Rukhsana Iftikhar

Colonial Desire, Orient Beauty:
Army and Prostitution in British India

Abstract:

Prostitution is considered one of the oldest profession for women in all societies of the world. In India this institution remained the part of society for centuries. Women trafficking was increased in Indian region after the arrival of British army. On initial stages British army indulge in those activities revolved around the Local Indian Beauty. But the "Pure Race" could not tolerate this and facilitated their army men to import the European beauties in India. The Contagious disease acts (1864 to onwards) were also introduced which made Indian prostitutes a more miserable who were examined by the doctors periodically. In every British cantonment Cakals (popularly known as red light areas) were established to facilitate British Army. These places were looked after by superintend who issued them license for their legal work. This paper is an attempt to explore "Orient Beauty and colonial desires" which made them a symbol of sexuality in colonial era. It will also highlight the legislative measures to control contagious diseases only in British army not in oriental women. These racial and gender bias accelerated the women trafficking in colonial India. Colonial legacies in prostitution are still traceable in India and Pakistan.

Key Words: Prostitution, Cakals, Devdasi, Mughals, Syphilis

Introduction:

The institution of marriage was not present in the ancient times. But the sex and sexual desires are the natural one, so the tribes normally fought for women. In the urban culture of Indus valley civilization the figure of dancing girl indicates the presence of scared prostitution. Prostitution is the byproduct of marriage institution could be seen in the later Vedic period (1500-1000 BCE). Although polyandry was also the common feature also present in Indian society in those days. According to the books of ancient Indian laws state protected them and gave them allowances to run their profession.1 Arthasasthra also introduced the concept of different courtesans. The author had mentioned that these women and their profession was considered the great source of state revenue. She was considered the property of the state and kautilya mentioned the punishment to kill the prostitute.2 Kama sutra also mentioned all the relevant information about courtesan and those women who were involved in this profession.3 Mathura was occupied by the Greeks and those foreigners first time liberally patronized those local women for the sake of pleasure.4 Courtesans and prostitutes were also played

* Dr. Rukhsana Iftikhar, Associate Professor, Department of History& Pakistan Studies, University of the Punjab. Lahore 54590.Pakistan, rukhsana234@yahoo.com.
a pivotal role in the court of kings and in their private chambers. Religious prostitution was also became popular in early medieval ages. Hueng Tsang mentioned, there were several dancing girls who served in the Sun- temple of Multan. In India temple women were normally belong to lower castes (non Brahmins). These slaves of gods (Devadasis) were devoted to the temples for various jobs like cooking, cleaning, to prepare certain devoted gifts for the temples but they also served the lust of the priest as well. After the stretched of Sultan kingdom in India, courtesan and dancing girls became the part of their harems. The houses of brothels were common features of society.

In South, Vijaynagara the rise of professional prostitutes was on peak in Medieval ages. As Elliot described, "behind the mint is the voice of Bazaar". He mentioned that the revenue of these houses were so high used for the salaries of policemen. Alberuin also mentioned scared prostitution in India.

In Mughal period, King Akbar regularized the use of these women at least for his nobility. He made a separate place (Satampura) for those women who were used by nobles and soldiers. Akbar also appointed kotwal (superintendent) to look after the matter of that quarter. Eunuchs, dancing girls and prostitutes were played an important role in Mughal harem.

After the arrival of Europeans, they stated the activities of pleasure with the help of these women. Portuguese were the first one. The gambling houses of Goa were filled with these women. The servants of East India company were also in need of women. This interaction caused diseases which provoked English legislature to introduced Contagious diseases Acts (1864-1868) in India. But many of the Englishmen including officers kept mistresses and dancing girls. Henery Crittleton kept a Brahmin mistress named Reje. She hold all his property after his death. General Peter,s love for a Indian girl shows through this incident. When his beloved named Arabella died he refused to burn her. He buried her in the land upon which he built a church of St. Marry. But the soldiers of lower strata also had contact with local women. The access of this sexual transmission is proven through the contagious Disease Acts. These acts were introduced to control prostitution particularly in British cantonments areas and in general to regulate the Red Light Areas in particular.

In 19th century different acts to control the marginalized prostitutes were introduced in whole of European continent. Local police had given the authority of identified and check the women, they have discretionary powers especially to arrest the infected women. These women were presented before local magistrate.
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Through a trail she would be punished for life imprisonment. The immediate cause behind these Acts was the post Crimean war and Empire's legislations in army and navy. A large number of soldiers were died due to Venereal diseases. The other factors behind were rapid urbanization, emergence of new working classes, gender relations, sexual priorities for women, moral upgrading, medical care and Colonial concerns to save the pure English race. 

First Umbrella Act of 1864 tried to organized the sex trade in military towns. Later on four acts( 1880, 1889, 1893 and 1897) opened a way for registration, supervision and inspection of prostitutes in the major cities and towns of the Empire especially on seaports where the European were greater in number. These measures were taken to facilitate military men who served the British Empire in far flung areas of the world. The cantonments were purely urban spaces and they had to served to maintained the purity of British race. The strength of British soldiers was never increased from 60,000 thousand soldiers lived in 100 cantonments on Indian soil. But the alarming spread of gonorrhea and syphilis in cantonment areas was enough for the custodian of the Empire. The calculation is difficult to examine the severity of the issue but the establishment of the Lock hospitals in regiments made it necessary to check the registered prostitutes periodically. The first Lock hospital was established in 1805 in Madras presidency but it could not worked properly. After 1857 when the relationship between Colonizer and Colonized was very much tensed. The Acts would not discouraged prostitution/concubine age but also sharpened the gulf between the colonizer and colonized.
It was difficult for East India company to manage the sexual relationship between white men and local women. The first act of 1864 accepted the presence of prostitutes within the cantonment areas. That was the need of military bases in India that 12 or 15 women were attached to satisfied the carnal needs of soldiers. These places were known as Caklas. These women were effectively registered medically shriveled and consciously treated in lock hospitals. First class of prostitute was not allowed to cohabit with the common men. Lock hospitals were established to check the sexual health of these women. If any prostitute was infected by any Venereal disease than she had to lived a life of confinement in lock hospital. Sometimes she died in loneliness without any Voice. This first cantonment act paved a way for contagious diseases acts in Colonial India. These Contagious disease Acts were originated in England. Venereal diseases affected British soldiers in many colonies of the world. Some regulations were defined through this legislation:

- Registration of the prostitutes.

- To give licensed to those who voluntarily register themselves as prostitutes.

- Structure of prostitution was regulated in British military bases.

- Periodical examination of women who involved in soldiers.

- Treatment of infected women, if they refused they had to punished with life time imprisonment.

- If a woman admitted for treatment she would releases after cure.

These conditions were not applied to infected soldiers. The real target of this act was prostitutes. In Caklas women lived in fortified palace. Among the high empty walls there were small rooms for the accommodation of intimates who were continuously guarded both in houses and tents. If English army had to move than the tents of these women were pitched after army's tent and these were properly guarded. Superintendent of Caklas was known as Mahaldarni, she was officially appointed by cantonment authorities and paid 5 to 10 rupees per month. These acts also provided residential segregation of prostitutes, registered women in regimental brothels constructed and designed to accommodate beauties for white soldiers.\(^{13}\)

The act of 1864 was revised and British government introduced few amendments in 1886 and 1888 respectively. But the registration of the prostitutes, their medical check-up and infected were detained in lock hospitals remained the core issues of these drafts. This act further provided women Dhais in cantonment area who reported the cases of intimates and asked medical officers to treat them in Lock hospitals. These acts also enforced the sanitary measures in military areas like cleanliness, sufficient supply of water, English style toilets, wash basin and many other things which were not common in this poor oriental land. Those women who were running their sex business without permission and registration would be arrested without arrest warrant and penalized on conviction.\(^ {14}\)

There were few arrangements regarding medical care of contagious diseases in Lock hospitals. The patients of the lock hospitals were treated with
kindness and consideration, every possible help of the infected and feeling of respect with other gender.

Russell committee (1893) had investigated the charges of registration and examination of those women who had close contact with white soldiers which purely maintained the benefits of military services. Surgeon Cunningham, sanitary commission expressed his view about Calcutta where a small number of women were registered and they refused the adopted the rules the way Indian government introduced them. The same opinion is registered about the area of Madras. Three Acts (1864-1866-1869) could not achieved the targets to reduced the prostitutes in India. It was strong belief of the occident that prostitution was hereditary in Indian caste system and it also described the morality of Orient. In 1889 the medical officer was empowered to summon the common prostitute for check-up in lock hospitals. The act of 1895 banned to give licenses to prostitutes and legal sanctions upon the cantonment areas. The new act of 1889 gave authorities to the governor general to introduced those measures which could prevent the contagious diseases. The appointment of the medical officers and regulations of the lock hospitals were discussed between secretary of state and governor general. This act also empowered medical officer to summon any prostitute for medical examination in Lock hospital. The act of 1895 banned the license of the prostitutes. They were only registered for regimental bazaar and periodical examination of those who remained the part of cantonment. The fine was increased to rupees 100 or imprisonment in lieu of it.15

The act of 1897 assured that the Venereal diseases were treated like other diseases. The women must hospitalized during the early symptoms of scarlet fever and diphtheria and she must leave the cantonment area soon.

The awareness about sexual intercourse with prostitutes in England was also the issue of that age also. Josephine Butler and other women activists also highlighted the sexual issues of British Soldiers. Irrespective of legislation the surveillance and registration was very much limited. Contagious Disease acts constitute two types of prostitutes in military areas of British Empire.

- Those women who consort with Europeans- they were not allowed to cohabit with the local men.
- Second class reserved for the local men.

Each prostitute was examined by medical officer if she was infected, detained in the lock hospital and treated properly. She was given a "print ticket" on her discharge showed her identity, her medical record and her health status. The way to examine the native women was very ridiculous. Each part of her vaginal track was checked and soldiers were exempted from this process. They may carry the contagious diseases and transfer them to the prostitutes.\(^{16}\)

A registered prostitute of European brothel was fined 2 rupees after having sex with native in Punjab. The healthiest women of Punjab were considered most suitable to visit English soldiers. The brothels houses in cantonment areas were provided all sanitation facilities like contraceptives and bedroom equipments through the funds of cantonments. Soldiers were also allowed to visit Caklas (Lal Bazaar). In Bombay there were 12 free brothels severed to white soldiers. George Hamilton always encouraged Lord Elgin to made it compulsory the medical examination of those prostitutes those who attached with the military areas. They legislation instigated that the periodical examination can be made voluntarily. In the colonizing context the prostitution became a racially defined category.\(^{17}\)

Mrs E.W Andrew and Dr. K Bushnell visited many military stations (Lucknow, Amritsar, Umballa, Satipur, Benares, Lahore, Peshawar, Rawalpandi) and they realized the violation of these acts in cantonment areas. The heath memorandum of 1905 advised white men that every woman and prostitute in India is infected with Venereal diseases. This sort of memorandums also warned soldiers that Indian women were the source of infective diseases and their infection was more dangerous as claims in the Northern Europe. The disease of Syphilis, its symptoms and results were also became of the part of Vernacular literature. Syphilis was more horrible in India as the year passed, the sufferer lost his hair, his skin and flesh have taken away gradually, firs his nose fell and after all of his skeleton. He became blind and then ultimately died in agony.\(^{18}\)

The native moral standards in Indian society always reluctant to be Vocal about sex and sexual diseases. Morally women were not registered themselves especially for prostituting and if they did so than they remained quiet about their disease. The image of "native women" morally dubious, unhygienic and carrier of Venereal diseases. So the claim of Colonizer that the moral of Indian society was on the lowest ebb was justified. The continuous propaganda of the British government regarding the Venereal diseases shows the superiority of white and heathen remained morally corrupt people. The experiences of local and foreigners were different in India. Critical analysis are required to prove this facts that infectious diseases were more common in Europe in those days. India was blamed due to its hot climate which is considered the most dominant cause of his lustful instinct. European power in India also had the color of prostitutes which clearly indicates the presence of sexual politics under Colonial rule. It was a sigh of relief of many Europeans that white women were also involved in this sex trade and licensed work of prostitution The existence of brothels houses of white women shows the penetration of white prostitutes in Colonial Bombay, Calcutta and
Colombo. 1890, s movement to reduced white slavery increased the women trafficking of Yellow race.\textsuperscript{19}

In the beginning if 20th century, migration of European women on the major ports of Indian was stared. The British authorities welcomed this immigration so the white men could intercourse only with white women. They were not allowed to intermingle with" native ". It was a threat to the "racial purity of British ". It was a sigh of relief for company authorities the number of European prostitutes was increased in India especially in Colonial Burma. Many of the women among them were Jews. \textsuperscript{20}

The relationship between British soldiers and local women was difficult to trace as they hired women those who were less identified and they don't have to face the humiliating process of medical examination. There were three types of prostitutes :

- Mistress , who permanently attached with the soldiers.
- Registered prostitutes.
- Sometimes they hired women /beauties of the local areas where they were stationed.
- Poor economic sources tempted peasant women to act as prostitutes to fulfill their economic needs known as clandestine prostitutes including grass-cutter, kitchen women, maids etc.

The company authorities continuously blamed "sensuous East" as compare to the instinct that instigated young white soldiers in India to find out women for their sexual desires. The use of registered women for troopers was also maintained the politics of the Empire. The continuous heat of the East enabled troopers to control their passions. The power play of the Empire the conquest dominance, hegemony and masculinity played an important role. The hot debates about the medical examination of the genital of the troopers between 1873-1879 abolished on those grounds that it will increased the moral stress of the fighters. Western and Eastern values could not match in the case of gender. The medical officers were in search of infected men and women but western men who lived in eastern cantonments areas practices the same rituals of hiding the facts. The alarming increases in Venereal diseases lead to introduced the punishment . Soldiers were encouraged to treat themselves before advanced stage. But "Secrecy " was a trait of "Sensuous East". The secrecy of the liaison , the secrecy of the ailment, the secrecy of facts lead to health disaster. Sometimes trooper hired the services of local quacks for the treatment\textsuperscript{21}

The local Indian women were clandestine prostitutes, carried disease and source of its spread. The proceedings of Punjab home department indicates that local women were the source of Venereal diseases those who soldiers obtained occasional from the fields for intercourse. The remedy against these women to prevent them from cantonments areas. The government appointed detective police to identified these women . Normally the cantonment was established four miles away from the village and towns. The Empire's legislation suddenly snatched the source of their income. In 1897 the master general of British government allowed
to recruit the local women. The presence of European women in the brothels of India could be traced in 1910. In Calcutta there were dozens of house of ill famed used by these women. There were 300-350 white prostitutes running their business of sex. The urban cities like Calcutta, Bombay, Rangoon, Colombo and lesser number in Karachi, Lahore and Poona as well. European prostitutes worked under European matron. The concept of private prostitutes who visited their buyers in hotels were very rare. The matron normally kept half of the income and gave food and shelter to the women. The racial superiority of European was also visible in the establishment of ill fame- houses. They were mixed up but hired a Dalal who help them to find new possibilities in Indian markets. The class system also existed in house of ill-fame. In Bombay among the 19 houses 126 sex worker were divided into three classes. Four houses were 1st class, 6 second class and 9 were third class. After the outbreak of first world war, European number was consistently increased. The third class charged 2 rupees, 10 rupees for those who fell in the category of 2nd class. The high class prostitute who belonged to the superior race charged maximum with all kinds of facilities.

The civilizing missions of West were not successful in the case of "Sex hunt". This image became stronger that "India was a disease and Indian women were its carrier". Especially the economic burden of large families, wages were so low in India and women were ready to do which provide them money.

The Contagious disease Acts were finally abolished earl 20th century but the debate of safe sex for soldiers in India continued. The colonial power used control, medication and legislation over the desire, diseases and treatment. But gender orientation of these acts conveyed a clear cut massage that it only addressed the diseases of women especially those women whose professional identity was prostitute. In Indian cultural paranoia she already had no status of human being. After these acts she fell upon the status of prostitute. Her health was her license to live.

A report of 1877 of the Umballa a city of Punjab shows the severity of the Venereal diseases in this area:

<table>
<thead>
<tr>
<th>Disease</th>
<th>Admitted</th>
<th>discharged</th>
<th>Died</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gonorrhea</td>
<td>114</td>
<td>108</td>
<td>Nil</td>
</tr>
<tr>
<td>Syphilis (Primary)</td>
<td>36</td>
<td>34</td>
<td>Nil</td>
</tr>
<tr>
<td>Syphilis( Secondary)</td>
<td>20</td>
<td>20</td>
<td>Nil</td>
</tr>
</tbody>
</table>

The issues of forced prostitution was also a point of concern for the British authorities. The papers of home department also have the data of Delhi City where a number of imprisonment occurred only due to abduction of the young girls.
Conclusion:

The marginal creature of prostitute in colonial India remains silent in historical sources. Colonial master was conscious to save the White pure race. All the legislation of contagious diseases acts were the efforts of the Empire to save their soldiers from native women- those women who were the part of regimental bazaars were properly examined by the medical officers before going into the beds of soldiers. White soldiers always hunted the "Eastern beauty" but this beauty was the carrier of diseases. The paper paved a way to understand the ideological dimension of British Empire. Power play of the Raj addressed the issues of sexuality through the legislative measures but the lives of the common prostitutes was not discussed which was radically affected through this legislation. The third world subject of the Empire had least bothered to mention. The trafficking of white slaves gave space to justified their presence and their sisters started a movement to stop this trade through missionary spirit and zeal. It sharpened the gulf between colonizer and colonized. This sanitary legislation created a conflict between colonial officials and Empire. The impacts of these acts were unknown but the mounting tension of the colony rejected the idea. But the miseries of native prostitute continued even after the legislation.
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