Medicine and Colonialism (post-1600 C E)

Burton Cleetus
4 Credit Course
MA and MPhil

Mode of Evaluation:
2 Tutorials: 2 Credits
End Semester Exams: 2 Credits

This course deals with the history of multiple medical traditions in the modern world. Historically medicinal practices have been integral to the cultural contexts in which they were located, and accommodation and adaptation of new knowledge of drugs and diseases have enriched healing traditions. For some time now, scholars have been exploring this complex relation that shaped both medical knowledge and colonialism. Medicine and science are no longer seen as politically neutral: their history, as is widely recognized now, is implicated with issues of power and domination. The politics of healthcare was intimately connected to forms of social control and technologies of state legitimation. Studies on the social history of medicine, therefore, can open up new domains of historical understanding, and allow us to reflect on the nature of state and society in modern contexts.

The course will engage with the debates that centred on the evolution of medicine in modern contexts. It will examine the role of colonial officials and missionary initiatives in understanding and controlling tropical diseases in African and Asian societies. Within the over arching themes of each of the modules, the discussion will move between concrete case studies and general overviews, examine changes within ‘local’ traditions like Ayurveda, Yunani and Chinese medicinal practices on the one hand, and explore the efforts to control epidemics like plague, cholera, small-pox, and malaria on the other.

The lectures will be organized under the following modules:

Module 1

MEDICINE AND MODERNITY IN EUROPE
The course will begin by discussing how medical knowledge was transformed in nineteenth-century Europe, evolving from the older galenic tradition, and explore how it was increasingly subjected to the regimentation processes of the state. From the sixteenth century, imperial expansion and the process of colonization had a profound influence on non-European medicinal traditions and cultural practices across the world. While the effect of power was felt in non-western societies, a reverse flow of ideas transformed knowledge systems in the west. In fact what has been familiarised as ‘western medicine’ or ‘biomedicine’ is in itself structured by a complex inter-relationship between Europe and the rest of the world. Thus the history of medicine in modern societies is about interactions, accommodations and transformations.

1.1 Trade and Medicine in Modern Europe
a. Trade in Drugs/Spices
b. Emergence of Botanical gardens in Europe
c. Translations and compilations of texts

1.2 Medicine and the Rise of Modern Europe:
a. Institutionalisation of Medical Knowledge
b. Establishment of Clinical Medicine
c. The Rise of the Drug Industry
Essential readings

Section A


Section B


Module 2
FROM MIASMAS TO GERMS: COLONIALISM AND THE TRANSFORMATION OF MEDICAL KNOWLEDGE

The reach of colonialism was often constrained by the outbreak of diseases that was encountered in the colonies. Understandings of diseases in the colonies evolved both in responses to the changing facets of colonialism as well as to shifting paradigms of disease causation in Europe. Evolving notions on the body of the colonial subject often increasingly strengthened racial and cultural differences between the coloniser and the colonised. State medicine as it emerged by the closing decades of the twentieth century often created a cultural crisis as it strengthened the exercise of state power over colonised bodies. This module will explore the shift from miasmic to germ theories of disease, track the history of a set of epidemic in the colonies, and discuss the emergence of the notion of public health.

2.1 Empire and Diseases
   a. Emergence of tropical Medicine
   b. Case Studies: Cholera, Smallpox, Malaria, Syphilis, Plague
   c. Public Health and sanitation

2.2 Biomedicine in non-European contexts:
Hospitals, medical colleges, Indian doctors, hospital assistants, nurses

Essential readings

Section A

Anderson, Warwick. Colonial Pathologies: American Tropical Medicine, Race, and Hygiene in the Philippines. 2006


**Section B**

Mukharji, Projit Bihari. *Nationalizing the Body: The Medical Market, Print and Daktari Medicine* (Anthem South Asian Studies)


**Module 3**

**RELIGIÓN, RACE AND GENDER IN MEDICINE**

This section will look at the way Christian missionaries acted as carriers of western modernity and healing methods, unpack the debates on indigenous and local medicines, and discuss the processes of change within the colonial societies of Africa, Indonesia, the Caribbean, and India.

**3.1 Christian Missionaries**

a. Leprosy and mission work in Africa

b. Medical mission in India

**3.2 Defining the Normal: The Asylum, Madness and Psychiatry**

a. The Asylum in Europe, Africa and India

b. Psychiatry and Empire

**3.3 Women and Medicine**

a. ‘Sexual Vices’ and the Emergence of Lock Hospitals

b. Midwifery, childbirth and women’s health

**Essential readings**

**Section A**


**Section B**


J Sadowsky. *Institutions of Madness in Colonial Southwest Nigeria*

Vaughan, Megan. *Psychiatry and Empire*. Introduction

**Section C**

Module 4
Medical Knowledge beyond Europe:
The status of bio-medicine under colonial regimes was linked to a variety of concerns of the colonial state. An exploration of the relationship between western medicine and localised healing traditions can explain the nuances of the larger implication of colonial intervention within non-European societies. Healing traditions in Africa, the Caribbean, South Asia and India were subjected to considerable strain in the wake of western medical intervention in the last two centuries. To exist within the frame of colonialism and the modern world, older medicinal practices had to be restructured, and they had to often reposition themselves within modern forms of standardization and institutionalization: they had to be represented in a language that met contemporary sensibilities, had to meet modern demands of production, techniques of packing, bottling and marketing. At each of these sites there were various forms of resistance or adaptation that mediated the drive of western medicine to acquire a hegemonic position.

4.1 Reformulation of medical traditions
a. India (Ayurveda, Yunani, Siddha)
b. Chinese and Tibetan Medicine

4.2 Adaptation and Accommodation
a. Drug industry and reformulations in Ayurveda, Tibetan and Chinese medicine
b. The rise of the alternatives: Non-western medicine in Europe and United States

Essential readings
Section A
Engler, Steven. “Science” vs. “religion” in classical Ayurveda. NUMEN, Vol. 50


Section B


SUPPLEMENTARY READINGS

Module 1


Tickner, A B. Core, periphery and (neo) imperialist International Relations. European Journal of International Relations 19(3) 627–646


Granshaw, Lindsay and Roy Porter, *The Hospital in History*, Routledge, 1989


**Module 2**


Echenberg, Myron. *African in the Time of Cholera: A history of Pandemics from 1815 to the Present*


**Module 3**


Arnel E. Joven. Colonial Adaptations in Tropical Asia: Spanish Medicine in the Philippines in the Seventeenth and Eighteenth Centuries


**Module 4**

Basham, A L. *A Cultural History of India*. OUP, 1998


Mukharji, Projit B. *Vishalyakarani as E. Ayapana: Retro-botanizing, Embedded Traditions and Multiple Historicities of Plants in Colonial Bengal, 1890-1940*.

Alex, Gabriele "Healing Practices and Health Explanatory Models of the Narikuravar (Vagri) in Tamil Nadu", *Societies and Medicines in South Asia, Newsletter Nr. 2. 2007*
