

Recapitulating The Significance Of Socio Religious Reform Movements In The Amelioration Of Health Sector In Kerala

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ABSTRACT

Socio religious reforms that took place in various parts of the country have contributed in increasing the self esteem of the downtrodden sections in the society. The backward castes in the society were subdued and exploited by a section of caste Hindus. They were suppressed under the hegemonic power of the Bhramins. Their rights were denied and their livelihood was made miserable. Land and wealth of the state was under the proprietorship of the higher castes. They were denied all sources of empowerment opportunities. Education was monopolized and those who questioned it were brutally assaulted. The ruling authorities were mere puppets in the hands of the caste Hindus. Social norms and codes of justice were made according to their fancy.

Common people of the state were forced to undergo many ordeals at the hands of the caste Hindus. Superstitions, rituals, and beliefs were used as a tool to enforce hegemonic ideas of the upper class. Socio-religious reform movements in Kerala began as a result of these types of oppressions. The impact of this movement influenced all sections of the society. Public Health Sector in the state was a direct beneficiary of this movement. New hospitals and dispensaries were established in the state to accommodate the demands of the populace. Hence, Kerala was able to cater better treatment to its masses compared to its contemporaries.

Keywords- Health, Kerala, Caste System, Reform Movements, Epidemics.

INTRODUCTION

Socio religious reform movements that took place in Kerala were unique in nature as it included all class, creed, and sections of the society. Such a strong movement emerged in Kerala because the caste system in the state was rigid, and hence was entrenched in discrimination .The upper castes decided social norms which favored their outlook and the lower castes were forced to atone it accordingly. The caste Hindus enjoyed special rights and privileges; while the marginalized section had hardly any. People who challenged this were seriously punished. They manipulated and reinterpreted ancient texts to suit their will. During this time untouchability and unseeability

reigned supreme. The lower castes were subdued physiologically, psychologically, culturally and economically. This was the fundamental factor behind Swami Vivekananda's comparison of Kerala to a mental asylum.

Discrimination in the name castes was not limited to religions and practices. They were deep rooted in the government sectors such as Education and Health. The rulers of the land were not interested in providing either of this to the lower castes. They knew that giving education to the lower castes will empower them and hence they were kept out of the compound wall of learning. They were also banned from studying

religious text. Harsh punishments were meted out to those who challenged these decisions.

Advent of the British and the subsequent reforms that were introduced in the state played a pivotal role in inculcating the theme of social consciousness in the psyche of people. Western education was key in awakening a generation which was under the slumber of denial. As a result of this the commoners became accustomed with the happenings of the world. They were influenced by ideas of French revolution and the Bolshevik revolution. Concepts like equality, liberty, and justice slowly crept into their mind. They started to think progressively and questioned the laws and superstitions of the time. They dumped rituals which were discriminatory and pointless with reasons. Hegemony of the upper classes was challenged and thus the foundation on which the caste system was based started to tremble for the first time.

Missionaries who came to Kerala saw it as an opportunity to spread their religion. They provided education to all castes and prompted the people to question the existing social norms of the time. The native rulers were unable to stop them because they were under the protection of the British Government. The commoners of the state swarmed into these institutions. The imperial government also forced the native government to change some of its attitude regarding education as they wanted educated people to do their chores. Even though the cardinal idea of these missionaries was conversion their contribution to the society cannot be forgotten.

ERA OF OUTBREAKS

The diseases that were rampant in the region posed their hardest challenge to Kerala's former native states, particularly Travancore and Kochi. Ayurveda and other popular indigenous medical systems were ineffective against many serious illnesses. The superstitions that were in vogue at the time contributed to an increase in mortality in

the state. Small pox, a fatal ailment, was thought to be the consequence of sins committed in a previous life. Malaria deaths were common and the sanitary conditions available in the area provided safe haven for these diseases. Chickenpox, Cholera and diarrhea claimed innocent lives every year.

Malnutrition, lack of public sanitation, and extreme poverty were the main factors contributing to the epidemic's emergence and spread. The state lacked the resources necessary to combat these illnesses. Western medicine was first established during this era. They were first hesitant to introduce western medicine in the native state. But eventually the rulers of the land were infected with the disease. Hence, they were compelled to begin immunization in the state out of fear of illness and death.

Malabar, a region under the Madras presidency, was where the western type of medicine was first introduced in Kerala. Malabar began immunizing its citizens in 1801. But they weren't able to capitalize on this as they were under direct control of British rule. Vaccination was first adopted by Travancore, a native state on the southwest point, ten years later, but they quickly caught up to Malabar. While Malabar had to wait more than 25 years to open a dispensary of its own, Travancore opened its first one in 1819. It wasn't until 1845 that they were allowed to open their first dispensary. Cochin's dispensary wasn't opened for another five years. Gouri Lakshmi Bhayi the ruler of Travancore took the initiative to vaccinate its people in the year 1813. When compared to Malabar and Kochi, the native state was a pioneer in offering western medicine to its people. Initially this form of treatment was restricted to the ruling authorities in the state. In a later stage it was opened to the general public.

RESISTANCE AMONG MASSES

The introduction elicited a negative response from the populace. For a variety of reasons,

people from various castes refused to receive vaccinations. Brahmins, who belonged to a high caste in society, believed that vaccination would cause them to lose their brahamnam. Bovine lymph was one of the key components in vaccination. This hurt the sentiments of Hindu community as cow was given equal status of a mother. Even those who are educated kept away from inoculation citing the side effects.

The state's lower caste population had the view that vaccination would cause bodily metamorphosis and provide them with bovine characteristics. The state's socioeconomic situation has not altered throughout this time span, which is another crucial point to be made. Therefore, an attempt to introduce vaccination without the necessary infrastructure was ineffective. Additionally, it prevented individuals from receiving vaccinations. Hence, the government ran into several difficulties. They attempted to coerce individuals into becoming immunized, which sparked violent demonstrations. The government made vaccination strict for its employees, students and inmates. But the general public was out of its ambit.

This led to showdown in the streets between public and the government. The government tried to arrest those who were not willing to get vaccinated. More than five hundred people were arrested for this offence. But as time moved on the fear of vaccination went away. The awareness program promoted through hospitals worked in favor of this treatment. The effectiveness of the new form of treatment brought in ailing people to its ambit. The backward castes were also attracted to the treatment. Ezhava and Nair community were the top benefactors of the western medicine.

DISCRIMINATION IN TREATMENT FACILITIES

Despite the fact that all classes received vaccinations, prejudice was evident in hospitals.

In patient facilities in hospitals were at first monopolized by the higher castes. Treatment for the lower castes was provided outside of the hospital grounds. Separate wards were allotted to the high caste Hindus and lower castes were barred to enter this area. This was same in the case of Hospitals under the Christian Missionaries. The followers of Jesus Christ were more interested in converting high caste Hindus to their religion than the low caste commoners. This was a paradox considering the fact Christianity propagated peace and love to all people irrespective of caste. Hence many of them went back to their old ways of treatment. They were deprived their right of life by the high caste elements. It was during this time the Socio religious reform movement gathered its momentum.

REFORM MOVEMENTS

Many caste organizations came into existence challenging the existing system which deprived the right to life. They tactically used their identity to become powerful groups, so that they could win their rights. The Malayali Memorial of 1891 and the Ezhava Memorial of 1896 serve as instances of how people's societal perspectives have changed through time. Leaders like Sree Narayana Guru, Chattampi Swamikal, Vaikkunda Swamikal, Mannath Padmanabhan, and Vagbhatananda became powerful entities in society with massive support from their followers. Fed up with the relentless exploitation and discrimination they started to clean their caste from superstitions and rituals which were dubious in nature. Organizations like Sree Narayana Dharma Paripalana Yogam (SNDP) and Nair Service Society (NSS) played a key role in breaking the caste barrier among people. They advocated for progressive western ideologies to be inculcated to society. By promoting western education, they promoted independent thought. People began to comprehend basic rights and demanded for better living conditions. They came

to understand the inescapable necessity of taking medicine and receiving medical attention. Consequently there began a call for improved amenities for the underprivileged classes.

Initially the higher castes in the society were not keen in inoculation. Their sense of fear and caste hierarchy prevented them in getting

vaccinated. There was only a nominal surge in the number of higher caste patients using inoculation services from 1893 to 1894. But during this time the marginalized sections in the society made full use of the opportunity. They were convinced on the efficacy of western mode of treatment.

Table 1 Caste Based Vaccination 1893-94

Caste	1893	1894
Bhramins	753	634
Kshatriyas	133	72
Malayali Sudras	15887	17099
Pandy sudras	3696	4150
Inferior castes	45442	53873
Muslims	5161	4283
Christians	29327	42863
Total	100381	122974

Christians were the main benefactors of western medicine in the erstwhile state of Kerala. The missionary activities in the state were one of the reasons for the Christians showing more

affiliation to the cause. Just like the upper caste they were given special treatment in these institutions.

Table 2 Patients treated in various Hospitals

Institution	Number of people treated in 1893	Number of people treated in 1894
General Hospital	13380	16805
Maternity Hospital	152	311
Fort dispensary	11208	11686

Thycaud Government Hospital	5576	8391
District hospital Quilon	10592	11164
District hospital Kottayam	7293	7589
District hospital Alleppey	12378	12853
Other institutions	116620	152370
Total	177199	221169

The lower castes in the native states were provided treatment outside the premises of the government hospitals. They experienced discrimination even at the hospitals managed by the missionaries. People from lower castes were not allowed to enter the wards for the caste Hindus. People sought western medical assistance from hospitals at the time of maladies. Pamphlets in the native language were circulated among the all castes of the society to create awareness of various diseases and its symptoms. An Ayurveda practitioner was stationed at important hospital to boost the confidence of the people.

The ruling authorities of both Travancore and Cochin promoted the utilization of western medicine against ailments. The Malabar region which was under the Madras Presidency was slow in this regard. The infrastructure development in the area was not the priority of the British. This took a heavy toll on the health indicators of the area. In Travancore the growing need for more treatment centers were identified by various organizations. This demand found its expressions in a petition submitted to the government in 1905. Pulayas were not allowed to enter inside government hospitals in the nineteenth century. A kitchen was converted to a ward for the Pulayas as a result of this grievance. These kinds of petitions and memorials were

submitted to various ruling authorities from time to time and it contributed for the development of Health sector.

Women's health status was one of the key areas that significantly improved over the time. The treatment of women in the household improved with the spread of reform movements in the state. Education among women also increased during the phase of socio religious reform movements. This had an everlasting impact on the health scenario of the state. As a result of this women became more aware of their health necessities. Nutritional intake among them also augmented during this era. Hence, there was a slow and steady decline on both infant mortality and maternal mortality. The strengthening of the Public Distribution System was monumental in enhancing the nutritional intake of the populace. Public Health care facilities were modified by the authorities for dealing with the increasing demand from the public. Muslim Community also underwent drastic changes as a result of the reform movements. Their initial inhibitions on the alien form of treatment died down. The governments that came into power were eager to carry on the progressive stance of their forerunners.

CONCLUSION

Socio religious reform movement of Kerala revolutionized all walks of life by changing the socio political fabric of the state. Both upper caste and lower caste population underwent radical changes and incorporated benevolent attitude to its framework. They were able to cast out many superstitions and rituals that were inhumane and discriminatory. New schools and colleges were set up in the state for providing education to the masses. The need for both public and personal hygiene was circulated among communities creating awareness among the general public. Medical Colleges, Hospitals and Medical stores were established all around for providing low cost treatment to its populace. Social consciousness was imbued into the psyche of common man courtesy to the Socio religious reform movement. This is the foundation on which the plush health sector of Kerala is moored on.

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