

*“Essentially Christian,  
eminently  
philanthropic”: The  
Mission to Lepers in  
British India*

**“Essencialmente  
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Mission to Lepers  
na Índia Britânica**

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The early history of the Mission to Lepers in India is an interplay between politics, religion, and medicine in the context of British imperialism. The Mission pursued the dual but inseparable goals of *evangelization* and *civilization*, advancing not only a religious program but also a political and cultural one. These activities and their consequences were multi-faceted because while the missionaries pursued their religious calling, they also provided medical care to people and in places that the colonial government was unable or unwilling. Within the context of the British imperial program, the work imparted Western social and cultural ideals on the colonial populations they served, inculcated patients with Christian beliefs, and provided medical care to individuals who had been expelled from their own communities. Physical healing was intimately tied to religious salvation, spiritual healing, and the civilizing process.

KEYWORDS: leprosy, Hansen’s disease, History of Medicine, missionaries, Medical Missions, India, Imperialism.

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*A história antiga da Missão para Leprosos na Índia é a história das relações entre a política, a religião e a medicina, dentro do contexto do imperialismo britânico. A Missão perseguia o par de objetivos inseparáveis da evangelização e da civilização, desenvolvendo não só um programa religioso, como também um político e cultural. Tais atividades e suas conseqüências eram multifacetadas, porque enquanto os missionários seguiam sua vocação religiosa, eles também forneciam cuidados médicos a pessoas e lugares que o governo colonial não podia ou não queria atender. Dentro do contexto do programa imperial britânico, o trabalho dos missionários passava ideais sociais e culturais ocidentais para as populações a que serviam, inculcando nos pacientes as crenças cristãs e oferecendo cuidados médicos a indivíduos que haviam sido expulsos de suas comunidades. A cura do físico estava intimamente ligada à salvação da alma, à cura espiritual e ao processo civilizatório.*

**PALAVRAS-CHAVE:** lepra, hanseníase, história da medicina, missionários, missões médicas, Índia, imperialismo.

“It’s terrible, doctor. Soon we’ll have no lepers at all,” laments a nun to Dr. Colin in Graham Greene’s 1961 novel, *A burnt-out case*; Greene describes the nun as “an old maid, without imagination, anxious to do good, to be of use. There aren’t many places in the world for people like that. And the practice of her vocation is being taken away from her by the weekly doses of D.D.S. [dapsonel] tablets” (Greene, 1961a, p. 18).<sup>1</sup> And, in a sentence, Greene captures a critical tension in the historical relationship between the sufferers of leprosy and their caregivers. Historian Sheldon Watts (1997, p. 73) characterized this anxiety more bluntly: “missionaries needed their lepers more than the lepers needed them”. Greene introduced the idea that some people are attracted to leprosy and its sufferers in a 1959 essay written while traveling to the Yonda leper colony in West Africa, doing research for the novel that became *A burnt-out case*. Although Greene situates the novel in a small, obscure leprosarium in the Belgian Congo operated by the earnest Dr. Colin with the support of a Catholic clerical order, Greene is most interested in leprosy not as a physical condition, but as what the sixteenth-century English writer Samuel Rowlands (1598, p. 24) “described as the defiled soule”. For Greene, leprosy is a moral and spiritual debilitation, as much as it is a physical one, and it is the dual nature of this enigmatic disease that attracted European and American missionaries to Africa, Southeast Asia, and the Indian sub-continent to care for those with leprosy beginning in the late nineteenth century.

In asking what it was that drew hundreds of largely middle-class, white Westerners to forfeit comfortable lives to become missionaries to leprosy sufferers, Greene’s concept of ‘leprophilia’ is useful for initiating a discussion of religious missions to those with leprosy in the late nineteenth and early twentieth centuries. A confluence of historical events marked the period: the expansion and the consolidation of the British Empire under the reign of Victoria; the opening of Japan to the West in 1853 and the end of the second Opium War between China and European powers in 1858, allowing for the official toleration of Christianity and the state protection of missionaries; the emergence of the Second Evangelical Awakening between 1858 and 1863 during when new missionary societies were founded and new missionaries dispersed throughout Europe’s growing empire; and, the revival of evangelical interest in Africa after the 1857 publication of David Livingstone’s *Missionary Travels and Researches in South Africa*. These larger forces coupled with two milestones in the history of leprosy during the 1870s: in 1873, the Norwegian leprologist Gerhard Armauer Hansen described the etiology of leprosy with *Mycobacterium leprae*, and in 1874, the Irish missionary, Wellesley Cosby Bailey, founded the Mission to Lepers, the first missionary society devoted solely to serving leprosy sufferers.<sup>2</sup>

Hansen's scientific work and its consequences in the late 1860s and the early 1870s posed a crisis for Christian missionaries.<sup>3</sup> Until that point, as sociologist Zachary Gussow (1989, pp. 2001-2) has suggested, the Christian tradition employed the concept of biblically defined lepers in a general and vague way, because the biblical definitions themselves were unclear and vague. In the late 1830s and the 1840s, the work of Daniel Cornelius Danielssen and C. Wilhelm Boeck in Norway, employing extensive clinical data and postmortem findings, marked what Rudolf Virchow described as "the beginning of the biologic knowledge of leprosy."<sup>4</sup> Danielssen and Boeck, particularly in their 1847 color atlas, provided a means to distinguish 'true' leprosy from the many skin conditions that were commonly mistaken for the disease. In isolating *Mycobacterium leprae*, Hansen went further by providing a scientific basis to identify 'true' leprosy, as his bacteriological findings provided the precision and the clarity that the biblical definitions lacked. Stripped of its cultural accretion, leprosy could be now defined as an infection by *Mycobacterium leprae*. This also meant that the Christian missionary community that had taken advantage of the biblical definitions' vagueness in their proselytizing had to recast their thinking of leprosy not as a moral condition, but as a physical one.

However, the missionary community saw advantages in the older, biblical conceptions of the disease, in part because they fitted more closely with the cultural and popular imagination of leprosy. Even as Hansen clarified leprosy's etiology, the Mission to Lepers promoted the erroneous but widely held biblical and medieval claims that associated leprosy with moral contamination, defilement of the physical body, and pollution of the environment.<sup>5</sup> Hansen's work showed a scientific basis for the contraction of leprosy, but the evangelical and relief efforts of missionary groups were predicated on beliefs that the affliction of leprosy was caused by moral failings and by physical and racial inferiority. As leprologist Thomas A. Stringer (1973, p. 454) later wrote, "it was in the interest of Christians to see modern leprosy sufferers as 'Biblical lepers'". Secular and religious missions to leprosy patients appealed to societal misunderstanding and traditions about leprosy and its sufferers to raise financial support and to promote their evangelical activities. Given the social and political circumstances of late Victorian England, it should be no surprise that it is difficult, if not altogether impossible, to disentangle and distinguish the rhetoric of political imperialism from medical imperialism and from religious imperialism. Each fades into and serves the interests of the other.<sup>6</sup>

Although the practice of medicine, science, and public health under Western imperialism and, in particular, their practice in British India have been two of the most active areas of medical historical scholarship for more than a decade, this paper considers two still developing areas within this history: the place of leprosy and its sufferers in the British imperial imagination and the role and the motivations of medical

missionaries in caring for them in India. Despite the fact that leprosy was a significant public health problem in nineteenth century India, with nearly 150,000 documented cases and with some medical officials warning that there were as many as a million cases, leprosy in India has not garnered significant attention from medical historians. The two leading historical studies of medicine and public health in British India together mention leprosy in passing fewer than ten times, and even fewer articles on the subject exist in the scholarly literature (Arnold, 1993; Harrison, 1994).<sup>7</sup> Even less historical analysis has been done of the activities of medical missionaries generally, much less those caring specifically for leprosy in India. Standing true is David Arnold's observation in 1939 (p. 244) that "the extent to which missionaries were successful disseminators of Western medical ideas and practices in India remains, for the present, a matter of speculation as it has yet to receive serious scholarly attention".

This paper then considers the interplay between religion, politics, and medicine in the context of British colonialism of India by examining the work of Wellesley Bailey and the Mission to Lepers, the missionary group Bailey founded in 1874 to aid leprosy sufferers, first in India and later throughout the British colonies. They pursued the dual but inseparable goals of 'evangelization' and 'civilization', advancing not only a religious program but also a political and cultural one. In the process, the missionaries constructed for their metropolitan audience and supporters an image of the colonial leper that fulfilled their cultural imagination and expectations of leprosy and lepers and reinforced the wider need for British imperialism. The images of lepers underscored their racial and moral inferiority, and reiterated the burden that the British had assumed in India (and elsewhere) to civilize its colonial population. These activities and their consequences were multifaceted because, while the missionaries pursued their religious calling, they also provided medical care to people and in places that the colonial government was unable or unwilling, an activity that the historian Rosemary Fitzgerald (2001) has called "clinical Christianity".<sup>8</sup> Within the context of the British imperial program, the work of the missionaries was simultaneously political, religious and medical, imparting Western social and cultural ideals on the colonial populations they served, inculcating patients with Christian beliefs, and providing medical care to individuals who had been expelled from their own communities. Physical healing was intimately tied to religious salvation, spiritual healing, and the civilizing process.

### **Biblical mandate against the 'imperial danger'**

Late nineteenth century missionaries to those afflicted by leprosy identified the biblical basis of their missions in two New Testament passages:

And a leper came to Jesus, beseeching Him and falling on his knees before Him, and saying, 'If You are willing, You can make me clean.' Moved with compassion, Jesus stretched out His hand and touched him, and said to him, 'I am willing; be cleansed.' Immediately the leprosy left him and he was cleansed (Mark 1: 40-42).

Jesus summoned His twelve disciples and gave them authority over unclean spirits, to cast them out, and to heal every kind of disease and every kind of sickness . . . 'And as you go, preach, saying, 'The kingdom of heaven is at hand.' 'Heal the sick, raise the dead, cleanse the lepers, cast out demons. Freely you received, freely give' (Matthew 10: 1, 7-8).

Almost all missionaries regarded their work as imitating Jesus' actions, but also directly fulfilling his instructions to those who considered themselves his disciples. Wellesley Bailey and the Mission to Lepers, and other missionaries and societies explicitly reiterated that their work with leprosy sufferers was biblically prescribed. For instance, Reverend Edward Guilford, serving in Tarn Taran, India, with the London-based Church Missionary Society, affirms in a May 1890 speech at Exeter Hall describing the efforts of the Mission to Lepers (quoted in Bailey, 1899, p. 112):

To seek out men like this, burdened with sin, tortured by pain, and cast out from the society of men, and to bring them into the blessed fellowship of saints, and to alleviate their sad lot, is the work which the Mission to Lepers is doing in India. And can we, my friends, wonder that God has blessed their labours? Was it not the work which our saviour himself came to do? And was it not the work Jesus sent forth His disciples to do after His resurrection?

The administrators of the Mission to Lepers continued to be equally outspoken about the spiritual origins of the mission. "A new day began for lepers", reads one later Mission to Lepers publication, "when one of them dared to approach our divine lord and was cleansed by Him. Later, Christ gave to His disciples the express command, 'cleanse the lepers'. The extensive work on behalf of the victims of leprosy to-day is largely due to Christian sympathy and effort which the divine command has inspired" (The Mission to Lepers, 1932, p. 7).

It can not be overlooked that the arousal of missionary interest in leprosy and its sufferers coincided with the growth and the consolidation

of European imperialism in Africa and Asia during the nineteenth century.<sup>9</sup> By the nineteenth century, leprosy was rarely seen in Europe outside of Norway, but colonialism brought Europeans into contact with peoples where leprosy was endemic, raising the specter in the eyes of some European observers of a resurgence of leprosy in the Western world. Many of these observers saw the solution to the problem as two-fold: the forcible isolation and containment of leprosy sufferers and the civilization of the peoples where leprosy persisted. And some even suggested that missionaries were in the best position to carry out these measures because they were consistent with the Christian commitment and biblical mandate to care for lepers. Henry Press Wright, archdeacon of the Church of England in Greatham, Hants, cautioned in 1885 that while the 'loathsome' leprosy had disappeared in civilized societies, it persisted in colonial India, "eat[ing] into the nerve-tissues of [England's] people" (Wright, 1885, pp. 103-4, 106).<sup>10</sup> Wright envisioned a time when the land pressures of the island Great Britain would be relieved by its subjects living in its colonial possessions. The commercial and population exchange this development would entail required that the English address the 'imperial danger' of leprosy immediately. To address these concerns, Wright (1997, p. 4) advocated the creation of a Society for the Segregation and Comfort of Lepers. As Sheldon Watts writes, "Wright pleaded for Christian commitment to the despised 'Lazar in his rags,' who, like the lepers known to Jesus, 'invites us to hasten and help him'". For Wright and others, ridding the empire of leprosy and preventing its spread to the West, were Christian obligations which the British had assumed and which had to be realized.

The influence of the biblical definitions of and prescriptions for leprosy can be seen in Wright's writings. Wright and others saw the medieval zeal to the biblically-sanctioned isolation and expulsion of the infectious leper from the community as the reason leprosy was largely eliminated from the West after the sixteenth century. A return to such measures would again serve to eliminate leprosy from England's imperial lands. Wright's ideas received support from the medical community with the publication of George Thin's *Leprosy* in 1891. Thin (1891, p. 7) argued that "modern nerve leprosy" was the same disease described in Leviticus and called for the same measures advocated three millennia earlier, pointing to the success of such measures during the Middle Ages.<sup>11</sup> The forcible isolation of patients with leprosy became medically sanctioned in 1897, when, at the first World Leprosy Conference meeting in Berlin, delegates, including Gerhard Hansen and James Cantlie, endorsed a policy of strict isolation for lepers in the 'non-Western' world. As a consequence, the British colonial government enacted the 'Lepers Act of 1898' which mandated the medical and social segregation of leprosy sufferers in India. The 1898 Lepers Act placed a double-bind on Indian lepers as it required the isolation of any leper "who publicly solicits alms or exposes or

exhibits any sores, wounds, bodily ailment or deformity with the object of exciting charity or of obtaining alms," but at the same time left no option for lepers to earn a livelihood by prohibiting them from nearly all trades and occupations.<sup>12</sup>

The mass isolation policy advocated by the Berlin conference posed two problems for Europe's colonial administration. First, the maneuver of a foreign government incarcerating members of the local population would only further antagonize and weaken the already strained relationship between the colonial administrators and the native population. Second, and more importantly in the minds of administrators sensitive to the costs of the colonial enterprise, the expenses and the logistics of a widespread isolation policy would be prohibitive. In India alone, some conservative estimates in the 1890s placed the number of lepers at 250,000 in a total population of approximately two hundred million people (Executive Committee of the National Leprosy Fund, 1893, p. 49). Watts (1997, p. 41) has suggested that confronted with the enormity of the task, "colonial administrators resorted to face-saving tokenism".

It was into this situation that Christian missionaries stepped at the end of the nineteenth century, and both the colonial government and the missionaries stood to gain from the symbiotic relationship. The missionaries gained the opportunity to pursue their biblical mandate to aid the sick, and in particular, "to cleanse the lepers." The missionaries received the protection and the sanction of the colonial administration for their proselytizing. Missionary efforts provided an avenue for administrators to pursue their 'tokenism' without having to bear the expenses, as the missionaries raised private funds to support their causes. And though not fully articulated, missions extended the imperialist agenda, all the more important in the non-Christian, non-Western empire.<sup>13</sup> The question must be asked to what degree missionary groups were aware of the use to which they were being put in the colonial program? Or were they aware, but accepted the situation as a liability in pursuing their own program of Christian Good Works?

### **Founding of the Mission to Lepers**

A dramatic rise in missionary activity marked the period from 1858 to 1914, largely because of political events in the 1850s and 1860s that contributed to the opening of Asian and African countries to Western missionaries. For instance, Christianity was prohibited in Japan (to the point of being punishable by death), but following the establishment of formal ties between the United States and Japan in 1858, four missionary groups — the Episcopalians, the Presbyterians, the Reformed, and the Free Baptists — entered Japan between 1859 and 1869. Similarly in China, the largest mission in the world, the China Inland Mission,

began operations in 1865, following the 1858 resolution of the Second Opium War, which included provisions for the toleration of Christianity and missionary work (albeit with some restrictions). Missionary and historian Stephen Neill (1964, p. 286) estimates that about 1,500 missionaries went to China after 1858 and established about five hundred missions throughout all of the provinces. 1858 was also a watershed year for what was the most desired posting for nineteenth century missionaries, India, as British control over India was transferred from the East India Company to the crown on 2 August 1858, in response to the military mutiny and revolt of 1857-1859.

Wellesley Cosby Bailey (Figure 1) arrived in India a decade after the establishment of the British Raj. Born in 1846 in Abbeylax, Queen's County, Ireland, Bailey enjoyed a comfortable childhood provided by his father's position as an agent for the Stradbally Estate. Unsure of what he wanted to do with his life, Bailey left Ireland for New Zealand and then on to New Caledonia where he worked as a gold prospector and ranch hand. Neither line of work interested him very much, so he left in 1869 to join the oldest of his three brothers, Christopher, who was an officer in the British Army at Faizabad in north central India (now the state of Uttar Pradesh). His hope was to receive a commission in the North West Police, but the position required that he know Hindi, which he received instruction in, while staying with his brother in Faizabad. Shortly after Bailey arrived in Faizabad, the Eleventh Infantry to which Christopher Bailey belonged was transferred and Bailey was placed in the care of a Reverend Reuther, a German missionary posted by the Anglican Church Missionary Society. Reuther's example shaped Bailey's own future. Of Bailey's time with Reuther, Bailey's biographer Donald Miller (1965, p. 10) has written that "as [Bailey] watched the work of his German host and saw the great need of the people to possess a dynamic Christian faith to replace a too ready acceptance of conditions as they are, he found that there was a better vocation than that of a police officer beckoning him". After completing his studies in Hindi, Bailey volunteered to be a teacher at a school in Ambala, operated by the Ludhiana Mission and headed by Reverend J. H. Morrison of the American Presbyterian Mission in India.

At this point, it is instructive to comment on the course of Bailey's career from being a ranch hand in New Zealand to becoming a missionary in north India. Sheldon Watts (1997, P. 74) has pointed out that in the hierarchy of British colonial administration, "Administrators, military officers, medical doctors, missionaries and other professional sorts, whom home authority considered first rate, went out to India; the



Figure 1: Wellesley  
Cosby Bailey  
(Source: Jackson, 1911).



rest went 'somewhere else,' which is to say to Africa."<sup>14</sup> In deciding to pursue a missionary career while already in India, Bailey had bypassed the authority of a mission's home office in deciding where to post him. Bailey, however, could not avoid the kind of criticism that Sir John Willoughby leveled against the Church Missionary Society missionaries who he encountered in East Africa while hunting big game:

[They] were manufactured out of traders, clerks, and mechanics. The process is not a difficult one: a man, thinking he can improve his position by missionary work, has only to go to school for a year or two and learn a certain amount of medicine and carpentry, flavoured with a little theology, and he is turned out a full-blown missionary.<sup>15</sup>

Although it is unlikely that Bailey's financial station improved by becoming a missionary, it is not a stretch that his new position gave him social mobility and social security that he previously lacked. Leading figures and leading institutions in tropical medicine, including Ronald Ross and the *Journal of Tropical Medicine*, appealed to young people in England to consider a career as a medical missionary in the growing empire. Ross (1910, p. 183), for instance, romanticized the medical missionary's role in healing:

During the beginning of civilization in Egypt, Greece, and Rome, the priests were also the physicians . . . In my opinion, the missionary of today may still hold a similar position among the barbarous peoples he is called upon to educate . . . Often called upon to live in the remotest districts, far from hospitals, municipalities, health departments and officials, he is now exactly in the position of the priest of old, and to him still belongs the double duty of caring both mind and body.

Bailey, however, was not prepared for where his career would lead him next. Shortly after reaching Ambala in late 1869, Bailey and Morrison visited a small leper asylum attached to Morrison's mission. The asylum was an example of the relationship forged between the missionary community and the British colonial administration that was discussed earlier. Although operated as a missionary institution, a monthly stipend from the municipality and private contributions from British officers and civilians helped to maintain the asylum. As in Faizabad when he was influenced by the example of Reuther, his work at the Ambala leper asylum profoundly affected Bailey. Describing the experience in his 1924 autobiography, Bailey (1924, p. 8) wrote:

I became more and more interested and received great encouragement in my efforts for their spiritual welfare, several were baptized and became very earnest Christians. I was convinced that their first and greatest need was the Gospel, and that it would indeed prove to them 'the power of God unto salvation,' completely

changing their lives and their outlook on life, and giving them something to look forward to even in this life, but especially in that which is to come; and that it brought to them very real comfort in the midst of their dreadful sufferings. Thus was born the germ of what has ever since been the watchword of our beloved Mission, *viz*: The Gospel for the lepers.

Bailey (1924, pp. 8-10) soon realized that “taking them the Gospel” would also require providing lepers with housing, food, clothing, medical care, and other basic needs, but he was unable to convince other missionary groups or government officials to increase their commitment to the cause of leprosy .



Figure 2: Alice (Grahame) Bailey (Source: Bailey, 1924).

By 1870, Bailey was engaged to be married to Alice Grahame (Figure 2) of Blackrock, Dublin, and in his letters to her, he would describe his work among the lepers. Grahame traveled to India in 1871 and Bailey and Grahame were married in Bombay in the same year. Before leaving Ireland, Grahame had told of Bailey’s efforts to the three Pim sisters of Monkstown, Dublin; Isabella, Charlotte, and Jane Pim were long-time family friends of Grahame and were enthusiastic about Bailey’s work. Bailey and his new wife returned to Ambala to continue the work he had begun among the lepers under Morrison’s direction. Morrison left India not long after Bailey reached Ambala, leaving Bailey to run the entire mission. By the end of 1873, the Baileys, due to Alice Bailey’s failing health, would also leave Ambala and return to England and then on to Ireland in 1874.

Upon returning to Dublin, the Pim sisters invited the Baileys to meet privately with their friends and discuss his work in India, all in the hopes of raising support and funds for the leprosy cause. These private meetings were followed by an invitation to give a public lecture at the Friends Meeting House in Monkstown, at which Bailey (1924, p. 10) “told them simply of the terrible conditions of India’s lepers, physically, mentally, and spiritually, and of what we were trying to do, for just a few of them.” After the public meeting, with the Pims’ encouragement, Bailey printed and distributed two thousand copies of a pamphlet titled ‘Lepers in India.’ The charitable pursuits of the Pims were not usual for women of the late Victorian period, as F. K. Prochaska and Anne Summers have suggested. Drawing on their work, Maneesha Lal (1994), in examining the Lady Dufferin’s Fund, has written, “This type of charity had strong roots in Victorian society, and for leisured women, especially philanthropy was seen as the most obvious outlet for self-expression. Philanthropic work enabled wealthy women to venture outside of the

home and perform tasks which, precisely because of their voluntaristic, unpaid nature, and because they drew on an ideology of friendship, sympathy, were deemed acceptable."<sup>16</sup>

The Baileys returned to India in 1875 having joined the Foreign Missions of the Church of Scotland and received a post at Chamba in the Himalayas, where they built their first leper asylum (Figure 3). Bailey (1924, p. 12) later wrote that the asylum was "wonderfully blessed of God, in the comfort and help it has brought to many lepers, and better still, in the leading of many of them to the feet of the Saviour." Meanwhile, the appeals and the efforts of the Pims in Dublin were resulting in growing financial contributions to Bailey's work in India. By 1878, the total contributions were sufficient to support leper asylums at Ambala, Chamba, Sabathu, and Almora, and a fledgling society, the Mission to Lepers in India and the East, was formed to administer and to distribute the funds. Bailey instituted a "grants in aid" program whereby he would distribute contributions among leper asylums in India that needed the Mission's support. The Baileys remained in India until 1882 when the increasing bureaucracy of collecting and distributing donations required their return to Ireland. After his return to Dublin, Wellesley Bailey served as secretary of the Mission from 1886 to 1917, traveling, speaking, and writing extensively on behalf of the Mission's cause.<sup>17</sup> By the time of his retirement, the Mission had an annual income of nearly £45,000 (approximately £1,375,000/\$1,990,000 in 2001 terms) that was used to help nearly 15,000 patients in 87 asylums in 12 countries and in cooperation with 37 missionary societies (Goodwin, 1987, pp. 49-50, 343-4).<sup>18</sup>



Figure 3: "Leper Women, Chamba Asylum" (Source: Jackson, 1911).

### **Operations of the Mission**

When founded in 1874, the Mission's charter stated its purpose as "to provide for the spiritual instruction of temporal relief of lepers and the children of lepers in India and such other countries to which its operations have been or may be extended from time to time, and in so far as lies in its power, to assist in bringing about the extinction of leprosy" (The Mission to Lepers charter). By 1910, there were approximately 4,500 European missionaries serving in India, representing approximately 130 missionary societies. The Mission to Lepers was the only one with a stated objective of serving lepers. The Mission, however, did not have its own missionaries or directly engage in evangelization. Rather, it provided funds to missionaries and to institutions from other missionary societies that requested support of their work among lepers. This financial support was inter-denominational and, in India alone by 1910, it provided funds to nineteen British, sixteen American, and three European Protestant missionary societies. As will be discussed later, Roman Catholic efforts among lepers were not supported and were often regarded with displeasure by Bailey and other Mission officials. As the finances and prominence of the Mission grew, it also began to establish and to build asylums in India and elsewhere, but continued to hire medical staff and workers from other missionary societies.

The Mission did not provide funds to all missionary groups that asked for its support. Rather, the asylums seeking support generally had to be aligned with the moral agenda and evangelical goals of the Mission. The asylums had to be segregated by sex, preferably on separate campuses; the untainted children of lepers admitted to the asylums had to be removed from their parents and sent to a separate institution to receive Christian teaching; the asylums had to engage in a program of evangelization and Christian instruction; and the Mission preferred that the administration of the asylum be largely Westerners rather than native Indians. The final component of the Mission-funded asylums was an expectation that the residents contribute to the asylum's operations as much as their health condition allowed. Erving Goffman (1961, p. 11) would later call such an operation a total institution, which he defined as "a place of residence and work where a large number of like-situated individuals, cut off from their wider society for an appreciable period of time, together lead an enclosed, formally administered round of life." The Mission, however, believed that the contribution of the lepers served another function, that of inculcating the residents with a sense of discipleship, Christian good works, and service. As one Mission publication describing the lepers' service asked, "Do they not, indeed, in a real sense follow the example of service our Divine Lord gave to His disciples."

Evangelization was directly tied to the disbursement of medical care. While the Mission to Lepers has always maintained that it was not

necessary for a non-Christian leper to convert to Christianity to receive medical care, it has also made clear that being receptive to Christian teaching was a pre-requisite to care. This is made clear in a report that Bailey receives in November 1890 from a Dr. Hutchinson, the medical superintendent of the asylum at Sailkot. Hutchinson (Bailey, 1899, p. 33) writes that

The evangelistic side of our work has been very interesting and encouraging. The work in the Dispensary every morning was commenced with a short address, which was always listened to with attention. Not once was there any unpleasantness. The audiences were often large, though it is not possible to have the whole of the patients present at one time, owing to the great distances many of them had to come. In the villages we often have very large audiences throughout; and in addition to the ordinary address a catechist went on preaching while we were engaged in distributing medicines. Nothing but kindness was experienced everywhere; and even bigoted Mohammedans became pleasant and friendly in sight of the medicine-chest.

The missionaries valued the time that the lepers were under their care and sought ways to extend that time because the patients were effectively a captive audience to their proselytization. The residential facilities of the asylums were constantly at capacity, as the medical staff, when possible, encouraged the patients to remain for extended care, promising medicines, food, and activities. And discreetly, medical missionaries in the 'leper fields' saw both medical and practical advantages to the use of chaulmoogra oil and its derivatives for the treatment of leprosy, not only because it was a seemingly effective treatment, but also because to receive the regimen, lepers had to return to the asylum frequently and regularly over many months, affording missionaries more opportunities to preach (Rogers, 1920, pp. 23-8). Bailey (1899, pp. 19-20) emphasized the importance of reinforcing the relationship between Christian teaching and physical healing, reminding Mission workers that "if it is the same hand which gives the medical relief that breaks to them the 'Bread of life,' the patients will be quick to discern the connection between the two, and they will gladly receive both at the same hand, while at the same time their hearts will be more open to accept the teaching."

The Mission to Lepers sought to extend their reach over India's lepers in other ways, particularly by broadening the definition of leprosy and by encouraging the colonial government to enforce the 1898 Lepers Act, requiring that lepers be isolated (forcibly if necessary) in asylums. By 1910, particularly in light of the passage of the 1898 Lepers Act, the Mission was the most significant influence in the care of lepers in the British administration of India. Mission officials, however, were generally dissatisfied with the Lepers Act because the colonial government lacked

the funds and the resources to fully enforce the Act, which meant in turn that the full potential of lepers did not come under the care of the Mission's asylums. Frank Oldrieve (1920), the Mission's Secretary for India, pointed to several problems with the Act enacted in 1898 and amended in 1903. Its enforcement was left to the individual states, and in the confusion of the British Raj with its combination of princely states and British-appointed governors, some states failed to implement the law. Enforcing the law meant local police were required to apprehend lepers and bring them to the asylums, a task which the police avoided as much as possible. Finally, the Mission felt that the definition of 'leper' employed in the law was not sweeping enough. The 1898 Act defined a leper as a person in whom "the process of ulceration has commenced;" the Mission wanted the Act amended to define a leper more generally as "any person suffering from any variety of leprosy."<sup>19</sup> In meetings of asylum superintendents at Purulia in 1908, at Chandkuri in 1911, and at Raniganj in 1913, Mission officials pressed for the expansion and amendment of the Lepers Act. The network of asylums either directed or funded by the Mission meant that its resources and personnel exceeded those of the colonial government's modest leprosy control programs. Nevertheless, to point to the enormity of the task of isolating all Indian lepers, by 1910, only about 10,000 of an estimated 150,000 documented lepers in India were in the Mission's asylums (Rogers, 1920, p. 26).

### Competition for souls

By the late 1880s, as the activities of the Mission to Lepers increased in India, it faced growing competition from the dozens of other foreign missionary societies also engaged in evangelization. In 1886, when Bailey traveled to India for the first time after returning to Ireland to oversee the Mission's administration, he wrote of being pleased to see the 'earnest work' of the Church Missionary Society, the Free and Established Churches of Scotland, the London Missionary Society, the Wesleyan Mission and the American Episcopal Methodist (Bailey, 1888, pp. 21, 30, 161). Ecstatic at the possibilities held by evangelization (and conversion) in a country with nearly two hundred million non-Christians, Bailey, however, had to express frustration at the lack of funds and the lack of missionaries for the enormous task. Writing from Lahore in March 1887, Bailey is "convinced that, were the Church of Scotland but to realise the true state of matters — the glorious harvest of precious souls that is waving on all sides in the Panjab at present, and that is *not* being reaped, and *cannot* be reaped, just because of the paucity of labourers — they would never as a Church allow this state of matters to remain".

Addressing the crisis Bailey (1888, pp. 179-80) believed "require[d] now for India men and women of means and position — the very best, the very flower of our land, educationally and spiritually

— who will give themselves and their all to Christ for the evangelization of India." By recruiting to the mission field individuals who had wealth, Bailey's hope was to increase the number of missionaries who did not have to rely on Mission funds for income and support.

Bailey's call for more missionaries for India, by which he meant Protestant missionaries, reflected what he saw as another problem: the growing influence of Roman Catholic interests in India. Arriving in Lohardugga on New Year's Day 1887, Bailey (Bailey, 1888, p. 59) is dismayed to learn that missionaries supported by the Mission to Lepers are having

their troubles from without, too; their field has been entered by the Jesuits, who, we are told, do not hesitate 'to steal the sheep of the flock.' And they know what it is to see converts, upon whom they had expended great labour, and in whom they had placed the utmost confidence, suddenly turn aside, and return as the 'dog to his vomit,' or as 'the sow that was washed to her wallowing in the mire.'

The threat of Catholic missionaries appropriating Protestant converts had diminished by the time of Bailey's next trip to India in late 1890-early 1891, but he could not overlook that the "plague of Popery is not extinct" (Bailey, 1888, pp. 26-7). From Sailkot in November 1890, Bailey reported that the Papists working in the area had not influenced any more Protestant converts, and he relished telling that "several have returned to us, confessing that they have been thoroughly deceived in both worldly and spiritual matters, and some express contempt for Romish idolatry." Bailey insinuated that the Catholic "mode of work" was to bribe converts with money and goods. Hence, while the Mission was "trying to teach the people liberality," Catholic missionaries were "being liberal with their money." Bailey and the Mission to Lepers were concerned about the Catholics' "underhanded way" because their efforts were directed at those already converted to Christianity by Protestant missionaries, conversions that required a considerable expenditure of Protestant funds, resources, and manpower. Missionaries of the Church of Scotland posted at Sailkot wrote Bailey that the problem occurred because too many Indian workers had been given the power to baptize converts. The result, they wrote Bailey, was that "Having offered schools and other worldly inducements, they found no trouble in baptizing as many as they wished. The consequence is that we have on hands a lot of *baptized heathen* who reproach us on account of our unfulfilled promises. They are ten times harder to reach than they would otherwise have been" (quoted in Bailey, 1899, p. 26). Dissatisfied by the Protestants, many of the Protestant converts were drawn to the Catholic missionary appeals, although the Catholic groups themselves were not necessarily in any better position to offer the converts what the Protestant could not.

The pressure and competition between missionary societies to attract converts might have contributed to actions that could be regarded as duplicitous, such as in conflating the biblical stories of Lazarus. Christian missionaries to lepers often referred to the New Testament story of Lazarus in their proselytizing work, as testimony to the power of a belief in Christian teachings, and Lazarus has long been associated as the patron saint of leprosy sufferers. But it must be remembered that there are two stories of two different Lazaruses in the New Testament. And although the details, the meanings, and the power of each story differ, Bailey's workers used the stories interchangeably to appeal to his audience. The Book of Luke, chapter 16, tells the parable of the rich man and the poor man:

There was a rich man, who was clothed in purple and fine linen and who feasted sumptuously every day. And at his gate lay a poor man named Laz'arus, full of sores, who desired to be fed with what fell from the rich man's table; moreover the dogs came and licked his sores. The poor man died and was carried by the angels to Abraham's bosom. The rich man also died and was buried; and in Hades, being in torment, he lifted up his eyes, and saw Abraham far off and Laz'arus in his bosom . . . [To the rich man,] Abraham said, 'Child, remember that you in your lifetime received your good things, and Lazarus in like manner bad things; but now he is comforted here, and you are in anguish' (John 16: 19-23, 26).

Beyond the reference to 'sores,' there is little else in the story to suggest that Lazarus might have leprosy; missionaries, in their use of the parable, almost always ascribe Lazarus with leprosy.

The Book of John, chapter 11, meanwhile, tells the story of Lazarus of Bethany and his sisters, Mary and Martha; Lazarus falls ill, dies, and is buried. Four days after Lazarus' death, Jesus and his disciples arrive in Bethany, where he performs the miracle of resurrecting Lazarus from the dead. To see how these stories are put to use in the leprosy mission field, one can turn to the instance of Wellesley Bailey's sermon to the lepers of Tarn Taran in Ambala on 29 November 1890. Bailey (1899, pp. 65-6) wrote that all of the lepers at the Tarn Taran asylum were assembled in the prayer-room for his sermon, and he found it

a great privilege to tell 'the old, old story' to such an audience. What a majesty there is in those words, 'I am the resurrection and the life,' at all times; what a peculiar power they must have when first spoken in view of the raising of Lazarus, and what tremendous force they seem to have as one repeats them before these poor decaying frames of humanity, these 'living corpses' . . .

It must be asked if Bailey's audience was aware or informed that there were two stories — one promising a peaceful after-life to



those living in anguish in this world and the other promising a resurrection from death for those professing a Christian faith — both of which would have been appealing for Bailey’s asylum audience.

### Travel narratives in making imaginary anatomies real

Janice Dickin McGinnis (1984, p. 251) has noted that John Jackson’s *In Leper Land: A record of 7,000 miles among Indian lepers, with a glimpse of Hawaii, Japan, and China*, published in 1901 by the Mission to Lepers, reads like “an inviting travelogue.” Unfortunately, McGinnis fails to ask the obvious question: why would a book about leprosy and lepers be written like “an inviting travelogue”? Jackson (Figure 4) was a successful London businessman who joined the Mission as its Honorary Secretary for London in 1894 and entered the Mission in full-time service beginning in 1898, serving as the editor of *Without the Camp*, the Mission’s quarterly magazine until his death in 1917. Jackson’s *In Leper Land* (1901, p. 15) details his visit to India during 1900 and 1901 “to ascertain by personal observation the real condition of the lepers of India, and to obtain a direct insight into the work of ministering to their physical and spiritual needs.”<sup>20</sup> Jackson’s *In Leper Land* (1901) and his *Lepers: thirty-six years’ work among them* (1911) were not the first of their kind. Wellesley Bailey had published two books, *A Glimpse at the Indian Mission-Field* (1888) and *The lepers of our Indian Empire* (1899), chronicling his visits to Indian lepers and leper asylums during 1886-1887 and 1890-1891, respectively. Together, these four books detail the activities of the Mission to Lepers in India for its first quarter-century, and as McGinnis noted in the instance of Jackson’s book, they read like travel literature. The frontispiece of *The lepers of our Indian Empire* is an inspiring mountain scene in the Himalayas. Bailey (1899, pp. 52-4) writes of the indignities a British traveler must endure in colonial India: while traveling from Dalhousie to Dharmasala, he finds himself abandoned at the roadside unable to find four natives willing to carry him in his doolie; he complains that “Natives have the most wonderful power of putting themselves to sleep at all hours, and under the most adverse and uncomfortable circumstances...;” and most critically, on numerous occasions, he is unable to find a servant willing to prepare him a cup of tea. And Jackson (1901, pp. 15-6), in landing in Bombay, writes that “the absolute novelty of the whole was almost paralyzing to one enjoying his first sight of the mysterious East, whose myths and fables fall far short of its living facts in real and even romantic interest.” What McGinnis hints at can be pushed further. Bailey and Jackson introduced to a mass English audience the work of the Mission



Figure 4: John Jackson (Source: Jackson, 1911).

to Lepers by adopting a literary genre that was widely popular in late nineteenth century Europe and America — the travel narrative. Christopher Mulvey (1990; 1983), for instance, has written of the broad readership travel narratives enjoyed in the late nineteenth century.

Bailey and Jackson's travel narratives in India served another rhetorical function for the Mission to Lepers. It must be remembered that, by the late nineteenth century, few people in the United Kingdom would know what a person suffering from leprosy looked like. By the late sixteenth century, leprosy was rarely seen in Europe, and certainly by the nineteenth century, outside of Norway, cases of leprosy were even more rarely encountered. What late nineteenth century British men and women would have known of leprosy was largely the product of cultural accretion, myth, and imagination. The imagination of leprosy strongly influenced Europeans' perception of the disease as 'An Imperial Danger,' and Bailey, Jackson, and the Mission to Lepers took advantage of these perceptions in describing their missionary efforts. Their often vivid descriptions, and accompanying photographs, made real what Europeans had only long imagined of leprosy (Figures 5, 6). Their descriptions of limb-less lepers who must be carried to receive communion, who lacked hands to receive the communion wafer, and who lacked lips to receive communion wine appealed to all emotional and spiritual sensibilities of their readers.



Figure 5: "Lepers in the Mandalay Asylum — representing seven nationalities" (Source: Jackson, 1911).

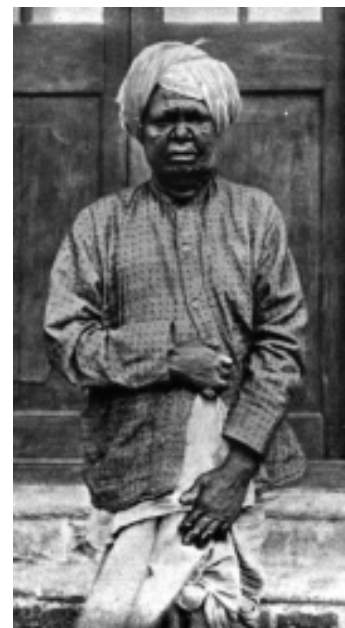


Figure 6: "A case of tubercular leprosy at Sholapur, India" (Source: Jackson, 1911).

What Bailey and Jackson made real for their British readers was what the theorist Jacques Lacan coined as "imaginary anatomies." Catherine Waldby (1996, pp. 26-7), Georges Canguilhem, and Sander Gilman have extended Lacan's ideas to show that "imaginary anatomies" that are ascribed to those who are sick, or mentally ill, or simply different, are a basis in medical discourse to demarcate those deemed normal from those considered the undesirable, the pathological, and the deviant. Waldby, in her study of sexual differences and Aids, has defined "imaginary anatomies" as "the products of the biomedical imagination, arrived at through processes of selectivity, idealization, utopian speculation and analogy."<sup>21</sup>

Ultimately, the Mission to Lepers needed to arouse the sympathy, compassion, and indignation of its supporters in the United Kingdom to raise funds to support its evangelical activities in the British empire. The most powerful medium available to the Mission in their fundraising were the photographs in the promotional literature that they distributed to their donors. The caption of one photograph (Figure 7) of a leper in Bombay read: "This

typical picture shows us the homeless leper in all of his misery, and in his unspeakable need. Diseased and destitute, cast out by his friends, regarded as accursed by his gods, afflicted with a loathsome and incurable disease, he is surely of all men the most in need of our pity and help. It is to give home, shelter and Christian teaching, together with medical relief, to such as he is that the Mission to Lepers exists." Appearing on the opposite page is an idyllic, tranquil scene (Figure 8) of the Leper Asylum in Ambala operated by the Mission, reminding readers what their donations to the Mission will provide for the lepers. Another photograph (Figure 9) depicts the Mission-funded asylum at Tam Taran, with some of the patients having been placed in front of the building's dedication stone which reads, "This

stone was laid to the Glory of God and the Help of Suffering Humanity." The photographs of patients with leprosy constitute a process by which the disease's sufferers were ascribed with more than "imaginary anatomies." They, in fact, describe the process by which lepers were



Figure 7: "Lost and lonely: a destitute Indian leper in Bombay Presidency" (Source: Bailey, 1924).



Figure 8: "General view of the Leper Asylum at Ambala, where Mr. Bailey began his work 44 years ago" (Source: Bailey, 1924).

defined to be deviant, pathological, different, or simply not normal. The photographs made real what the Mission's European audience had only imagined or assumed, and the photographs fulfilled their imagination and assumptions.

The photographs, however, have to be regarded carefully because they present an inaccurate version of reality in India's nineteenth century leprosaria.

Bailey (1874), in *Lepers in India*, the tract that he distributed with the Pims in 1874, wrote

In India the lepers are often turned adrift by their friends, and cast out of house and home, to wander about the country in the most pitiable condition imaginable. Their hands and feet drop bit by bit, joint by joint, until they have nothing but the bare stumps left. As they are unable to work for themselves, they have to eke out their living by begging from door to door, and take whatever is thrown to them — and *thrown* to them it often is, as if they were dogs. When too ill to totter along on their poor stumps, they sometimes lie down and die from exhaustion. The disease attacks them generally in the hands and feet, and often in the nose and face. The bridge of the nose falls in, and gives them a most forbidding appearance.

The pre-dominant image of the leper that medical missionaries perpetuated, with severe facial deformities, auto-amputated limbs, and other features of advanced leprosy, was only the most uncommon sights in the field. Medical missionaries overlooked less conspicuous, less debilitating, and more common forms of leprosy (the tuberculoid form), in favor of rare and advanced cases (the lepromatous form), leaving their English audience with an indelible conclusion that all lepers appeared this way. In the process, the most abnormal forms of leprosy became, in the minds of readers, the normal. Portraying lepers and leprosy in this way served multiple ends. The images of lepers reiterated the inferiority and the backwardness of the native populations and underscored the need for British colonization. And for missionaries, the images served the practical issue of raising charity funds for evangelization and justifying their evangelical efforts among those whom “all but God had abandoned,” making real only what had been learned from biblical parables and from medieval stories of the banishment of lepers. Like the travel narratives that were a popular genre of literature in late Victorian society, the Mission's photographs of lepers would have served their audience's fascination and desire to ‘picture’ their empire as the historian James Ryan (1997) has claimed.



Figure 9: “Lepers at the Tarn Taran Asylum” (Source: Mission to Lepers, ca. 1910).

### **Religious conversion as the civilizing process**

A reader of the Mission's publications is immediately struck by the statistics it contains. In Bailey's and Jackson's books, as well as in the society's annual reports, there are careful records of the operations of each of the asylums which the Mission funded, including the number of inmates, the number converted in any year, and the number of converts baptized. Of particular importance to the Mission was the counting of "happy lepers," those lepers who had been converted and who exhibited the Christian characteristics that the Mission sought. In his 1924 autobiography, Bailey (p. 55) writes of visiting an asylum in Naini near Allahabad and the superintendent tells Bailey, "We have had a great many distinguished visitors recently, all of whom commented on the happy looks where they expected to see people hopeless and dejected. The happiness, I believe, comes from the fact that so many of them have learnt to know and love and serve the Lord Jesus." Or similarly in 1886, Bailey (1888, p. 113) points to the study of Drs. Lewis and Cunningham, appointed by the Colonial Office to investigate the asylums' operations in India,

which mentioned that what had struck them most was the happy, cheerful, and contented spirit of all the inmates. It is the well-known effect of the malady to produce the exactly opposite temper of mind; and though it may be thought that this difference apparent in the inmates of the asylum may be accounted for by their more comfortable outward circumstances, it is a fact that this did not show itself until after they had become Christians, and had in some measure learned by experience 'the peace which passeth all understanding,' which keeps their hearts and minds in Christ Jesus.

And Bailey (1888, p. 155) concludes, "the Christians to-day all seemed bright and happy, and this is no mere fancy of mine. I always do see the greatest difference between Christians and heathen in these asylums; the one seems borne up in his sorrow, the other utterly cast down and dejected."

The Mission to Lepers saw the act of conversion to Christianity as also the act of civilization, and here in particular, it is difficult to divorce the sentiments of religion from the political and social objectives of imperialism. In March 1887, Bailey (1888, pp. 155-6) visits the leper settlement at Tarn Taran and writes of

the difference between the Christians and the heathen ... The Christians keep themselves and their houses clean, and in general health are much better than the others, while they always look more cheerful; many of them, too, have learned to read, and so have the grand resource and consolation of studying the pages of the blessed Book: while the heathen and the Mahommedans are dirty in their persons, and their homes are nothing like as clean or

so well kept as those of the Christians, and one rarely gets a smile or bright look from their poor woe-begone faces, nor is it to be expected that you should, for a leper without Christ and the consolations of His gospel is, I think, the very personification of hopelessness — he is one in whose poor breast the last spark of hope has for ever gone out.

Or similarly writing in January 1891 from Assam, Bailey (1888, p. 198) reiterates the connections between the Christian conversion of Indians with their contributions to civilization:

The boys and girls are all taught to work as they would have to do, and as they *will* have to do, in their own villages. They work in the fields, sow and reap; ... and the girls are taught to do the most menial work, such as they will have to do in their own village homes. I saw Christian carpenters, Christian servants, Christians making bricks, Christians binding books, Christians at all sorts of employments. Gradually the whole place is becoming Christian. At first heathen had to be employed, but now they are all giving way to Christians. The whole face of the country is becoming changed, the heathen now, for very shame sake, giving up many of their heathenish customs. Heathen women are often ashamed to be seen wearing the extravagant ornaments on their feet and legs which they used to wear. Some of these anklets weigh as much as three pounds each. Heathen men are ashamed to be seen drunk, whereas they used to glory in it. They even ask pardon of the Christians for such conduct. The great heathenish drinking festivals, which used to be the most terrible orgies, and would last for weeks at a time, are now comparatively tame affairs, and do not last so many days. Owing to the strenuous efforts of the missionaries, the great majority of the licensed liquor shops, which were fast ruining these simple-minded aborigines, have been done away with.



Figure 10: “A group of untainted boys at Tarn Taran, who are being saved from becoming lepers and are being trained for healthy and useful lives” (Source: Jackson, 1911).

In short, Bailey acknowledges the larger goal of the Mission’s work not only as to provide medical care, shelter, and food and religious instruction, but to realize the long-term consequences of ‘civilizing’ Indian society with Western values and inculcating them with the Christian ideals and behavior that the British missionaries held as suitable (Figure 10).

### **Legacy of medical missions to lepers**

In the closing days of January 1999, newspapers across India and around the world carried the story of the murder of Graham Staines and his two young sons in the north Indian state

of Orissa, survived by his wife and daughter (Kremmer, 1999; Dugger, 1999; Popham, 1999). Staines had lived in the remote village of Baripada since 1965 serving as a missionary under the Evangelical Missionary Society based in Queensland, Australia and operating a small leprosy hospital funded by the Leprosy Mission (the name assumed by the Mission to Lepers in 1965). On 23 January 1999, returning from an annual religious retreat outside the village of Manohapur, India, unable to find housing in the late night, Staines and his sons decided to sleep in their Jeep. A crowd of villagers surrounded the vehicle, poured gasoline on it, and set it ablaze with the Staines family inside. Some in the crowd blocked the doors of nearby houses so that other villagers could not help the Staines. A subsequent Commission of Inquiry led by Justice D. P. Wadhwa, a sitting judge of the Indian Supreme Court, recommended the arrest of 49 villagers involved in the murders. The murders, which were the most violent of a series of attacks against Christian missionaries in northern India, prompted a national outcry, and Prime Minister Atal Bihari Vajpayee of the nationalist Bharatiya Janata Party (BJP) faced intense criticism from within and outside of India to quell the violence stirred by Hindu nationalists. Many of the arrested villagers were members of Barang Dal, the youth wing of the Vishwa Hindu Parishad (the World Hindu Council), which had close ties to the BJP. The villagers would argue that Staines was killed because he was engaging in the conversion of Hindus to Christianity, under the aegis of the medical care and instruction his family provided at the leprosy hospital in Baripada (*The Hindu*, 1999).

The political controversy ignited by the murders of the Staines and other Christian missionaries in India came near the end of the decade when nationalist political parties assumed greater power in India. A component of this transition was a renewed, intense criticism of the work of Western missionaries in India throughout its history, highlighted by the publication of two books — Arun Shourie’s *Missionaries in India: continuities, changes, dilemmas* and *Harvesting our souls: missionaries, their design, their claims* — have served as the Hindu nationalist response to Christian evangelization (Shourie, 2000; 1994). Already a widely known writer and political commentator, Shourie would go on to be elected to the Indian parliament and be appointed a minister in the BJP-controlled government. Shourie maintains that the work of medical missionaries in colonial India was part of a coordinated effort by missionaries and colonial administrators to extend British rule by converting and civilizing the native population. Medical missionaries to leprosy sufferers again entered the debate when during a 1997 interview, Shourie, in remarking on the missionaries’ intentions, claimed

Every organization does some good — in this case establishing educational institutions and hospitals and setting examples in leprosy work. But to me, missionaries in India are what Gandhiji called

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‘vendors of goods.’ They are in the business of body counts, numerical conversions. This has no relation to an individual’s conviction. Gandhiji warned them that by pursuing numbers they were debasing the great example of Jesus, by using schools and hospitals to do so, they were robbing service of its nobility (Chakraborty, 1997).

Shourie’s reference to leprosy missions — on the one hand praising it as an example of good work, but quickly dismissing it as an example of the failings of missionary work — underscores the enormous difficulty in evaluating the legacy of Bailey and the Mission to Lepers. In describing the Mission’s efforts, John Jackson wrote in 1911 (p. 39) that “a many-sided work reveals itself . . . it is essentially *Christian* . . . eminently *philanthropic* . . . *preventive* . . . and to a large extent *medical*.”

The murder of Graham Staines and his sons and the long history of medical missionaries to lepers in India raises questions that are difficult for the historian to answer, but critical to understanding the encounter between Westerners and Indians in the colonial (and post-colonial) context. Historians have to resist the temptation to tease apart the religious, political, and medical aspects of the missionary’s work in nineteenth century India. Rather their activities have to be regarded as one of a myriad of cultural encounters that constituted Western imperialism. To ask simply what was political or religious or medical about their work overlooks the power and the consequences of the work as a whole. And only in regarding the work of medical missionaries as a multi-faceted enterprise in which the religious, political, and medical aspects were inextricably linked, can the historian begin to understand the totality of the imperial agenda, and also the colonial response and post-colonial legacy that persists.

### NOTES

<sup>1</sup> For a discussion of this passage, see McGinnis (1984, pp. 250-1).

<sup>2</sup> Since the International Leprosy Congress, Havana, 1948, and Madrid, 1953, the illness caused by *Mycobacterium leprae* has been called Hansen’s disease. Because of the stigma associated with the disease and the term “leper,” the common use of “leper” to describe those afflicted by the disease is discouraged and is regarded as pejorative. But because this was the only term used during the period examined in this study, I have retained it solely for historical accuracy.

<sup>3</sup> On Hansen’s findings, see Mange (1992).

<sup>4</sup> Quoted in Skinsnes (1973, p. 224). See also, Danielssen. (1847) and Danielssen *et al.* (1848).

<sup>5</sup> These associations with leprosy have been examined by the anthropologist Mary Douglas in Douglas (1991, 1966).

<sup>6</sup> The most comprehensive history of the British empire reflecting current scholarship is Louis (1999), of which Porter (1999), Washbrook (1999); and Moore (1999) are particularly germane to this discussion. A detailed monographic treatment of the place of religion in the British imperial program is Stanley (1990).

<sup>7</sup> Among the few historical articles on leprosy in the Indian imperial context are: Kakar (1996); Buckingham (1997); Worboys (2001); and Kakar (2001). The only monographic treatment of leprosy in colonial India is Buckingham (2002).

<sup>8</sup> Also useful is Williams (1982).



<sup>9</sup> A thorough study of the relationship between imperialism and missionary activity is still lacking. The papers in the following volumes serve as an introduction: Wagner (1994) and Hammer (1978). On the history of missions generally, see Neill (1964); Kane (1982); Dries (1998); and Dodd (1964).

<sup>10</sup> See also, Wright (1889).

<sup>11</sup> Also see Watts (1997, pp. 40-1). On medieval attitudes toward leprosy and lepers, see Brody (1974) and Richards (1977).

<sup>12</sup> The Lepers Act, 1898 [Act Number 3 of 1898] as assented by His Excellency the Governor-General, February 4, 1898.

<sup>13</sup> There is obviously a very deep and vibrant literature on the relationship between medicine, science, and imperialism that I can only allude to in this brief paper. As an introduction to the literature, I would suggest Arnold (1993); Cunningham *et al.* (1997); and Marks (1997).

<sup>14</sup> On colonial medicine in India, in addition to Arnold (1993) and Harrison (1994), see also Bala (1991) and Kumar (1998).

<sup>15</sup> Quoted in Watts (1997, p. 74). Originally quoted in Strayer (1978, p. 5).

<sup>16</sup> For background, see Prochaska (1980) and Summers (1979).

<sup>17</sup> The Mission to Lepers in India and the East was the first modern missionary society devoted solely to the care of leprosy sufferers. There are, however, older Roman Catholic orders — the Military and Hospitaller Order of Saint Lazarus of Jerusalem (founded 1098) and the Daughters of Charity of St. Vincent de Paul (founded 1850) — that pre-date the Mission to Lepers. For the earlier history, see Cust (1988).

<sup>18</sup> See also, Grundmann (1976); Fancutt (1975); and 'Lepers; Special Labors for' (1904)

<sup>19</sup> Section 2, Sub-section (1), The Lepers Act, 1898 [Act Number 3 of 1898] as assented by His Excellency the Governor-General, February 4, 1898; see also Oldrieve (1920, p. 62).

<sup>20</sup> See also, Jackson (1911).

<sup>21</sup> See also, Canguilhem (1991) and Gilman (1988; 1985).

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