

Biswamoy Pati & Mark Harrison (Eds.). *The Social History of Health and Medicine in Colonial India*. London & New York: Routledge. 2009.

Mark Harrison's credentials as a historian of medicine in South Asia are beyond dispute. During the last two decades, he has published extensively on various aspects of disease, medicine, and science, with a particular focus on their intersections with British imperialism and war. In this new contribution to the field, Harrison joins efforts with Biswamoy Pati, whose name is familiar to scholars of South Asia for his wide-ranging work on the social history of colonial India, particularly in the state of Orissa. The volume under review is the second to be published as a result of their collaboration, the first being *Health, Medicine and Empire: Perspectives on Colonial India* (Orient Longman, 2001).

Like its predecessor a decade ago, *The Social History of Health and Medicine in Colonial India* brings together an eclectic range of scholarly contributions which testify to the vitality and continued relevance of this field of research. As the editors themselves suggest, the book is a survey of recent research trends, addressing not only topics that have received attention in the past, such as sanitary reforms and preventive medicine, mental asylums, and colonial attempts to regulate religious pilgrimages but also less explored themes such as medical research in colonial India, the practice of morbid anatomy, and the use of medical advertisements. In their introduction to the volume, Pati and Harrison provide a useful thematic overview of previous research on the history of medicine in colonial India, highlighting the essays' contributions to our understanding of public health, institutional history, race, and Indian medical traditions.

One of the most appealing features of the volume is the wide range of research materials and analytical approaches on which the authors draw. Some of the essays revolve around the analysis of selected texts, such as medical topographies, anatomico-pathological publications, and botanical treatises, as well as the newspaper and periodical press of the time; others, however, are less reliant on textual analysis and focus predominantly on archival investigation. For example, Partho Datta's essay uses Ranald Martin's well-known text *Notes on the Medical Topography of Calcutta*, published in 1837, to provide an alternative reading of the emergence of "public health" in this town, which highlights the connections with ideas of public good and utilitarian reformism in currency in Britain at the time. Like other works of a similar type published in Britain during that period, Martin's *Topography* emphasized the link between environment and disease; in so doing, Datta argues, the text helped to delineate the "public" from the "private" and to mark the former as an arena of intervention for the colonial state. A similar approach is employed by Mark Harrison in his essay on morbid anatomy in India. Analyzing the writings of James Johnson and William Twining, two popular medical authors, Harrison convincingly argues that unlike in Britain, where post-mortem dissections were still rare until the end of the eighteenth century, in India they were commonly practiced in military and naval hospitals since the middle of the eighteenth century. Like Datta, Harrison is also concerned with gauging the impact of such writings on colonial attitudes and practices. His analysis leads him to conclude that the texts were instrumental in the development of new ideas of racial difference between Europeans and Indians at the beginning of the nineteenth century. Disease, Harrison argues, came to be explained not only by reference to environment but also in terms of "constitutional differences."

Saurabh Mishra's essay on the Haj pilgrimage also discusses the connections between environmentalist arguments and disease pathology, this time in order to document the changing

nature and organization of the pilgrimage during the period 1865-1920. By examining the responses to cholera epidemics of the colonial administration and various European countries, as well as of the pilgrims themselves, Mishra shows how political and economic considerations led the British Indian Government to explain cholera as a “disease of locality,” thus ignoring contagionist explanations, which had already gained acceptance in Europe. The connection between British Indian sanitary strategies and geopolitics is also discussed in Sanchari Dutta’s essay on plague, quarantine, and empire, albeit in a different regional setting (i.e. Central Asia). Her conclusions are similar to Mishra’s, highlighting the extent to which British opposition to quarantine in the Persian Gulf—as well as Russia and France’s support of it—were connected to rival commercial and political interests in the region. As Dutta argues, plague quarantine was no less than “a viable means of exerting informal imperial control in Central Asia” (p. 87).

Another common thread which binds some of the essays together and should probably have been identified as such in the introduction to the volume is the issue of class. This issue is particularly visible not only in Amna Khalid’s essay on the role of the indigenous staff in implementing public health measures, Biswamoy Pati and Chandi P. Nanda’s discussion of leprosy in colonial Orissa, and Waltraud Ernst’s contribution on lunatic asylums in Bengal but also in both Projit Bihari Mukharji’s piece on pharmacology and indigenous knowledge and Madhuri Sharma’s discussion of medical advertisements. Khalid, for example, reminds us that colonial policy and practice were two distinct and not necessarily overlapping domains and that subordinate civilian, non-medical staff composed of Indian vaccinators, sweepers, constables, and *chaukidars* (guards) were instrumental in enforcing preventive and quarantine measures. Class hierarchies were particularly visible in the differential treatment to which members of the subordinate police subjected the higher and poorer sections of the population, a situation vividly illustrated by the print media of the time. In a similar vein, Pati and Nanda also reconstruct the class dimensions of leprosy in colonial Orissa and the extent to which colonial response to the disease was shaped by its implicit association with the poorer strata of society, a position sanctioned by the Oriya middle class. Finally, Mukharji’s account of botany during the colonial period shows how, during the nineteenth century, the colonial state came to derive its knowledge about Indian medicinal plants less from local intermediaries and more from its association with representatives of “elite/learned strands of ‘indigenous’ botanical knowledge” (p. 199). All these essays illustrate the condition of scientific knowledge and practice under colonial rule, reminding us, as Irfan Habib and Dhruv Raina have pointed out in a different context, that this was not simply a case of colonial transfer of science but an example of “science in struggle” (Irfan & Raina, 2007, p. 230).

Madhuri Sharma’s essay on medical advertisements explores another dimension of the history of medicine in colonial India that certainly deserves more attention in the future: the role of print in disseminating medical knowledge and information. Although some of the other essays touch on this topic as well—like Pati and Nanda’s discussion of the role of print propaganda in changing attitudes towards leprosy in early twentieth-century Orissa—Sharma is the only author who focuses explicitly on the interactions of print media and medicine. Her essay shows how the English and Hindi-language press was used to create a consumer market for medical products, in particular for medicines. Her findings are revealing in that they highlight the fact that print advertising had the potential to overcome, to a certain extent, barriers of “race,” as both Indian and European entrepreneurs drew on discourses about tradition and modernity to advertise their products to a middle-class audience. Still, print media could not actually overcome barriers of

class, given the fact that none of the products promoted addressed the health issues of the poorer sections of the population.

In sum, this collection of essays is an invitation to discover the fascinating history of medicine in colonial South Asia, as well as a potential source of inspiration for both junior and senior scholars who wish to engage further with the subject. Written in a concise and accessible style, the book is likely to become standard reading not only for scholars of South Asia but also for those with an interest in the comparative history of medicine.

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