's the Sarda Bill? It's basically something passed as an Act. The actual name was the Child Marriage Restraint Act. The bill was passed as an act in 1929 which fixed the age of marriage for girls at 14 and for boys at 18. It's called the Sarda Bill - Later the Sarda Act - after the sponsor of the bill which is Harbilas Sarda. The association formed the Sarda Committee to register all marriages of small children and to send warning letters to parents pointing out the evils of child marriage and also to alert them to the kinds of problems they will get because of the enactment of the Sarda Act - the kinds of penal provisions that were there which they should be aware of and be cautious.

The AIWC also propagated its messages through its general journal - general journal since it had a variety of articles on a variety of subjects - Roshni. During the colonial era it had the first series, which was published from 1939 to 1945. Interestingly they also started something which was very innovative for that period - (now, we are talking about mobile health clinics and all that, but), as early as 1946 they started a van service for rendering health assistance to rural areas near Bombay and at that time itself it was such a hit. It was replicated in five other provinces by the year 1950. Both of them, AIWC and WIA campaigned also in another important area which was birth control and they passed resolutions in that regard during the 1930s. They called upon the local branches of the respective associations to open contraceptive clinics and to disseminate information about contraception, the methods and the tools available because they were very concerned that all the good work that they were doing generally with regards to improving women's condition, would come to naught if women were rendered weak by repeated pregnancies and therefore unable to use, or even enter, the various new avenues that were sought to be opened for them.

Interestingly, such issues were also taken up by broader social reform and even political movements. One good example is the Self-Respect Movement in the Madras Presidency which among its other broader works, took up birth control as an important area. The movement as such - the Self-Respect Movement - was started in the early 20th century in the Madras Presidency to challenge caste system and brahminical domination of society

by promoting rationalism, self-respect and social justice. According to the Self-Respect Movement, contraception was of immense importance for individuals to achieve personal emancipation. It was a common custom for this Movement to conduct self-respect marriages - basically which meant that they did not use brahmin priests because the movement itself was very much directed against brahminical domination and their presence. These kinds of marriages were presided over and officiated by the local Self-Respect Movement leaders. These were not just marriages - these were huge social gatherings, featuring speeches by not only the person who was presiding, but even other local and prominent figures of the Movement - even from outside. During such speeches, on these wedding occasions, the speakers regularly addressed the importance of contraception for achieving happy married life. After all it was a marriage, wedding function and so it was about how contraception could be fruitfully followed by the couple. Not only was it a matter of the couple who were getting married, it was also an important foundation for a good society. Basically the idea is that contraception which meant that you are waiting for a few years instead of the normal set orthodoxy (this starts after the marriage - from the eighth month, people start asking 'oh nothing is happening, what is happening?' - that kind of orthodoxy), - that set grove. Instead of necessarily following that grove, take your time and think about it, and then also, you do lot of self-discovery, greater understanding between the couple and different kinds of explorations, equations.. that itself is liberating rather than getting enslaved into that beaten track. It is another kind of a liberation. And it is also part of the solution to problems of poverty and other related disabilities.

We see the kinds of social reform movements, the kinds of organizations, apart from the other kinds of organizations we already saw - like missionaries. As, I said this is just a small sampling - but already we get an idea of the kind of works they were doing on various fronts - from the direct handling of the sick, and from nursing, and from training for that or training of doctors, to even issues of general nutrition, health, baby feeding, baby's health, up to even contraception. This itself shows the kind of breadth that medicine had acquired. We have been, from time to time, talking about medicalization we see how different fields had become medicalized. What earlier would have been private matters (like the age of marriage and having or avoidance of sex all that), now become medical matters and not only that, people beyond the field of medicine are also involving themselves in several different ways. Also, these go to show (since the broader topic is about the role of non-state players - this is a tradition that we still continue - of course the state has a huge role to play, but then this also shows) that there were so many other players and there were so many other ways in which issues related to health directly, and other issues contributing to good health, of both individuals as well as the society and nation, could be addressed. On that note, we will close this lecture and meet in another one. Thank you.