

Medical Missionaries in Travancore ,The Charitable State

Dr. Anand Lali Seena,

Asst.Professor of History,
Sree Ayyappa College for Women,
Chankankadai.

Abstract

Medicine played a major role in missionary work in Travancore, and in the informal partnership between the missionaries and the state. Both shared the view that dispensing western medicine constitutes charity work. From their Hindu perspective as well as their modernizing stance the Maharajas and the Travancore government had an idea of a charitable state and made great efforts to introduce western medicine. In this the missionaries were seen to be valuable allies rather than competing adversaries. The medical mission was more useful to the people through medical relief as one of the main function of the state. The state and the missionaries than maintained a more favorable relationship in the area of medicine than in that of education. With the help of the sovereigns of Travancore the missionaries could the sickle, assisted necessary help and made Travancore a charity state.

Key Words

1. Tranquebar : The south coast of India. 175 miles south of Madras in the Bay of Bengal.
2. Congregationalist : Protestant churches in reformed tradition.
3. Methodist : Who derive their practice and belief from the teachings of John Wesley.
4. Mariamman : Tamil folk goddess.

Introduction

Medicine played a major role in missionary work in Travancore, and in the informal partnership between the missionaries and the state. Both shared the view that dispensing western medicine constitutes charity work. From their Hindu perspective as well as their modernizing stance the Maharajas and the Travancore government had an idea of a charitable state and made great efforts to introduce western medicine. In this the missionaries were seen to be valuable allies rather than competing adversaries.

The missionaries clearly had practiced objects of their own in providing medicine to the people. One of the most important purposes of their medical activities was to establish contact with higher castes and to seek to convert them. The missionaries used full use of the opportunities of their medical activities provided. In this sense medical missions could have been a great threat to Travancore state, which clearly identified itself as a Hindu state. In actuality however the missionaries and the state developed a mutually favorable relationship in the area of medicine, a much more favorable one than in the area of education compared to Madras presidency, Travancore state seems to have paid greater attention to the health of its people from early times. In British India the primary concern of the medical administration was to secure the health of the colonizers, not the colonized for a variety of reasons atleast until the late 19th century. In Travancore the Maharajas attention was directed largely to his own people and not to a white minority and the ruler himself responded positively to western medicine. It was partly for these reasons that Travancore generally had better medical facilities than did other parts of India. In addition in the area of indigenous medicine Travancore state showed a much more positive attitude than the British authorities. And this positive attitude towards medicine whether western or indigenous, seems to be one of the principal factors that contributed to the higher standard of health in Kerala even today.

All the dawn of the 17th century by the nobility and sanctity of the priests the kings gave a free hand to the missionaries to propagate Christianity. The Christian missionaries sympathized with the people of Travancore and moved by their suffering due to incurable disease, decided to keep the people in getting medicine and to teach them cleanliness. They felt that the sufferings of the people were due to want o medical care. Hence they had decided to establish hospitals and supply medicines to the sick and the afflicted. The Protestant missionaries took the lead in this respect. The first missionary party with a complete medicine reached Travancore, the set of Protestants mission in 1706 along with Barthalemeous Henrich Pluteschau.

London Missionary Society

Of the missionary societies London Missionary society had the most substantial medical mission in Travancore even though the number of patients it treated was much less than the number treated in government institutions. Travancore state recognized the usefulness of its missions and made large concessions and donations to the London Missionary Society. London Missionary Society was established in 1795 by member from various denominations such as the Congregationalists, the Presbyterians and the Methodists. The first London Missionary in Travancore was W.T. Ringeltaube, a German Lutheran who commenced his work in 1806. The first Medical missionary sent to Travancore was A. Ramsay who was a pioneer in western medicine. His arrival laid the foundation for the modern allopathic system of practice in South Travancore by establishing a hospital at Neyyoor in 1836. Doctor Thomas Smith Thomson came to Neyyoor as a medical missionary in 1873 and with the donation of the Maharaja of Travancore he laid the foundation for a building to be housed the medical mission. A medical training class which was undoubtedly one of the most important activities for the expansion of the medical mission was started by Lowe in 1864. The first batch of students finished their course in 1867 and they were posted to the newly established dispensaries in Nagercoil in 1871. The first X-ray machine was installed in 1923 and it was the only one of its kind in South India other than Madras. Also it introduced radium for cancer treatment in 1930. In addition to the efforts of the London Missionary society itself another and perhaps more important reason for the development of medical work was that the medical mission received considerable help from the Maharajas and their government. The payment system for medicines and medical aid was first introduced by Travancore state from 1941. Apart from the annual subscriptions, the Maharajas helped the missionaries to establish hospitals and dispensaries. This was mainly because the medical activities of the missionaries were very useful to the state which was keen to change into modern state and also to show its charitable nature to the people.

The Church Mission Society

The Church Mission Society which was formed by the Evangelicals in the Church of England in 1799 commenced its operation in Travancore in 1816, about 10 years after the commencement of London Missionary Society in the South. Unlike the LMS the CMS did not

send medical missionaries to Travancore and consequently and not have any substantial medical institutions. Never the less, it did provide medical relief to the people, though on a considerably smaller scale and not on a permanent basis. In 1870 the CMS missionaries had dispensaries at Kunnankulam, Mavelikkara and Tirvalla. At Mavelikkara, a medical evangelist called G. J. Kuruvila was in charge of the dispensary in which 1134 patients were treated in 1870. In 1884, A.F. Paintee a CMS Missionary who was in charge of work among tribal people called Arrians, Presented report on his medical activities. He received medicines from Travancore government and other bodies including an institution called the Medical Missionary Association. He wrote that the death rate among one people has been far below the average, due under God to my being than able doctor to them. I only wish that my medical knowledge increased with my practice. This kind of practice was widely prevalent among the Church Mission Society missionaries in Travancore. However, recognizing the necessity of providing more professional medical relief the CMS missionaries had atleast two floating dispensaries in the 1930's. These were boats which travelled through the backwaters with medical facilities also had a dispensary and a maternity centre by the 1930's. The CMS sent some medical missionaries to other parts of India especially to the North West Frontier and in the 1880's the CMS founded Mission Hospitals in this area.

The Salvation Army

The formation of the Salvation Army by William Booth marked a unique event in the 19th century. Harry Andrews an orphan brought up by Emma was appointed to assist Major William Stevens in Nagercoil. The severe outbreak of Cholera in Travancore become the field of work for Harry Andreas. He started a small dispensary in 1892 and patents from far off regions came to seek the help of Harry. He also walked from village to village administering the sick and dying. Doctor Percy Trainee arrived in India and took up his medical appointment at the Catherine Booth dispensary in 1900. He was the first qualified Salvation Army medical missionary doctor. In 1930 Noble served as the palace physician to the Maharaja of Travancore. A new building was opened by sir C.P. Ramaswamy Iyer, Who was then advisor to Maharaja of Travancore. In 1938 the Salvation Army trained 67 youngsters and registered as nurses and twenty had further qualified as midwives. Doctor Sara Daniel an outstanding women medical

officer served more than 30 years in Catherine Booth Hospital. Modern equipments were gifted from Switzerland and an artificial limb centre was also opened. The medical services of the Salvation Army helped the people of Travancore to live free from the fear of death and chronic diseases. The medical officers co-operated with the Travancore government in reducing epidemics like Cholera. It also provided medical relief to the poor people whom the government institutions were not always willing to deal with a large number of high castes were created there as well.

Religious Activities of the Medical missions

The medical mission had two main roles for the missionaries in terms of religious activities. One was to convert people especially the higher castes and the other was to prevent converted Christians from re-conversion. It was widely believed that diseases were caused by supernatural things such as demons and goddesses. A number of Christians resorted to Heathen Practices when they became ill especially at the outbreak of small pox they tended to join their old heathen associates to make offerings to the goddess Mariamman who was supposed to cause the disease through religious possession or trances. It was an important function of the medical mission to cure Christians with western medicine as to prevent them from reverting to their forms of practices. But perhaps a much more important purpose was to establish contact with the higher caste which the missionaries had not succeeded in converting through their educational institutions. But a large number of high caste Hindus was treated in the mission hospitals. Undoubtedly many of these high caste patients came in contact with the missionaries for the first time. They were taught Christianity when they visited hospitals and dispensaries. Tracks or portions of scripture are given to all who can read the catechist spends sometime in personal conversation with the patients in the waiting room.

Meanwhile, these activities in a sense meant that the missionaries took advantage of the sick and the helpless people who were least able to resist, although undoubtedly most of the missionaries did not think so. They no doubt considered the medical activities as bringing 'true comfort and peace to their souls' as well as relieving their bodily pains. However, the medical activities of the missionaries as in the case of their educational activities, gradually became a

target for criticism from the higher castes. At the Sri Mulam popular assembly one member T. Marthanda, Tampi stated in 1907 that the missionaries used medical relief as well as education and attendance on courts for the purpose of conversion.

These criticisms had an influence on the missionaries themselves. In 1933 a subcommittee of the CMS in Travancore and Cochin stated that the ministry of healing should hence be mis used. So as to take the slightest advantage of the people's need of help for suffering to enforce upon them many religious teaching in which they would otherwise not have cared to come into contact.

In the area of medicine, the state and the missionaries maintained a very favorable relationship .Even in the 1930's when the state adopted apparently anti missionary policies, the Maharaja gave large donations to the salvation Army and to the London Missionary Society. This was mainly because the medical activities of the missionaries were very useful to the state which was keen to change into a modern state and to also show its charitable nature to the people. Both CMS and salvation Army sent well qualified doctors started medical classes and established well equipped and highly reputed hospitals and dispensaries sometimes in areas that needed special medical relief such as those notorious for malaria. Moreover for a state that had to respond to growing public demand for medical relief, the mission institutions were indispensable.

However, inspite of their quality and usefulness, the scale of the mission institutions was far smaller than that of government institutions. In the year 1900-01, the government institutions, treated more than six times as many patients as did the LMS. More over as a result of the development of indigenous medicines encouraged by the state more and more patients had the opportunity to be treated at the non-mission institutions. Their situation was very different from that of education. The missionaries educated a great proportion of people even in the 1940's. Thus the state did not consider the religious influence of the mission institutions in medicine as seriously as in education. Hence the medical mission was more useful to the state which regarded giving charity to its people people through medical relief as one of the main function of the statee. The state and the missionaries thus maintained a more favorable

relationship in the area of medicine than in that of education. With the help of the sovereigns of Travancore the missionaries could the sick, assisted necessary help and made Travancore a charity scale.

References

1. Koji Kawashima, Missionaries and a Hindu State, Mumbai, 1998.
2. P. Shangunny menon, A History of Travancore, 1983.
3. Samuel Matter, The Land of Charity – A Descriptive Account of Travancore and its people, Delhi, 1991.
4. M. Gopalakrishnan (ed.), Kanyakumari District, Gazetteer, Madurai, 1995.
5. C.M. Agur, Church History of Travancore, Madras, 1903.
6. Government OF Trancore, Administration Report of the Medical Department, Letter R.O.C. No. 3510, dated October 1908, Kerala statee Archives, Trivandram.
7. Dr. B. Sobhanan (ed.), Journal of Indian History, Trivandram, 1997-99.
8. K. Damodaran, Bharateeya Chintha, Trivandram, 1993.
9. Kerala history Association, History on the March, Ernakulam, 1965.