

Public Health System and Unavoidable Endemic Situation in Undivided Nadia

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Abstract: *In the history of Nadia district the foremost challenge is to define its boundaries. It has constantly changed with time. But the heart of the people of Nadia was highly conditioned with the natural diversity of the land. Because of this, many novel and ancient cities have been established here. As a consequence of this, the climate and explosion of the population of the undivided Nadia played an important role in the health and wellbeing of the people. During the imperial rule, the masses used to suffer from various diseases unknown to them. The principal health concern of the people of this district was the arrival and revival of various diseases with the movement of the seasonal cycle. Sometimes, some specific diseases would take the forms of an endemic due to a lack of awareness among people. The western medical practices started being mainstream, especially in Nadia district, in a gradual manner to inhibit the impact of endemic and to bring about socio-economic development.*

Keyword: Disease, Humanity, Indigenous, Western medicine, Physician, Mortality

Nadia is another name of Nabadwip, once this sacred land was a part of the kingdom of the Gaudeshwar. This ancient and sacred terrain was famous for its healthy and pleasant climate. It is proven from the indication of the inscription engraved on a tablet secured from Deopara (discovered by C.T. Metcalf in 1865, near the village of Deopara in police station Godagari) in the district of Rajshahi (Bangladesh) that the Sena ruler Samanta Sena lived on the bank of the Ganges¹ and had his residential home built in Nabadwip.² Concerning this, *pandit* Haraprashad Shastri has remarked, Samanta Sena, a predatory raja of Karnataka after being repeatedly defeated by his overlord, fled to Bengal, where he founded a small colony on the banks of Bhagirathi, this colony was probably founded at Nabadwip.³ Ballal Sena had also built his permanent residential home in Nabadwip. As a result of this, later, this land had not only become the glorious heart of the practice of knowledge but also, on various occasions, under the patronage of various rulers, the significance of this land had increased in terms of politics. But, there is no denying the fact that the fame and glory of Nadia have been on its ascent owing to the practice of spirituality, the torchbearer of which was Biswambhar Mishra, the pioneer of the revolution of Gaudiya Vaishnavism and the renaissance in Bengal. The heart of the people of Bengal was highly conditioned with the natural diversity of the land.

The undivided Nadia district is noted as a river oriented region. It is featured with silted plains, rivers, canals and various water bodies. The entire land is full of rivers like Padma, Mathabhanga, Bhairab, Bhagirathi, Jalangi, Churney, etc. rivers and tributary rivers and sea-washed fertile silted plains.⁴ Because of this, many novel and ancient cities have been established here. The fertile cultivable environment on the one hand, and the enrichment of trade, on the other, contributed greatly to the socio-economic development of the people of this land. The noteworthy rivers of Bengal in the past used to be Padma, Bhagirathi, Gorai, Mathabhanga, Jalangi, Bhairab, Kumar, Churney, Nabaganga, Kaliganga, Chitra, Dakua, Kopotakho, etc.

The climate of Nadia is similar to its southern regions of Bengal. The tropical line of cancer has cut across the district making its climate a little tougher than the other district of Bengal.⁵ Here, both the summer and the winter are felt hard. Naturally, it makes the atmosphere humid. The Tirumala inscription of Rajendra Chola has reference to the incessant raining in Bengal. There is almost no pause to raining here! The ceaseless monsoon raining characterizes the climate of Bengal.⁶ As a consequence of this, the climate and explosion of the population of the undivided Nadia played an important role in the health and wellbeing of the locals. Owing to this, the people of the district were never spared from poverty, malnutrition, cholera, asthma, malaria, pox, diarrhoea, etc. diseases as well as frequent floods. In 1606 AD, the Mughal emperor made Bhabananda Majumdar the landlord of Nadia, Mahatpur, Marupdaha, Lepa, Multanpur, Kashimpur, Boyesha, Masunda, etc. regions as a gift for helping the Mughal marshal Mansingha to conquer Bengal. He shifted the capital from Bagoyan to Matiari.⁷ Later, the capital was shifted to Reui by administrators Raghav and Rudra Roy who changed the name of the city to Krishnanagar. The throne of Nadia was succeeded by Raja Krishna Chandra Roy in 1728. Raja Krishna Chandra was a conservative Brahminical ruler. He was the ruler of the societies of Nabadwip, Agradwip, Kushadip, and Chakradwip. The sun of Bengal's freedom was down with the victory of the British in the battle of Plassey in which Krishna Chandra aided the British by intriguing against the Nabab of Bengal.⁸ As a result of this the Renelsor map of 1772 shows the district of Nadia greater in area than now. But, later on, parts of this district got adjusted to other districts, which have rendered the district contracted in area. In 1794, the area of Jessor, 24 Parganas, Nadia, Murshidabad, Rajshahi, and Decca were reconstructed.⁹ For administrative facility, Mirzanagar was included in Nadia in 1799.¹⁰ Again, in 1823, Chuadanga, Kustia and Meharpur were included in the district.¹¹ Later, in 1860-61, some part of Kotchandpur police station was included in Nadia.¹² But, in 1883, Bangaon block, a part of Nadia, was attached to the Jessor district.¹³ This and also the separation of Agradwip from Nadia and its inclusion in Burdwan left the district contracted. As a result of it, in 1947, at the time of the freedom of India, the area of the district was a mere 2800 square miles.¹⁴

The human census was initiated in Nadia during the imperial rule of the British. According to the census report of 1872, the population of Nadia was 1500397. Whereas, in the 1881 census, the number rose to 1662795. In 1901 the number counted 1667491.¹⁵ But, the census reports show that the population of the district did not raise much between 1901 and 1941. The number, even, went down drastically in the decade between 1911 and 1921. It can be apprehended from the fluctuation of population how the health system of the district was at that time. In his book *Khitish Bangshabali Charit*, Kartikeya Chandra Roy has remarked "from seven or eight miles north of Calcutta up to Murshidabad the climate of all the regions was more or less healthy. Especially, the climate on the bank of the Khorja (Jalangi) river, which flows through Krishnanagar, was so good that people from various parts of Bengal used to visit Krishnanagar in hopes of gaining good health."¹⁶ It is said that being advised by his physician, the British Governor-General, Bahadur, stayed here for a considerable period to revive his health. In 1713, Russel, the Governor of Calcutta from East India Company, became sick following which he visited Nabadwip, as per the advice of his doctor, for changing air and after being cured, he returned to Calcutta. But, he again fell ill following which he revisited Nabadwip.¹⁷ In 1784, Sir William Jones, the Judge of the Supreme Court, visited Goari (Krishnanagar) for a change of air and spent as long as more than three years here. Then, in 1794, Dr. Carey arrived at Nabadwip and stayed a few days here.¹⁸

During the imperial rule, the common people used to suffer from various diseases unknown to them. The diseases commonly suffered from by the people of Nadia can be categorized as contagious diseases like smallpox, chickenpox, measles, diphtheria, mumps, influenza and whooping cough, and non-contagious diseases like malaria, encephalitis, filariasis, asthma and black-fever. Cholera cases were detected first in Nabadwip in May 1817. From here, the disease spread all over India in 1818, in China in 1820, in Arabia and Persia in 1821, in Russia in 1823 and London in 1832.¹⁹ But, that cholera did not altogether vanish from Nabadwip is evident from the records of the municipality, which shows that cholera showed up dangerously in the years of 1884, 1896, 1900 and 1946.²⁰ Another terrible fever engulfed the district, which was first detected in the village of Mohammadpur in Jessor. This strange fever then entered Dalga, Naldanga and Chasra villages. In a few days, the village of Kashba, on the banks of the river Bhairab, was infected. Then, in 1832 or 1833, this horrific fever entered the Godkhali village of Nadia. Gradually, the infection spread among villages like Guateli, Kandbila and Suppukhuria. By 1835, this horrific disease had taken a terrible form and rendered the village of Godkhali deserted. Around 1844-45 it spread among the villages of Shrinagar, Gopalgar, Bahurampur, Digarh, Chowbaria, Simulia and Gangasari where people were attacked and villages started becoming empty of people. This disease infected the villages of Gourpota, Debogram, Majherkali, Muragachi and Dakshin Gourpota around 1850-51. Between 1856 and 1857, the disease reached Chakdah via Ola Birnagar, Anulia, near Ranaghat, Kayatpara and Jagatpur. In 1860, the infection reached Shantipur via Fule, Belgoria and Malipota.²¹

In 1862, for the last time, the gravity of the disease mentioned above reached its extremity causing the eradication of the population. In Krishnagar alone, four thousand people were attacked by the fever, of whom about two thousand died. No major precautions were taken to protect the general inhabitants from the disease, but certain sanitary measures were adopted in a place where the disease was the worst. The civil surgeon reports, however, that from the depopulated condition of these parts, it is impossible to say how much the sanitary measures adopted served to check the progress of the epidemic. The ravages of the disease were most fatal in low-lying, bad drainage, and overgrown part.²² Under such circumstances, the then government appointed one J.K. Elliot, an eminent Physician to find out the root of such strange fever. Following his advice, the jungles of the villages were removed; with the help of the police, tanks were refined for pure drinking water; the sanitation system was introduced, and small and big ponds with no drinking water supply were filled up. But, all this did not bring a satisfactory result. As a result of it, in 1881 this strange fever again attacked Nadia on a rampage. The number of deaths also soared by leaps and bounds. The fatality of the disease can be apprehended from the mortality rate of 60/70% of the infected people. All this resulted in the formation of the National Fever Commission in 1881.²³ The decade of 1880 is greatly significant for imperial India. Being ruled and oppressed by the British for over a century made a group of natives intuitive. It is during this decade that the natives, besides being united politically started developing a sense of self-respected and love for the heritage of the land. This resulted in the revival of traditional medical practices. Along with it, endeavours started being taken to synchronize the western medical practices with those of India. Hence, this decade is marked by Ayurvedic Revival Movement for the reawakening of the native medical practices. The movement of the traditional medical practices continued from 1885 to 1947, amidst controversies. The *Kaviraji* or Ayurvedic Medicines used by native practitioners were indigenous herbal medicines like gulumcha, nimchhal, dhania, padma kasta, rakta chandan, hingul, mata, pipul, indrajab, mutha, katki, jaistha madhu, patal patra, bala, benarmul, barahokranta, triphal, lodh, belsunthi, para, gandhak(sulphur), dhutura, nishinda patra,

sodhipatra(mercury), etc. The system of the practice followed by the *kaviraj* is total abstinence from food at the commencement of disease, and the application of artificial heat to the body. The indigenous medicines found in the Nadia district are datura, hemp, madar, kat karanja, anantamul and aniseed.

The water supply of this district for drinking purposes used to be very unhealthy. In the dry season, there was a great scarcity of water, except in the vicinity of the river. There were so many tanks, but dirty and dilapidated. Even in large towns, where there were municipal commissioners, good drinking water was the great desideratum. There are very few wells in the district, the water from them as a rule being bad and impregnated with the saline matter, and unfit for drinking purpose.²⁴ But, it is undeniable that people of both rural and urban areas commonly used pond water or the water from rivers as drinking water. This caused frequent outbreak of water-borne diseases. Nabadwip being the holly birthplace of Chaitanya Deva and a sacred Vaishnava pilgrimage centre, thousands of people gather here on the occasions of various festivals and fairs. Congestion of people is usually thicker on the occasions of Gaanmela, Dasahara, Rampurnima and Dole festival. Every year, due to the shortage of drinking water and lavatories, environmental and food pollution frequented the district. That is why, epidemic like cholera, diarrhoea and enteritis became very common ailments to the people of this district. Between 1899 and 1900, Nabadwip fell prey to a plague. At that time, the special budget was fixed by the municipality for the campaign of identifying and providing treatment to the patients. To stop the spread of plague, the local authority barred the cremation of dead bodies coming from outside at the Murigat crematorium. In 1899, the budget fixed by the municipality of Nabadwip for its anti-plague campaign was rupees 90 which was decreased to rupees 50 in 1900 AD.²⁵

The principal health concern of the people of Nadia was the arrival and revival of various diseases with the movement of the seasonal cycle. Sometimes, some specific diseases would take the form of an epidemic due to a lack of awareness among people. The root of all this lies in the extreme poverty, resorting to Tantriks (practitioners of black magic) and deities for a cure, lack of government-aided health centres, lack of infrastructure in the existing hospitals and health centres, lack of the supply of medicines and also the lack of efficient physicians and nurses, all of which pushed the health and wellbeing of the people towards hindrances during the British rule in India.

However, the role of Sir Sisil Bidon, a very adroit and influential administrator, was noteworthy in the aspect of enhancement of the health and wellbeing of the people of Nadia during the British imperial rule in Bengal. Following his initiative, steps started being taken to establish charitable and municipal hospitals in various districts in 1864. It is in this same year that two ideal municipalities were established in Ranaghat and Krishnagar. On 11th January 1865 in Shantipur, on 1st April 1869 in Nadia, Kustia, Kumarkhali, Meharpur and Chakdah each a municipality was established. In 1860, a charitable health centre was established at Krishnagar. Later, in 1863, at Meharpur, in 1870 at Kumargachi and Shantipur each a charitable health centre was established. During the rule of Sir Sisil Bahadur, the Eastern Railway was established from Calcutta to Kustia, at the northern end of the district.²⁶ In 1897, the Nabadwip hospital was established which was named after J.H.E. Garret, the District Magistrate of Nadia. This hospital was established with the monetary contribution of Khitish Chandra Roy, the king of Nadia, Narendralal Khan, the king of Narajol and Tarasundari Devi, the queen of Bhukailash. Later on, the contributions of the residents of Nabadwip like Anandamoy Roy, Satinath Chowdhury, Debendranath Bagchi, Kishori Dashi, Ranjit Pal Chowdhury and Dr. Manilal Kundu have been

greatly significant. Brajakrishna Mukhopadhyay, a resident of Nabadwip, was the first L.M.S degree holder Assistant Surgeon of the hospital. Apart from this, the charitable dispensary established by Ratnamani Kundu is worthy of being mentioned. To appoint Dr. Shripati Bhattacharya under the patronage of the municipality in 1871 for the development of the medical system was a significant move. By the initiative of the monk Nityananda Das, the Radharoman Sebashram was established in Nabadwip in 1912. The aim of this ashram (hermitage) was to help the distressed and miserable people and to extend a helping hand through various social welfare activities for the sake of the people of the land. This ashram offered free lodging and medicines for the sick people and free performance of death rites for the deceased ones.²⁷ Netaji Subhas Chandra Bose was very surprised by their social activities and in 1928 he paid to visit this Ashram.

During the British reign, western medical practices started being mainstream, especially in Nadia, in a gradual manner to inhibit the impact of epidemic and to bring about socio-economic development. That people started relying on western medical practices is evident from the appreciation of the advanced people of the society and also from the unprecedented initiatives taken by the British. Thus, though the germ oriented diseases could be checked to some extent, it was meager in comparison to the necessity. This is because, so far, there were only a few westernized hospitals and health centres. To expect universal health facility from a capitalist and imperial government was like a dream only that never comes true. To try to save people with no certainty of square meals with vitamins and medicine was simply a hand task to perform.

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