

Title **India Proceedings**
Published **Jul 1871-Aug 1873,**
Creator

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PROCEEDINGS OF THE DEPARTMENT OF
AGRICULTURE, REVENUE AND COMMERCE, DECEMBER, 1871.

Venereal Disease at Nynsee Tal and Ranikhet.

[Pros. No. 2.

VENEREAL DISEASE AT NYNSEE TAL AND RANIKHET.

[Progs. No. 2.]

No. 4464A, dated Nynsee Tal, the 7th October 1871.

[No. 2.

From—C. A. ELLIOTT, Esq., *Offg. Secretary to the Government, N. W. Provinces,*
To—*The Secretary to the Government of India.*

WITH reference to your letter No. 20, dated the 3rd July last, regarding the measures proposed for the suppression of venereal disease at hill stations, and stating that the Right

Honorable the Governor General in Council is of opinion that at no places should the adoption of effective precautionary measures be so easy, I am directed to submit a copy of a letter* from the Commissioner of Kumaon, and enclosure, containing a further report on the subject.

2. I am to say that after careful consideration the Lieutenant-Governor can find no reason to withdraw any part of what was said in my letter to the address of the Home Department, No. 76A, dated the 5th July 1870.

3. The papers now submitted confirm with great force and detail the peculiar difficulties in the way of checking venereal disease in the Kumaon Hills. Lock Hospitals are in fact of little or no use; and the Lieutenant-Governor feels as much baffled, as he expressed himself in paragraph 4 of my letter above quoted, in proposing a remedy.

4. The proposals now made by the Commissioner and the Cantonment Magistrate of Ranikhet may alleviate the evil; but they are all of a nature to be enforced only by Military discipline. Eventually when the Cantonment of Ranikhet has become more completely formed, and the Public Works are finished, something might be done by a restrictive cordon and effective arrangements within it; but at present His Honor has failed to discover any satisfactory plan.

5. The remarks on keeping the men usefully employed at the hill stations are important. A good deal has been done at Ranikhet in the levelling of sites for the barracks, but the work will be only temporary.

6. At Nynsee Tal there has hitherto been no labor for the convalescent soldiers. At a late visit to the dépôt, it was arranged by the Lieutenant-Governor, in concert with the Officer Commanding, that employment might be given to the men in the repair of the cart and other roads; as also in levelling ground for a parade ground, there being none at present. Some further labor might also, perhaps, be available in building.

7. The Lieutenant-Governor fully agrees that the absence of employment for the men aggravates the existing difficulties.

No. 700, dated Almora, the 4th September 1871.

From—Colonel H. RAMSAY, C. B., *Commissioner of the Kumaon Division,*
To—*The Junior Secretary to Government, North-Western Provinces.*

I HAVE the honor to acknowledge receipt of your endorsement, General Department, No. 3387A, dated 3rd ultimo, with papers showing the success attending measures taken at Kussowlee for the prevention of venereal disease among soldiers by their resorting to low caste women, who cannot be registered and supervised as prostitutes; and asking me to reconsider my formerly expressed opinion that it is impossible to prevent soldiers resorting to, and contracting disease from, such women in this province.

2. I submit herewith a letter* in original from the Cantonment Magistrate at Ranikhet, who takes the greatest interest in the subject, and has been most energetic in his endeavours to abate this nuisance. His experience serves but to confirm what I have always maintained, that it is next to impossible to prevent soldiers from resorting to low caste women in these hills. It is a fact that cannot be questioned that "Doom" women are utterly immoral. Conjugal fidelity is almost unknown among them. Not only are they accessible to the soldiers; they watch for and decoy them. Their employment as grass and wood-cutters, and as coolies employed by the Public Works Department in cantonments, gives them every facility to practice their illicit trade; and where, as in a hill station, there are so many ravines and quiet spots suited to their purpose, the Police are unable to detect every case.

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3. But even if it were possible, by using patrols of soldiers in addition to the Native Police, to guard completely against this evil within cantonment limits—and I do not think that every precautionary measure of this sort would be fully successful—the fact remains that soldiers *will* go beyond cantonments, with or without leave, to attain their object. It is clear from the Cantonment Magistrate's report that some men who would not be seen to frequent a licensed brothel, will brave any penalty to compass their end. It would be perhaps hard to forbid well-conducted men going beyond station bounds; but it is just from this class of men that some will seek intercourse with non-registered women in places where they reckon on immunity from detection. The fear of contracting disease does not, I think, have the slightest deterrent effect. The reckless, shameless men, on the other hand, have no scruple in openly frequenting a brothel, and as a rule such men escape disease.

4. The measures adopted at Kussowlee would only be successful in this province by entirely excluding low caste women from cantonments as coolies employed on public works, and as wood and grass-cutters. We have not to deal with only a few women, but with hundreds, all of them ready to ply the prostitutes' trade. And even if the women are prevented coming into cantonments, and I think it would be impossible, the soldiers would find them out in defiance of picquets and Police. Indeed, as regards Native Police, I believe they would be too much afraid to interfere with the soldier. But I need not speak of possibilities and probabilities; Colonel Chamberlain's experience is the strongest argument I can adduce to show the difficulties met with in Kumaon in preventing venereal disease.

5. I have no doubt, however, that when the Ranikhet station is more fully established, preventive measures will be rather more easy. I despair of *punishing* the soldier for contracting disease, being the means of mitigating this great evil. As in drunkenness so in this, he will seek gratification oblivious of all consequences. But to solve all doubt, the system of fines and loss of service for period of detention in hospital by venereal might have a trial. But first I should say that every other means possible ought to be used. Patrols of picked and trusted soldiers might, under the sanction of the military authorities, be told off to patrol all out-of-the-way places; and in cases where men contract disease when on leave beyond cantonments, they might be bebarred from future indulgence of leave. The discovery of the fact that disease was contracted while on leave should, I suppose, be within the power of the Surgeon. Another measure might be used if possible, that is to prevent petty dealers selling medicines to the men in barracks for the secret treatment of disease, and thus compel them to go to hospital.

6. I am persuaded, however, that the soldier's present mode of life in Indian cantonments is sadly against them. Having comparatively nothing useful to do, they cannot but be idle, and run into excess. How to employ them usefully is a grave question; but one obvious opening is offered in the building of barracks and clearing of sites at hill stations. This is not a question of profit or loss as respects the agency employed by the Public Works Department, but of how to keep strong healthy men occupied. I consider it would be far better to have them constructing and then demolishing earthworks than sitting idle in barracks; their minds only at work on schemes of low pleasure. Too often the literature supplied to them for the purpose of healthy instruction or recreation, is, I fear, seasoned with works that only debase and pave the way for sensual indulgence and its companion disease. I do not see why, at hill stations, soldiers should not be taught to wait upon themselves, and do everything for themselves that they *must* do in England. I think he would be more useful and cheaper to the State if the soldier were made to build his own barracks, make his furniture, grow his vegetables, and cook them.

No. 124, dated Ranikhet, the 25th August 1871.

From—Lieut.-Colonel T. H. CHAMBERLAIN, Cantonment Magistrate, Ranikhet,

To—The Commissioner of Kumaon.

In reply to your No. 592 of the 5th instant, with enclosures, as per margin, I have now the honor to offer my opinion "on the prevention of venereal disease among the European soldiers in the hills." I must apologize for not answering earlier, but I wished to collect information on points which suggested themselves to me as of practical importance in my reply.

2. Any one conversant with Kumaon low caste classes is aware of the unblushing immorality which (unfortunately) exists among them—a venality which is not considered wrong, and would appear to be time-honored, and to have existed long before British rule—and yet it is among these classes that the soldier has either (if morally capable) to resist temptations in many forms, or that the majority of them too easily yield to, and purchase disease, and the seeds of a ruined constitution and sometimes death, for a very trifle.

3. Last year when the troops first came up to Ranikhet, owing to extravagant stories which had been spread abroad regarding them, the bazaars for a time were entirely deserted by the women, but after a few days this temporary dread was superseded by unmistakeable signs of too great a familiarity with them, and grass and wood women and stone-carrying coolies returned and even increased so as to render it necessary to watch them.

4. Much that Lieutenant Kane describes, as enacting with "The Buffs," is what occurred here; only that owing to the numerous khuds and spots easily accessible to the men within a short distance of their barracks, it was not possible for us to make the effective cordons he did, and you may recollect the disturbance at "Kupeen a" village when the men of the 37th Regiment tried to carry on their intrigues there. I fancy the history of Dugshaie before the Lock Hospital was started is what every hill cantonment or Military depôt has gone through. Here, increase of disease, followed in one instance by death, came on so fast that it was imperatively necessary to start the Lock Hospital system before official sanction could be obtained.

5. I am not acquainted with the other hill cantonments, hence my remarks can hardly be considered general; but after witnessing scenes at Nynsee Tal and Landour, which initiated me considerably into the mode of procedure by the soldier with the hill women, and what I have witnessed here, I have no hesitation in most fully concurring with your opinions; but I go further and declare that the soldier, despite his ignorance of the language of the natives, *I can and does*, most easily (indeed *too easily*) purchase immoral pleasure and disease *to any extent he likes*, and that the result is immense risk and expense to the Government—especially in Kumaon, where disease stalks over the land and is not confined to the lower classes.

6. I am informed by most respectable, and I have reason to believe competent, persons, who declare the opinion, that something like 70 per cent of the "Doom" population are diseased in the province, and that disease is worse among the men than the women owing to their general immorality. The females of this class work as grass and fuel-sellers, coolies, cultivators, &c., &c.

7. At Ranikhet it has furnished the largest portion of those who have openly taken out prostitution licenses, and nearly all are the relations of work people engaged on the public and private buildings and contracts going on; hence, whatever may be the state of society at other hill stations, the Lock Hospital here has to combat an element of difficulty, in the fact that registered women, after detention and discharge from hospital, contract disease anew with natives. There is every reason to believe that those who ostensibly keep at home looking after the family which has followed the head of it here add to the family income by "quiet prostitution," and we have had instances where the women who have decoyed the Europeans have preferred to leave the place rather than take the license, as the *name* was a greater disgrace to them when openly denounced than the reality so long undiscovered and pursued.

8. The question of prevention of disease among the European soldiers is a very difficult and a very serious one. The majority of the men are of low origin themselves; they get suddenly thrown at very little cost into very cheap and abundant vice; they have nothing to restrain them, and they resort to sensuality instead of the pot-house; no notions of disease enfeebling their constitutions alarms them; no fears of after consequences warns them, till they find themselves incapacitated by disease. Those who pass as "moral characters" dislike resorting to the known brothel—they will not be seen there—though they will take a walk of three or four miles or saunter among the khuds and run all risks with the strange women they meet (who either makes the advance, or accepts it) with the more likely result of inoculation than the man who will openly go to the brothel, where he knows the State liberally endeavours to stop disease, hence with the best ordered Lock Hospital, and with abundance of women most carefully watched, the soldier contrives to defeat the plans arranged for his health.

9. At Ranikhet itself the *opportunities* are *endless*, and yet the most constant supervision is exercised; men patrol the place all day to discover the women, and their exertions have been attended (all things considered) with greater success than could have been expected, considering the extent and features of the place, and that two men have to cope with 400. The difficulty after all is to cope with what occurs outside the cantonment when the men go out on shooting passes and contract disease from sources which can never be discovered.

10. It appears to me, however, that if the soldier was made answerable for rendering himself "ineffective," a great step would be made which would meet the difficulty, and they would themselves be able, and willing, to aid Government in the prevention of the spread of disease among them. I could never understand why a distinction should be drawn between a man physically useless from venereal, to his "maiming himself," or being "unfit for duty by drunkenness" or by "malingering." No man should be able to make himself non-effective by vicious immorality, or even from disease contracted with *unknown* females, if he could be fined (as is now done for "drunkenness"); or made to feel he could not throw his duty on another; or he was not allowed to count time served in hospital from *venereal secretly contracted* he would think seriously before he yielded to morbid gratifications.

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11. I am of opinion that in hill stations, where the population is notoriously immoral, the single soldier should be subject to uncertain "*private*" medical inspections. Since 1859, save on arrival at a new station, these inspections have ceased. Whether it would be advantageous (under the above described circumstances and with such easy opportunities for contracting disease) to renew them, from time to time, is a matter for the Government to consider and decide. I know medical officers dislike it quite as much as the men; but it appears to me (though I offer the suggestion *quantum valeat*) as at least one easy and certain means for detecting concealed cases of venereal, not leaving it to chance to come to light. In spite of the known punishment of "confinement to barracks," if detected, men *do* conceal, and manage often successfully to meet the evil. The petty sellers of European stores to be found attached to and following the regimental bazars of European Regiments are generally supplied with medicines which can be purchased, and any man who can point out the means to avoid a

* Cause of death was reported *debility*, visit to the hospital is looked upon by his comrades as but Dr. Heather told me it was the result an oracle. Last year one man of the Royals died from of venereal secondaries.

secondaries,* and there were other fatal cases of the same, and even worse, forms of disease among the native camp-followers.

12. As far as lies in my power, I promise to leave no exertion untried at Ranikhet to combat it, and make the Lock Hospital system popular. Government has done much towards doing so by excusing monthly payments from the unfortunates who are registered for the soldiers. I have no doubt as the station increases and the system is better understood, "secret prostitution" will cease, and that the women themselves will give us more assistance by denouncing those who practice it, than they have hitherto done.

NO ORDERS.