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Leprosy and the response of Christian missionaries in India

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Abstract

Skin diseases have plagued the world for centuries. The most common skin disease is leprosy but there are many more skin diseases present. People who have been afflicted with this disease are treated differently, by the general populace. There is a stigma attached to people suffering from leprosy. The most common mindset that accompanies this disease is that it is a curse or affliction. It has been observed that when a family member contracted a skin disease like leprosy, the others in the family may begin avoiding contact with him. Though it is advisable to maintain distance and strict hygiene, in case of a contagious infection like leprosy, but all skin diseases are not contagious. This paper attempts to trace the history of leprosy that has been passed down the centuries and the manner in which Christian missionaries and lay people responded to those infected with it.

Keywords: Leprosy, stigma, discrimination, Christian missionaries, tribal

Introduction

Leprosy, or Hansen's disease, is a communicable infectious disease caused by *Mycobacterium leprae* that affects skin, respiratory tract, eyes, and nerves. It is passed on via the respiratory tract. The bacterial infection after years of incubation, begins to spread, leading to loss of tissue, blindness and deformities of the toes and fingers. Since the sight is deplorable, there is a lot of stigma attached to the disease which eventually affects the patient, mentally, economically, emotionally and socially.

Leprosy in Ancient and Medieval Times

The earliest known case of leprosy was found 4000 years ago in a skeleton, in India. Historians believe that a virulent strain was carried back to the Middle East with Alexander's army in 324BC from where it slowly spread to Europe with the movement of the Roman armies and the Crusades.

Since it is an age—old disease it is mentioned in literature. Leprosy finds mention in the Bible too but not as Hansen's Disease or leprosy as we know today. The term leprosy has been referred in the Hebrew language as 'Tzaraat' (zara'at) which may refer to a skin infliction or disease, for e.g. psoriasis, seborrheic dermatitis, atopic dermatitis, scabies, scarlet fever etc. Tzara'at comes from a verb meaning 'to smite'. In Jewish tradition a leper is smitten by God. Leprosy and biblical leprosy became entwined due to two inaccurate translations: the first was in the 6th century when the Hebrew word Tzaraat was defined as leprosy and then in the 9th century when it was translated as 'lepra' in Arabic (Grzybowski & Malgorzata, 2016) ^[4]. Leprosy was curable and there are many stories regarding the same in the Old and New Testament. Some of the famous people who were cured of their skin inflictions included Moses, Naaman and Simon. The disease was seen as a punishment from God for disobeying His Word.

Biblical references to the skin disease are found in The Book of Leviticus in the Old Testament, which gives a very detailed description. It is the story of priestly class of Levites (who performed certain religious duties for the Israelites) were teachers of Torah and judges. In chapter 13 and 14 is mentioned a leprous disease which must be shown to the priest, who examines the person, his garment and even the home, very patiently. The book explains the entire quarantine process under the watchful eyes of the priest.

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"As for the leper who has the infection, his clothes shall be torn, and the hair of his head shall be uncovered, and he shall cover his moustache and cry, 'Unclean! Unclean! He shall remain unclean all the days during which he has the infection; he is unclean. He shall live alone; his dwelling shall be outside the camp. (Leviticus 13:45-46 KJV)

"And the priest shall examine the disease, and shut up that which has the disease for seven days; then he shall examine the disease on the seventh day." (Leviticus 13:50-51a KJV). "If the disease has spread in the garment, in warp or woof, or in the skin, whatever be the use of the skin, the disease is a malignant leprosy; it is unclean. And he shall burn the garment, whether diseased in warp or woof, woollen or linen, or anything of skin, for it is a malignant leprosy; it shall be burned in the fire." (Leviticus 13:51b-52 KJV)

In case the disease had not spread in the garment, whether linen or woollen, then it had to be washed and 'shut up' for seven days after which the priest would re-examine it. The priest also examines a person whose might be suffering from leprosy, as well as, the dwelling place. If the priest found the house infected then all the belongings were removed and the walls of the house had to be scrapped clean and the dust thrown outside the village. Then the house walls had to be re-plastered.

Leprosy has been around since the 10th century in Europe. The earliest known endowed hospital St. Peter's and St. Leonard's hospital York, was founded in 936AD by King Athelstan (Creighton, 1891) ^[2]. In 1101, Matilda, Queen of Henry I founded a leper hospital of St. Giles in the Fields. It was later known as Matilda's Hospital. Another endowed leper- house was a hospital of St. James, in the fields beyond Westminster. Older leper hospitals (about 5-6) were on the outskirts of London. Ireland and Scotland too, had leper houses. England's charitable foundations before the dissolution of the monasteries numbered 509 in the index of Bishop Tanner's *Notitia Monastica* (Creighton, 1891) ^[2].

Leprosy in India and Missionary Response

In India, leprosy was rampant during the 19th -20th century. William Carey was the first missionary to set up the first modern Protestant Mission – Serampore Mission near Calcutta on January 10th, 1800 (Mangalwadi, 1999) ^[7], and was the first to fight against the inhumane treatment of lepers. He was supported in this cause by Raja Ram Mohan Roy, who spearheaded the campaign. He provided medicines for them and established a hospital (Haldar, 2015) ^[5]. Earlier lepers were often buried or burned alive because of the belief that a violent death purified the body on its way to reincarnation into a new healthy existence (Allen).

There were many medical missions sent to India. In 1835, General Sir H. Ramsay founded a Leper Hospital in Almora, which was handed over to the London Missionary Society in 1851 and later supported by The Mission to Lepers (later The Leprosy Mission). Wellesley Bailey, an Irish missionary attracted public attention through his pamphlet 'Lepers in India' and soon a society 'Leprosy Mission in India' was founded at Ambala in 1874 (Kakar, 1996) ^[6]. By 1878, it became a proper Missionary Society with Lady Dufferin, Vicereine of India, as its patroness and Archbishop of Dublin as its president (David, 2006) ^[3]. Asylums were set up in different parts of the country with both sexes being kept separately except in case of married couples and separate homes were established for untainted

children of these couples (David, 2006) [3]. Many such asylums were set up across the country to treat leprosy patients. By 1898, the Leper Act was passed.

In the twentieth century, the most caring missionary to take up the cause of Leprosy was Graham Staines, an Australian by birth, who along with wife and children made India his home and carried out missionary activities like caring for those infected with leprosy. In 1981 he began working with leprosy patients in Baripada (Missionaries of the world). He founded the Mayurbhanj Leprosy Home in 1982. He cared for the lepers, along with his wife Gladys, who was a trained nurse. The leprosy home housed nearly 100 inmates. Once cured of the disease, staines would educate the person so he could sustain himself in society. He learnt Odiya and the local Santhali and Ho dialect to converse with the people. He, along with his wife, worked tirelessly to provide the Santhali people with healthcare, education and social development which would help in the social development of the tribal people. The government banked on him for composing a song in the local dialect to popularise the polio immunization drive among the Santhals.

Nearly 60% of the world's leprosy patients live in India (The Hindu, 2016). Leprosy is primarily affecting those living in poverty and, according to the report, India, Indonesia, and Brazil account for 79.6% of new cases globally.

Cure for leprosy

In 1981, WHO recommended multi-drug therapy (MDT). The currently recommended MDT regimen consists of medicines: dapsone, rifampicin and clofazimine. This treatment lasts six months for pauci-bacillary and 12 months for multi-bacillary cases. MDT kills the pathogen and cures the patient.

Stigma and People's Response

In India, people have had to face a lot of stigmas if they contracted leprosy, as it disfigures the limbs. It becomes difficult for them to get jobs or any kind of vocational training which is a must for their survival. They are shunned by society. For centuries it is believed to be a curse sent from God, a punishment for sin. With the advancement in science, we know that leprosy may be hereditary but many times a person may contract it by being in close contact with a leprosy patient. Proper care must be taken to ensure that the care- giver sanitizes their hands and wears a mask while caring for the patient. Today, leprosy is curable, however, the stigma attached to it and other skin diseases still continue, though there is a lot of advancement in medical research. Many awareness drives are conducted on the part of medical agencies and non-governmental organisations, from time to time.

Strangely, though the medicine to treat it and prevent it is available, the disease persists. One plausible cause could be the discriminatory attitude of the people against those suffering from the disease. This leads to marginalisation of the leprosy patient, who hesitates to get the proper medication and timely treatment to cure the disease. Unfortunately, there are many Asian countries, like Thailand, Singapore and others who still have legislation allowing discrimination based on leprosy, according to the World Health Organisation. In India, a person cannot seek divorce on the grounds that his or her partner has leprosy. We need more stringent laws to protect the rights of leprosy

patients, just like every other human being. We, as members of society, must realize that anyone who contracts this disease is first and foremost a human being. It is only when the mind-set of the society changes will things get better for leprosy patients.

References

- Allen, Scott. William Carey A Missionary Who Transformed a Nation' article in Mission Frontiers: Making Disciples, 2011. https://www.missionfrontiers.org/issue/article/william-carey
- 2. Creighton, Charles. A History of Epidemics in Britain, Cambridge University Press, 1891, 87.
- David, Amita Esther. Socio-Cultural Advancement, Nationalism and The Christian Missionaries In The 20th Century with special reference to Uttar Pradesh (1858-1900), Ph.D. Thesis (unpublished), 2005, 90-91
- 4. Grzybowski Andrezej, Malgorzata Nite. Article in Clinics in Dermatology, Erratum to Leprosy in the Bible, 2016, 3.
- 5. Haldar Dipankar. William Carey the Shoemaker and His Christian Ethics in India, 6.
- 6. Kakar Sanjeev. Paper Leprosy in British India 1860-1940: Colonial Politics and Missionary Medicine, published in Medical History. 1996;40:218.
- 7. Mangalwadi, Ruth, Vishal. The Legacy of William Carey: A Model for the Transformation of a Culture', Wheaton, IL: Crossway Books, 1999, VX.
- 8. The New Testament, King James Version Leviticus Chapter 13.
- 9. https://www.missionariesoftheworld.org/2011/12/graha m-stuart-staines.html
- 10. https://www.thelancet.com/journals/eclinm/article/PIIS 2589-5370(19)30221-4/fulltext