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Jane Buckingham. *Leprosy in Colonial South India: Medicine and Confinement.* New York: Palgrave Macmillan, 2002. xi + 236 pp. $69.95 (cloth), ISBN 978-0-333-92622-2.

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Confinements and Negotiations

The book is a social, medical, and legal history of leprosy in colonial south India. It is also a narrative of empowerment of leprosy sufferers, "to give them some sense of their history and to show how far they have come" (p. xi). Buckingham locates this history within a wider history of the poor, the "vagrant Indian poor" patients of leprosy who were the chief recipients of colonial medical, legal and institutional care. There are two main areas of focus for the book in the prevention and cure of leprosy: the therapeutic and the institutional interventions by the colonial state.

On the curative front Buckingham begins her description with a study of the concepts of leprosy and leprosy sufferers in the nineteenth-century British and indigenous traditions. She provides an important discussion of the different therapeutics in use for the treatment at different times and the changing notions of the disease within and outside the medical establishment. She suggests that British doctors used both western and indigenous methods. Despite the late-nineteenth-century bias against traditional healing (p. 75) among British doctors, Buckingham argues, leprosy treatment in colonial India was essentially hybrid, obtaining from both the traditions (e.g., Dalton's mercurial treatment), and it continued to depend on indigenous forms of treatment well into the twentieth century. Central to this is the theme of "resistance," which according to Buckingham played a crucial part in deciding leprosy therapeutics in the periphery.

However, the negotiatory spaces in the discussion on "resistance" is almost entirely argued through the perceptions of British doctors, whether it was Cornish's lament in 1880 about the lack of legality to restrain the leprosy sufferers (p. 98), or the Nellore medical officer's comment about the lack of hospitalization (p. 98), or the surgeon at Bellary who "noted with frustration" the lack of patients' support of European remedies (pp. 98-99). The discussion on resistance in fact focuses at length on the doctors' "frustrations" (pp. 99-101) rather than on patients' perceptions. The agency of the patients comes to the fore only in their dependence on neem (pp. 103-4). But Buckingham fails to elaborate how that was essentially in "resistance" to colonial medical intervention. More importantly the author juxtaposes resistance and agency with the limitations of colonial hegemony: "British concerns to impress on the Indian populace the superiority of British medicine meant little" (p. 97) and the "weakness of the colonial medical intervention" (p. 106). In her subsequent analysis of colonial science the theme of agency is explored further when she suggests that it was through these instances of negotiation and interaction with local practices that colonial science achieved its "own dynamic" (p. 133). This dynamic, Buckingham suggests, engendered the "independence" of colonial medical science and in fact the dependence of metropolitan science on it. It is, however, not clear what the author implies by "independence" since she does not delineate instances of peripheral epistemological autonomy or exclusivity. Indeed she suggests that by the late 1860s medical research in the periphery had become "sufficiently compatible with medicine as practised at the centre of empire" (p. 127). The contradiction of this center-periphery dynamic is evidenced in the concluding lines of chapter 5: "Leprosy research, despite its impediments, moved from being almost exclusively a local matter into the international arena, contributing as much to the professional needs of medicine in Britain as to the understanding of the disease. A colonial science was emerging which, though closely connected to Britain, had its own dynamic" (p. 133). What remains to

be explored is how did colonial science retain its "locality" within the "international"?

On the question of institutions and confinement Buckingham shows the limits of Foucault'ss "panopticon" or Goffman's "total institutions." She narrates important aspects of leprosy sufferers' lives in the hospitals. Most leprosy patients were able to negotiate the terms of their confinement, treatment, and diet. They were not actually confined and Buckingham stresses that leprosy sufferers need to be portrayed as "patients" and not "prisoners." It has to be mentioned here that it seems difficult to imagine straightforward architectural similarities of the Foucauldian panopticon in colonial South Asia; structures of confinement and retention are essentially defined by the nature of perceived threats. Buckingham studies the former without addressing the latter. Once again here the instances of freedom of movement are gathered from the narratives of the British doctors, e.g., in H. D. Cook's comment that there were no restrictions on the visits and movements of the patients (p. 49).

Given this general depiction of the frailty of colonial medical intervention, one finds it difficult to align it with the main aim of the book, which is essentially about humanism, to illustrate "the essential humanity of the leprosy sufferer" (p. 191). It is not clear how a story of "dynamic" and yet fractured colonial health care accomplishes this. In this description of the limits of the colonial state Buckingham's work forms important links with the genre of literature on South Asia stressing in various forms the vulnerability of the colonial state in areas of local politics, social policies, and information gathering.[1] Buckingham's emphasis on "negotiation," the layered nature of the state, and the instances of "local" interventions reflects some of the important concerns of these works. The question remains whether negotiations negate the equations of power. While it is important to study the limits of the state, such a work could also benefit from an identification of the confines of resistances. Buckingham's description of "frustration" within the official domain is important, but it is also necessary to distinguish a functioning and tangible colonial state from the statist *ideals* of contentment and order.

The agency of the leprosy sufferer need not be conditional on the weaknesses or strengths of a colonial state. It can reside in the personal narratives of the patients, in their experiences, or defiance, a focus that is missing in the book. In fact the reliance on British doctors' narratives for instances of patients' freedom highlights this problem. Such an analysis runs the risk of suggesting that the human aspects of the leprosy patients have to be located at the fissures of the colonial state. It is problematic to argue that the humanity of the leprosy sufferers was subject to either the accidental or intended "humaneness" of the colonial state (located in its many failures and weaknesses) as it actually empowers the state more than perhaps Buckingham intends to.

There have been other methods of understanding and analyzing agency, without negating equations of power: Carlo Ginzburg's Mennochio and the "circularity" of influences between popular and elite culture,[2] E. P. Thompson's "plebian culture" in eighteenth-century England,[3] and James C. Scott's study of subordination and subversion within structures of domination.[4] The gap between the ambition and the actual narrative of the book thus remains a problem.

Notes

[1]. Christopher J. Baker and David Washbrook, *South India: Political Institutions and Political Change, 1880-1940* (Delhi: Macmillan, 1975); David Washbrook, *The Emergence of Provincial Politics: The Madras Presidency, 1870-1920 (Cambridge: Cambridge University Press, 1976); Matthew H. Edney,* Mapping an Empire: The Geographic Construction of British India, 1765-1843 *(Chicago: University of Chicago Press, 1997); and Anand Yang,* The Limited Raj: Agrarian Relations in Colonial India, Saran District, 1793-1920_ (Berkeley: University of California Press, 1989).

[2]. *The Cheese and the Worms: The Cosmos of a Sixteenth-century Miller* (New York: Penguin, 1982).

[3]. *The Making of the English Working Class* (New York: Random House, 1985).

[4]. *Domination and the Arts of Resistance: Hidden Transcripts* (Yale University Press, 1992).

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