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Clandestine Prostitution, Contagious Diseases Act and the Lock Hospital at Cawnpore (1877-1883).

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ABSTRACT

Western medicine became a very important part of the expansive aims of the British Empire in colonial India. The colonized body literally became a site for the construction of the empire's own authority, control and legitimacy. This paper attempts to study public health in relation to venereal diseases through a study of the working of the lock hospital at Cawnpore.

Keywords: Public Health legislations, venereal contagion, Contagious Diseases Act, Cantonment Lock Hospital.

The paper is an attempt to study venereal disease during the British raj and the enforcement of the Contagious Diseases Act in India to regulate the colonial vice. The control of sanitary conditions in the segregated areas of residence was done through public health legislations. This era saw intensified legislations on prostitution. According to Judy Whitehead, the sanitary legislations implemented as public health measures, such as the Contagious Diseases Act, in particular, were means of introducing disciplinary forms of Victorian respectability to Indian jurisprudence by means of the colonial state.

Though it was the fear of contracting the disease that had generated a response in the form of legislations, the governing practices of British officials, military medical examiners, police inspectors and constables, had very limited health concerns and were purely administrative. The legislations did not bring an end to the practice of soldiers buying sex. The prostitutes continued to operate - for the laws merely reworked the relative power of the two groups involved. The objective of the laws was to preserve public health and maintain public order, which necessarily meant that any common prostitute operating outside of the state sanctioned form of the profession was to be seen as a criminal. Since it was the prostitutes who were sources of venereal contagion and it was them who were disobeying and committing the crime, it was them who were supposed to be penalized. These laws which punished and fined prostitutes in the nineteenth century have been understood as laws that were borrowed from the metropole (Britain) to the colony. Judy Whitehead understands this process as an export of Victorian sexual restrictiveness. The laws were comparatively much more biased against the prostitutes in the colonies than in Britain. They had to be controlled for they were the sources of the disease and hence, a major cause of terror to the military strength of the empire. Public health hence, was an initiative confined to the soldiers. The laws were much more concerned about preventing ill-health among the white population than among the prostitutes. This is what Radhika Ramasubban points out as "the colonial mode of public health" (Ramasubban 1982: 9-10).ⁱ

We gather that it was the association of venereal diseases with degraded morality, the need to regulate women's sexuality, and the prerequisite to assert inter-racial divide (even more so after the 1857 rebellion). The nineteenth century was a period where the police came to be involved in matters of sex. It was desirable to have control over one's sexuality for a variety of reasons. This was an era dominated by discussions of eugenics, racism, creation of a virile race, healthy offspring and an ideal family. Interestingly, juridical and medical regulation became the most effective means to execute control over sex and sexuality. The family was idealized. It was considered a taboo to indulge in any kind of sexual behavior that did not involve reproductive purposes. Law-taboo-censorship together became means of regulation to analyze the sexuality of those that fell outside the ambit of an ideal family. Prohibitory law and the imminence of punishment became measures of sexual control. One such law was the Contagious Diseases Act of 1868. The law by all means targeted women for it regulated only the sexuality of the "native" woman. On top of which, the law had a very limited scope for it was concerned with only the health of the troops.

There have been varying opinions on the Contagious Diseases Act (1868-1881) and the working of lock hospitals. Some have looked at it as a part of the public health policy of the colonial government, while others choose to place it within the standard framework of military medicine. Policing which could have a wide purview, in this case, came to assume specific functions, such as maintaining public order and public hygiene. Maintenance of public order ensured surveillance of dangerous and disruptive elements. Maintaining public hygiene would ensure checks of cleanliness, water supply for ablution, sewage disposal and so on. Laws and institutions such as the lock hospital came to be used to perform the above functions which meant prostitutes were now put under increasing surveillance. Descriptive rolls of each prostitute came to be maintained. These measures were undertaken to keep a check on the growing incidence of venereal diseases. Thus, the measures clearly demonstrate the governmentalizing agenda of the colonial state.

The annual report on the Cawnpore lock hospital for 1877 suggested no change in the hospital accommodation during the year. In fact, the hospital was found to be sufficient and satisfactory in all respects. The extent of venereal disease among European troops as indicated by the weekly returns were as follows :- 49 cases of primary syphilis and 117 cases of gonorrhoea were admitted from the 1st battalion, 3rd (the buffs) regiment, and four cases of syphilis primary and five cases of gonorrhoea from F-5 (late F - 19), Royal Artillery (Wheeler 1878: 1).ⁱⁱ

Of this number, ten cases of syphilis primary and 21 cases of gonorrhoea among the men of The Buffs were contracted out of the station and six relapses of gonorrhoea; and 17 cases of syphilis primary and 32 cases of gonorrhoea were contracted by the men of the same regiment from unregistered prostitutes, i.e., women lurking about the roads and cantonments at night and in the city (Annual Report on the Cawnpore Lock Hospital 1878: 1).ⁱⁱⁱ From F-5, Royal Artillery, three cases of syphilis primary and four cases of gonorrhoea were contracted out of the station, and no cases of syphilis primary and gonorrhoea were contracted from unregistered women (Annual Report on the Cawnpore Lock Hospital 1878: 1).^{iv} Among the men attacked all the cases were imported, but they were included in the above returns. Thus leaving 23 cases, of syphilis primary and 59 cases of gonorrhoea to be attributed to the registered women of the city and cantonment, or a total number of primary cases of disease 82 (Annual Report on the Cawnpore Lock Hospital 1878: 1).^v

The venereal returns were regularly received weekly from the senior medical officer, British troops. The Cantonment sub-committee composed of the officers commanding the British corps, the cantonment magistrate, the senior medical officer, British forces, with the officer in medical charge of the lock-hospital, met on the last Monday in every month and submitted their report. The magistrate and collector attended when specially required to do so.

A variety of measures were adopted for the control of prostitutes. All women practising prostitution were registered and regularly examined, either in the city or the cantonments. Getting the prostitutes to register was more important than placing the city out of bounds. In the case of unlicensed prostitutes, the police were successful in arresting eleven unregistered women in the cantonments, all diseased (Annual Report on the Cawnpore Lock Hospital 1878: 2).^{vi} The registration of women had been quite efficient in the cantonments, and was extended to a circle of five miles radius. The city being out of bounds to the troops was of much less importance than formerly, and no doubt the greater number of women who allowed soldiers to visit them were now on the register. No registration fee was levied. The attendance had been on the whole very regular. Eighty-one women were reported for absence, and fines to the amount of Rs. 135-140 were levied and recovered (Hamilton 1878).^{vii}

The city women were examined in the city by the civil surgeon, and all diseased women were sent in to the cantonment lock-hospital. The examinations in cantonments were conducted by the officer in medical charge of the lock-hospital, and the women were assembled an hour before his arrival, and seated in a row under the supervision of police, to prevent their cleaning themselves immediately before examination. The speculum was used regularly. All cases of disease, or suspected disease, were at once admitted and treated till cured. The women were dieted according to scale, and were supplied with cots, and bedding if they were not provided with the latter. Condemned bedding and clothing were obtained from the commissariat for the latter purpose. 230 cases of syphilis primary were admitted during the year, against 259 in the previous year, showing a decrease of 29 (Annual Report on the Cawnpore Lock Hospital 1878: 2).^{viii} 127 cases of gonorrhoea were admitted in the same period, against 53 during the previous twelve months, showing an increase of 74 (Fourth Annual Report on the working of the lock hospitals in North-Western Provinces and Oudh 1878).^{ix} Only two cases of secondary disease were admitted, showing that the primary cases were of a mild type (Annual Report on the Cawnpore Lock Hospital 1878: 2).^x According to the report, the increase of gonorrhoea was hard to account for, but the vast majority of the cases were contracted by city prostitutes from intercourse with natives. On the whole, the cases had all been of a mild type, scarcely a case of true infecting syphilis having been seen, and very few of those of gonorrhoea could be called virulent.

For supervision a *dhai* or *mahuldarni* was employed in the regimental bazaar. In case of the *dhai* being unfit for her post, she would be imprisoned for harbouring diseased prostitutes. In December, 1876, a *dhai* in question was recommended to be dismissed, as being unfit for the post, by the lock-hospital sub-committee; this was not done, and the sub-committee noted the fact in January 1877 "No doubt some of the disease was due to her incapacity and connivance" (Fourth Annual Report on the working of the lock hospitals in North-Western Provinces and Oudh 1878).^{xi} The report also suggested that if the police did their duty properly venereal disease could be kept down in Cawnpore, but if the police neglected the work and allowed unlicensed prostitution, the disease would rapidly increase and assume alarming proportions.

During the year 1878, a monthly average of 161 women remained on the register against 135 in 1877 (Annual Report on the working of the Lock Hospitals in NWP & Oudh 1879: 1).^{xii} The result of the management was unsatisfactory. The ratios of admissions to hospital amongst the European garrison for the five years (1874 to 1878) had been 439, 266, 201, 212 and 303 per 1,000 respectively (Annual Report on the working of the Lock Hospitals in NWP & Oudh 1879: 1).^{xiii} The medical officer reported that the comparative increase of venereal disease amongst the soldiers during the year could be accounted for by the number of unlicensed women who came from the city to visit the soldiers, and from famine-afflicted women who had practiced prostitution as a means of livelihood. There was an exceptional amount of venereal disease amongst the native population of Cawnpore city, and until the soldiers were forbidden to enter the city, or the city women to visit cantonments, the rate of venereal disease amongst the former could not be lowered. The cases of syphilis seen during the year were not of a virulent character. The Cantonment Committee considered the report satisfactory, notwithstanding the increase of disease recorded, this increase had been due in all probability to the fact that many women of the poorer classes were driven in time of unusual scarcity to eke out a livelihood by prostitution. All registered women reported absent from inspection had been punished when found. The committee recommended the establishment of a separate city lock-hospital, or that, at least, the cantonment funds should be relieved from the expense incurred in maintaining city women while in hospital. The Magistrate noted that although disease had increased, its type had been mild. He thought some portion of the increase may have been due to the influence of high prices upon women not usually addicted to prostitution; but pointed out other probable causes,

such as the happening of a local fair in February, when the admissions to hospital were most numerous: the complete change of garrison which occurred in October, when the admissions were next highest in number, and when the wholesome rule placing the city out of bounds was lost sight of for a short time. The police arrested 65 unlicensed prostitutes during the year (Annual Report on the working of the Lock Hospitals in NWP & Oudh 1879: 1).^{xiv} The Commissioner thought the result of the management unsatisfactory, and concurred with the Magistrate in thinking that famine prevalence did not account for all the increase of disease recorded. He thought the complete change of garrison, and the changes of management which occurred during the year, must have contributed to the unfavorable result. The Commissioner thought commanding officers of regiments on arrival at Cawnpore should be informed of the injurious results invariably attending the granting of passes to visit the city, and be warned to take special precautions on the occasion of large local fairs. The 65 women arrested by the police were found to be diseased. The Commissioner thought they should have been registered if they solicited soldiers to prostitution. The small increase of registered prostitutes recorded seems to show that this was not done. Also the Magistrate's attention was directed to the propriety of registering city women who consorted with European soldiers.

During the year 1879 a monthly average of 145 women remained on the register against 161 in 1878. The results of the management had been unsatisfactory. The Medical Officer reported that venereal disease prevailed amongst the troops in greatest measure during the first six months of the year; 197 cases having occurred in those months, against 100 cases in the last six months of the year (Sixth Annual Report of the Working of the Lock Hospitals in the NWP & Oudh 1880: 3).^{xv} All women practicing prostitution were registered, and now there were few unregistered prostitutes as compared with the great many formerly existing about the station. Yet it was reported that much of the disease of the year amongst the troops was caused by unlicensed women prowling in *nalas* and fields. The attendance of the women for examination had been very regular. A considerably increased amount of disease was discovered amongst the women, as compared with the amount of disease in the previous year. The type of this was as a rule mild, but some very virulent cases were discovered amongst the city women. The *Dhais* in the Regimental and Artillery bazaars neglected their duty, and for that reason were frequently changed. The medical officer thought that although the results of the year's working were unfavorable as compared with those of 1878, yet the prospect was encouraging, by reason of the very considerable decrease of disease during the last quarters of the past year. During the first quarter of 1879 as many as 123 cases were under treatment, but in the last quarter of the year only 29 cases were treated, and in the last week of the year only one new case occurred amongst the soldiers (Sixth Annual Report of the Working of the Lock Hospitals in the NWP & Oudh 1880: 3).^{xvi} The causes of this improvement, as the year advanced, were: - 1st, the withholding by Commanding Officers of all indulgences to men who had contracted disease from unlicensed women; 2nd, the employment of men who had suffered from venereal disease for the detection of unlicensed women; 3rd, the increased diligence of the native police; 4th, frequent careful examination of the registered women (Sixth Annual Report of the Working of the Lock Hospitals in the NWP & Oudh 1880: 3).^{xvii} The Cantonment Committee recorded the opinion that the number of registered women was very small for so large a city and *sadar bazaar* as Cawnpore. Although disease amongst the troops was greater in 1879 than in 1878, yet the gradual decrease of disease, as the year advanced, was very satisfactory. The Magistrate thought the working of the hospital had been most satisfactory as shown by the decrease of disease, as the year advanced. Punishments under the Act had been few, 12 by fine and 17 by short terms of imprisonment (Sixth Annual Report of the Working of the Lock Hospitals in the NWP & Oudh 1880: 4).^{xviii} As regards the reported prevalence of very virulent disease amongst city prostitutes, and its, probable cause, the Magistrate asked attention to the opinion of Ghulam Haidar, Inspector of the City Police, to the effect that the registered women of the city were not visited or supported by European soldiers, and were objectionable to higher class natives, because European soldiers visited these ticketed women (Sixth Annual Report of the Working of the Lock Hospitals in the NWP & Oudh 1880: 4).^{xix} As a result of this neglect the registered city women were visited and supported only by natives of the very lowest order, and suffered in consequence from the worst forms of disease. The Commissioner pointed out that the results of the year's working could not be considered satisfactory, as the ratio of disease amongst the soldiers was higher in 1879 than in any of the previous four years. He thought, however, that the military and medical authorities be congratulated on the encouraging results of the working as the year advanced. This encouraging result was doubtless due to the greater restrictions placed on the soldiers' liberty by Commanding Officers, as the year advanced. The Commissioner regretted the increase of disease recorded amongst the registered women. He thought, the medical officers statement, that few unregistered women remained about the station now, was satisfactory, and quoted the Kotwal's opinion to the effect that very few European soldiers visited the city women. It, therefore, seemed likely that if the present strict rules as to the liberty of the soldier be maintained, the improvement in regard to disease prevalence during the latter portion of 1879 may be continued in 1880.

During the year 1880 a monthly average of 19 women remained on the register against 145 in 1879. The results of the management had been very satisfactory. During the earlier months of the year disease was contracted by the soldiers from unregistered women lurking at night-time about cantonments, especially in the neighborhood of the parade-ground and commissariat godowns. The soldiers concealed the true source of their ailments, often unjustly blaming the registered women. By punishment and by inspections of the soldiers and increased vigilance of the police the disease quickly could be abated. In August, cholera broke out, and two companies of soldiers were sent into camp; at once venereal disease appeared amongst those soldiers (Seventh Annual Report of the Working of the Lock Hospitals in the NWP & Oudh 1881: 2).^{xx} The increase continued amongst companies of soldiers living in camp at the rifle range. This disease was virulent and undoubtedly contracted from women of villages neighboring the camps, there being no police supervision or possibility of carrying out lock hospital regulations at or near these camps (Seventh Annual Report of the Working of the Lock Hospitals in the NWP & Oudh 1881: 2).^{xxi} The Cantonment Sub-Committee assembled on the last Tuesday of every month throughout the year. The attendance of the women for examination had been very regular. In all, 54 cases of non-attendance were reported, and fines were levied amounting in all to Rs. 5-8 (Seventh Annual Report of the Working of the Lock Hospitals in the NWP & Oudh 1881: 2).^{xxii} Amongst the registered women there was an increase of disease as compared with the previous year—an increase attributable to infection brought by soldiers through indiscriminate consort with unregistered women. *Dhais* were employed in each regimental bazaar and were useful, but required careful control. The Medical Officer believed that under proper lock hospital supervision, the prevalence of venereal disease could be kept down to a minimum. But as one feature of this proper supervision, the soldiers must be induced to co-operate, by avoiding unregistered women. Police supervision was effectual at Cawnpore to prevent illicit

intercourse in cantonments, but beyond cantonments the police were of little use. The city was a main centre of disease; the outlying villages were localities fertile of contagion. From camps the soldiers roamed for considerable distances, and the police could not protect them against unregistered women, more especially as many of the soldiers were young men, disliking the restraints of camp life and prone to contract disease from village women. An endeavor was made to prevent this by confining the soldiers to camp under a Brigade order. Taking into consideration the circumstances of the year, and especially the residence of soldiers in camp, the Medical Officer thought the results of the year's management favorable and productive, of good to the State. If importation of disease from unregistered women could be prevented, the residue of disease likely to affect the soldiers would be very small. The Colonel Commanding at Cawnpore recorded the opinion that the management of the year was comparatively successful, but that a great measure of success could not be looked for so long as the villages near cantonments were not brought effectually under Lock Hospital Rules. The existence of numerous ravines and *nallahs* at Cawnpore too greatly facilitated illicit intercourse. The Collector and Magistrate thought the Medical Officer's report was satisfactory, as it showed that all disease of severe type suffered by the soldiers was contracted from unregistered women. The important requirement was the detection and punishment of the unregistered females who caused this disease. The existing orders on this subject were inadequate. The Magistrate suggested a medical inspection of all women suspected on good grounds of consorting with soldiers. The results of the management had been satisfactory, as the returns showed a considerably decreased prevalence of disease amongst the soldiers in 1880 as compared with previous years.

During the year 1881 a monthly average of 108 women remained on the register, against 159 in 1880 and 171 in 1879. The Medical Officer reported that accommodation for the lock hospital establishment was provided during the year, meeting a want long felt. The hospital buildings required repairs, which were to be commenced quickly.

A large proportion of the cases of disease contracted by the soldiers resulted from their intercourse with unregistered women lurking about the cantonments. Over and over again, when several cases of disease had occurred during two or three days amongst the soldiers, the Medical Officer had at once examined all the registered women and found them all free from disease. As a rule, registered women accused of causing infection had, upon examination, been found free from disease. The police had been vigilant all-round the year. In February, three women were arrested for loitering as prostitutes in the neighborhood of the barracks; upon examination they were found badly diseased (Eighth Annual Report of the Working of the Lock Hospitals in the NWP & Oudh 1882: 3).^{xxiii} Again, during January and February, the police brought nine coolie women for examination, they were all found to be suffering from syphilis of severe type (Eighth Annual Report of the Working of the Lock Hospitals in the NWP & Oudh 1882: 3).^{xxiv} During the months in question a considerable number of soldiers were infected, by reason of intercourse with these women—for, at the same time, the registered women were healthy. The venereal returns had been received weekly from the senior Medical Officer. The Lock Hospital Committee had assembled once in every month for the transaction of business. The registered women were quiet, orderly, and obedient. The women were in charge of two matrons or *dhais*, who examined them daily or every second day, and had instructions to send every doubtful case for inspection at once—a system which according to the officials had worked well.

The Medical Officer was of opinion that unregistered prostitutes were few in number in the cantonments, and the police had exercised a careful scrutiny over them, to the prevention of unlicensed intercourse with soldiers. But in the city many unregistered prostitutes resided, and against harm in this direction there was no practical remedy.

As regards the cantonments the registration was complete, and during the last six months of the year only two unregistered prostitutes were discovered (Eighth Annual Report of the Working of the Lock Hospitals in the NWP & Oudh 1882: 4).^{xxv} In June, 1881, the Medical Officer of the lock hospital relieved the Civil Surgeon of the duty of examining the city women, under the orders of the Commander-in-Chief (Eighth Annual Report of the Working of the Lock Hospitals in the NWP & Oudh 1882: 4).^{xxvi} Disease amongst the registered women in 1881 was considerably less than in 1880, and generally their diseases were mild in character and easily cured (Eighth Annual Report of the Working of the Lock Hospitals in the NWP & Oudh 1882: 4).^{xxvii}

The Medical Officer was of opinion, that the existing plan of keeping the registered women in three separate localities was better, than bringing them all to live in one place, as tending to prevent the disorderly scenes which might arise from the congregation, at one place and hour, of men of different corps (Eighth Annual Report of the Working of the Lock Hospitals in the NWP & Oudh 1882: 4).^{xxviii} He strongly recommended a grant of rent-free quarters to the women, who earned only enough to feed and clothe themselves properly (Eighth Annual Report of the Working of the Lock Hospitals in the NWP & Oudh 1882: 4).^{xxix} This concession was greatly required at Cawnpore, where the existing accommodation enjoyed by the women was thoroughly unsatisfactory. The Cantonment Committee considered the result of the year's management satisfactory. They concurred with the Medical Officer in thinking the women should be provided with rent-free quarters, which should be located in three separate places far apart.

The Magistrate of the District noted that the satisfactory results of the year's management had been due to Dr. Seaman's assiduous attention to his duties as Medical Officer (Eighth Annual Report of the Working of the Lock Hospitals in the NWP & Oudh 1882: 4).^{xxx} The Magistrate approved the activity displayed by the police for the prevention of forbidden intercourse. The Commissioner of the Division noted a decrease in the number of registered women, which could not be considered quite satisfactory, in view of the unlicensed prostitution known to prevail. Special explanation had to be given in regard to the fact, that while 59 names were removed from the register, only 39 were added to it (Eighth Annual Report of the Working of the Lock Hospitals in the NWP & Oudh 1882: 4).^{xxxi}

Without doubt most of the cases of virulent venereal disease affecting the soldiers were communicated to them from unlicensed prostitutes; for, at a period of the year when the soldiers were most diseased, the registered women were entirely free from disease. The Commissioner accorded praise to the

police for the activity displayed in arresting the unregistered women who had caused this disease amongst the soldiers. He thought the results of the management were favorable in regard to the working of the system during the period of report.

Thus, the reports clearly suggest that the entire debate on the Contagious Diseases Act was centred on the prevention of venereal diseases among the British troops. It was only the prostitutes who were fined. It is ironical that the health reasons which the authorities used to justify the passing of the Act, only criminalized natives and nowhere involved the “native’s” health. Despite looking into venereal diseases and regulation of prostitutes, women’s health was never on the agenda of venereal disease control. Strategic/administrative needs and not rehabilitation and cure of the Indian prostitute was the agenda.

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