

Introduction

Problems of health and healing have always been a concern of, and a challenge to humanity. From the earliest attempts at witchcraft to the most recent resolution of the W.H.O. that aims to bring all the citizens of the world to a reasonable level of health by the year 2000 A.D. History records man's persistent efforts in improving the quality of life and the appreciation of the value of health as an essential component and indicator of it. Since the health and hygiene of a particular population at a given period of time can only be meaningfully studied within the context of a particular culture, an inquiry into the problems of health throws much revealing light on a variety of socio-economic, political and cultural conditions of the times, all of whom are ultimately aimed at improving and sustaining a satisfactory quality of life. Given the fact that Eastern and Western cultures parleyed for a considerable length of time in what was a colony of Portugal in India, research into health in Goa also reveals a confluence of different systems

of medicine, and arts of healing -- parallel responses from within a composite culture to the question of life.

Health can be recognized by the absence of disease. It depends on basic material determinants of health such nutrition, food, shelter, water, sanitation, clean environment, preventive and curative intervention. All these in turn depend on social opportunities or in other words on socio-economic conditions. Only a democratic society can offer such opportunities to a more satisfactory degree. Hence the situation under the Portuguese regime needs to be understood as part of its overall colonial rule.

Many have asked me what made me choose this topic for my thesis. Medicine has always appealed to me. Even as a child I was fascinated when my father, a medical doctor and his colleagues discussed medical issues. My mother too was extremely conscious of hygiene. She always sought to impress upon us the need for hygiene and good health. Years later, when I was considering a topic for research I felt that my work could be in the field of health. I felt the need to research, learn and contribute in some way to the medical history of Goa, as there was no comprehensive work done in this field. Most accounts available are limited to certain aspects of medical history.

Medical history has its value for the study of social, political and economic history. Besides in the recent times people have become conscious of good health and the necessity of maintaining the same in order to lead productive and satisfactory lives. Large sums are being spent on health. Health and Hygiene have become an important budget item of our public exchequer and as much as 13% is being spent on it. Hence it is important to know the state of health and hygiene in the past and how these conditions have affected the growth and prosperity or lack of it, of the inhabitants.

The material used in this work comes from a variety of sources. The Historical Archives of Goa yielded valuable material, much of it hitherto unused. I have collected material from the manuscripts at the Xavier Centre of Historical Research, (Goa) and Church records available at Patriarchal Palace (Paço Patriarcal), Panjim. I have also consulted published material at the Xavier Centre of Historical Research, Goa University Library, Central Library, Panjim, Biblioteca Nacional, Lisbon, and material made available from private collections of various families. The more important archival, published primary and secondary sources have been described and assessed in the bibliographical essay. I interviewed some doctors who were directly involved in the health work carried out in Goa during the last few decades of the colonial rule.

Information concerning nursing homes in Goa is largely of oral nature obtained from the heirs of the nursing homes or persons closely related to the founders. This information has been crossed-checked for its reliability, as far as possible. My research has been restricted by the availability of sources. Nevertheless, I hope that my work will shed light on an area of much importance but not sufficiently studied.

The various chapters of this dissertation seek to answer the following questions: What were the standards of living in Goa during the Portuguese regime? How did the living standards affect the conditions of health of the inhabitants and vice-versa? What was its impact on the growth of population? What were the health problems in Goa during colonial rule? Why were there frequent epidemics? What was the role of Government and non-Government agencies in maintaining urban and rural health in Goa? How successful were the Portuguese attempts to provide medical care? What was the nature of various medicinal systems prevailing at the time? How did the Portuguese Government deal with the problems of health? These are some of the areas discussed.

This dissertation consists of nine chapters, including a overview: *Chapter I* discusses the *Standards of Living in Goa*. It does so with reference to the prevailing social stratification in the Goan society. It is observed that there

were significant contrasts at all times, but these were sharper at certain times especially in the early period. The approximate cost of living, salaries of Government servants, wages of the labourers, role of domestic slaves, nutrition and mode of transport have been studied with reference to our theme. The economic policies and practice were geared towards providing preferentially for the Portuguese colonial interests as it could be expected. Certain economic developments of more recent times helped to improve the quality of life more widely. The impact of these changes on the health and hygiene have been dealt with.

Chapter II deals with *Population Trends and Health Implications* in the pre-Census and Census period. It studies the density of population, sex ratio, standards of literacy and looks at the linkages of such demographic changes with the health and disease indicators like fertility, morbidity, mortality, epidemics and famines.

Chapter III covers *Personal Care and Environmental Hygiene* in rural and urban Goa. The inhabitants were very conscious of personal hygiene, but neglected their surroundings and general environmental sanitation. Poor water supply, and problems of housing, waste disposal, ignorance, poverty and poor enforcement of administrative policies are

seen as responsible for the endemic and epidemic diseases during the period.

Chapter IV takes up the *Diseases and Epidemics* that were common in Goa throughout the Portuguese rule. The causes of most of these were poor nutrition, sanitation, poverty and lack of medical care. Many diseases were brought into Goa from outside the territory, particularly when the means of transport improved communications with British India. The Chapter studies also the preventive and curative measures introduced by the Portuguese administration to control diseases of epidemic nature.

Chapter V sketches the development of *Institutional Health Care*. Although diseases were many, hospitals were few. New Conquests had no hospital facilities until the very end of the Portuguese rule. The chapter explains the role of the Government and its agencies in providing institutional care. The administration, policies of the hospitals and care provided to the inhabitants through extension services are also referred to.

Chapter VI delves on the *Folk Medicine and Traditions*. Since western medicine was not easily available to the masses, the inhabitants made use of indigenous medicine. The chapter discusses the indigenous systems and indigenous ways of coping

with illness. The majority of the population depended on them, but the colonial policies and practices restricted the scope of the indigenous systems of medicine and contributed to their decay. The chapter covers the role of the native rituals, beliefs, miracles, and the usage of plants and minerals in the native forms of treatment.

Chapter VII is about the *Western Medicine: Training Facilities and Trained Doctors*. It narrates the history of medical training of Western type in Goa, starting with the informal training of doctors at the Royal Hospital and progressing with the establishment of the Goa Medical School. The chapter includes a sketchy listing of the contribution of some eminent doctors trained at the Goa Medical School, those who contributed significantly to health and hygiene of Goa as well as some Goan doctors who have made their contribution outside Goa.

Chapter VIII on *Health Legislation* is more of a listing of the administrative measures adopted by the Government, as well as by the semi-official and non-official bodies for safeguarding and improving health and hygiene in Goa. This chapter is introduced to provide an useful reference source to relevant legislation on the subject, and to present also the comparative role of the different public agencies in the matter.

Chapter IX is an *Overview* which takes the place of a concluding chapter. It seeks to gather the insights and issues thrown up in the course of the various chapters of this dissertation. Besides drawing some conclusions, the *Overview* also points out the limitations that could not be avoided in the process of attempting a first comprehensive study of the theme undertaken for the study of this dissertation.

A *Bibliographical Essay* has been included and it is meant to introduce the most important archival and published primary sources utilised in the study. It is hoped that such an introduction to the sources with some critical comments will assist the future researchers in this field of study. Twenty five *Appendices and statistical documentation* to the various chapters provide a more detailed substantiation for many statements and conclusions in this dissertation.