



INTRODUCTION OF COLONIAL MEDICINE IN MALABAR

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Abstract

The 18th and 19th centuries were generally considered as the age of searching for markets and different form of knowledge. In India's case as a result of colonial rule, the perceptions towards health, medicine and sanitation began to change. In the Indian society, the English educated Indian middle class endorsed western medicine in the health care field especially the compulsory vaccination, sanitation policy and modern method of medicine in treatment. Medicine and colonial Power were linked together. The western medical discourse occupied an extremely important place in the colonization of India¹. The introduction of western medicine in Malabar was an important mile stone in the development of modern health care. Ayurveda, Siddha, Unani and Naturopathy are the earliest known systems of Indian medicine prevailed in Malabar. Besides it, several kinds of folk medicines were prevalent in different parts of Malabar. The British health policy began with the introduction of vaccination for small pox in Malabar. Vaccination was introduced in Malabar in 1801. The people of Malabar were highly conservative and several epidemic diseases like smallpox, cholera, plague etc. had largely spread in Malabar. The climate condition of Malabar was caused for the spread of such diseases. Ayurveda, the traditional medical practice also lost its importance at the beginning of modern period². The Colonial medicine was spread in the ruins of indigenous medicine.

Introduction

The British introduced effective medicinal policies in India Alfred Crosbie had pointed out that British used biological means to colonize the rest of the world³. The bodies were the platform for colonial contestation and western medicine was the instrument for colonizing the body⁴. Besides it, the concern of health of European soldiers and civilians also helped in introducing western medical practices in India.

The nature of colonial economy and the ecological changes brought about under colonialism could have far reaching, and enduring effects on public health. Hospitals, dispensaries and maternal health care created a great change in the socio cultural field of Malabar. Western medicine was initially introduced for the benefit of Europeans⁵. Latter was made accessible to the Indian population, which derived as a tool of empire⁶.

Colonial Medicine in Malabar

The colonial medical practices are very effective and successful in Malabar, Civil hospitals were first opened in Malabar in the middle of the 19th century. In 1845, first public hospital opened at Calicut. After that hospitals and dispensaries opened at all Taluk centers and at important villages. In 1914, a medical school was founded at Calicut. With a view to improve the facilities, the government took management of hospitals in Calicut and Thalassery in 1920. Besides it, they also established women and children's hospital at Calicut, mental hospital at Calicut, two hospitals at Malappuram and Kannur and two Island dispensaries at Minicoy and Androth in Lakshadweep islands.

The mental hospital opened in 1872 at Puthiyara near Calicut and received civil mental patients from Malabar, South Canara, Coimbatore and Nilgiris. There are 65 hospitals and dispensaries on to every 89.2 Square miles⁷. The mission trust of South India maintained a hospital at Calicut and dispensaries at Kottakkal and Chombala. Madras Act of 111 of 1899 had been enforced in the three major towns in the district and Panthalayani Amsam in Kurumbranadu taluk. The outbreak of cholera was frequent and often assumed a severe epidemic form. Smallpox which was more prevalent in Malabar than in any other districts in Madras presidency⁸. In 1914, vaccination made compulsory in all the municipalities and the all districts. In 1906 the largest number of deaths from plague happened in Malabar.

Before 1893 the medical facilities in Malabar were inadequate⁹. Compared to Travancore and Cochin, Malabar was backward in regarding vaccination¹⁰. smallpox was one of the major epidemics in Malabar. Small pox had been prevalent throughout the district since the month of December¹¹.

As a result of religious belief and ignorance, many of the natives of Malabar refused to accept vaccination. Many medical officers pointed out that the paucity of trained personals in medical field and reluctance of the target group on religious grounds, became a big banner for achieving the goal of vaccination. There was great deed of misunderstanding among the rural population regarding the positive aims of government.

The report on vaccination of 1864 shows that the number of persons reported to have been vaccinated is less than in the previous years¹². Gradually vaccination was made compulsory in the municipalities. Kerala Sanchari, the native newspaper appreciated the compulsory vaccination in Malabar¹³. The number of operation will increase tenfold with a corresponding increase in the benefit to public. Kerala Sanchari, also highlighted how the British forcibly imposed western medicine. It was the complaints that had been levelled against smallpox vaccination¹⁴.

As a part of British sanitation propaganda, the health week celebration was started. Through this the authorities took steps for removing the existing ignorance and superstition among the people in the rural areas regarding smallpox, cholera, and other epidemics. The poverty of people and the absence of any sanitary precautions provided a fertile ground for the spread of epidemics. Cholera outbreak in Malabar was frequent and assumed a severe epidemic form

The need for preventive measure through public health care was emphasized by the Madras government in 1921. When a district health scheme was introduced, public health was separated from the medical department and separate health staff were appointed under a District Health officer. The scheme was introduced in Malabar in 1922 and a District Health Committee was formed with the president of the district and taluk boards as members. The duties of the committee were to co-ordinate medical relief, distribution of preventive medicine and public health propaganda and to control fairs and festivals.

Meanwhile the demand for state support to the various system of indigenous medicine was raised as a national concern by Indian National Congress. The Medical Registration Act of 1912 and 1914, which excluded the practitioners of the indigenous system evoked strong protests. The introduction of diarchy in the immediate post war years, brought health and sanitation under provisional government. In 1922, the government of Madras decided to give medical relief and appointed a committee to enquire about the condition of indigenous medical practitioners. However, during this time western medicine and health care means became popular as the result of the development of education, institutionalization of health care, and modern method of treatment.

The Collector of Malabar gave special attention to establishing hospitals at the different parts of the district. The British authorities banned the pilgrimage to Mecca because of the plague. In Calicut, there were many plague shelters and government allowed huge fund for the building of plague shelters. The government took several measures to control smallpox. M.T. Vasudevan Nair, the reputed Malayalam novelist described the pathetic condition of small pox in his work 'Asuravithu'. The government introduced large scale smallpox vaccination programmes. For this each district has a superintendent and assisted by two doctors and all of them were Europeans. The details about vaccination should sent to provisional court, district court and governing council by Superintendent. The awareness regarding vaccination among the people was the duty of District Magistrate. He had the right to punish those who were against vaccination. The Magistrate had the right to appoint only 28 native vaccinators.

In the initial stages, the native people did not accept vaccination. They believed that vaccination aimed to religious conversion and the killing of children. However the British government decided to resist such a notion by supplying rice and other food grains at the time of food shortage to those who were ready to vaccinate. Thus the people cooperated with vaccination. South Malabar was more progressed in vaccination than North Malabar.

In 1910. Madras government decided to establish veterinary hospitals in each district and it was also at Calicut. The Prince of Wales dispensary started in 1908 in memory of prince of Wales and queen who visited India. At the time of beginning it was known as Kallayi dispensary. The contribution of Basal Mission in the field of health was also significant. In 1903 they established a hospital for women and children in Calicut. Now it is known as Kottaparamba hospital Dr. Stock's contribution was great who dealt the health department of Basal Mission. In 1915 they established Mission hospital at Calicut.

The hospital, dispensaries and mental health care centres created rapid change in the socio-cultural status of women in Malabar. By the beginning of 20th century, child birth became increasingly medicalized in Malabar. Birth began to be attended by western trained medical professionals. The first systematic attempt to provide western medical care to Indian women began in 1885 with the establishment of National Association for supplying female medical aid to the women of India. The baby welcome centres started in 1925 and it played significant role in the child health care. In cases of itching, edema and other skin infections, ointments are applied to children. The activities of women missionaries came to Malabar during 1860's and established hospitals, dispensaries and training centres for midwives and nurses. They used maternity service as a tool to Christianize and to project western ideologies.

Conclusion

The most important changes from bio-medical development were the feeling of 'Hospitalism'. Hospitalism had opened the doors of pharmaceutical industry. As a result of it the consumption of allopathic drugs increased rapidly. The colonial power and hegemony imposed through the introduction of colonial medicine in Malabar. Through this the British colonial government had a hidden agenda. They introduced colonial medicine for the benefit of them. The public health policy of the Britishers aimed the utilization of public wealth. The colonial government introduced many policies for the decreasing of indigenous medicine. Through colonial medicine, the Britishers imposed western civilization, colonial power and its hegemony over the native people of Malabar.

Notes and references

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