

The Colonial Disease A Social History Of Sleeping Sickness In Northern Zaire 1900 1940 Cambridge Studies In

Medicine and Politics in Colonial PeruFor All of HumanityDisease, Colonialism, and the StateMalaria in Colonial South AsiaDisease and Social DiversityToxic ArchipelagoRomanticism and Colonial DiseaseSickness and the StateSocial Aspects of Health, Medicine and Disease in the Colonial and Post-colonial EraSocial History of Epidemics in the Colonial PunjabDisease and DiscriminationThe Social Basis of Health and Healing in AfricaEpidemics and IdeasThe Colonial Politics of Global HealthThe Social Question in the Twenty-First CenturySex and ControlSyphilis, Sexuality & Social ControlThe Colonial DiseaseThe Colonial Life of PharmaceuticalsTinderboxEpidemicsDifference and DiseaseEpidemics and HistoryA History of Global HealthTechnology, Disease, and Colonial Conquests, Sixteenth to Eighteenth CenturiesLeprosy in Colonial South IndiaNative Society and Disease in Colonial EcuadorDisease and Demography in Colonial BurmaGlobal HealthContagion and EnclavesEpidemic Malaria and Hunger in Colonial PunjabEpidemics and SocietyLegacy of Slavery and Indentured LabourSocial Aspects of Health, Medicine and Disease in the Colonial and Post-colonial EraThe Social History of Health and Medicine in Colonial IndiaIndian Sex LifeCuring Their IllsInfectious FearThe Colonial DiseaseHealth Policy and Disease in Colonial and Post-

Medicine and Politics in Colonial Peru

These essays are an account of disease, health and healing practices on the African continent. The contributors all emphasize the social conditions linked to ill health and the development of local healing traditions, from Morocco to South Africa and from the precolonial era to the present.

For All of Humanity

This book discusses the various social, political, and cultural forces that shape the distribution of diseases in populations. It is based on a series of comparative studies of the historical and contemporary disease patterns of the indigenous peoples of America north of Mexico, Polynesia, and Australia. The purpose of the comparisons is to control in a quasi-experimental way certain crucial variables in order to examine the impact on health of other variables. The comparisons are made at increasingly more refined levels of analysis. Thus, once disease ecology has been held roughly constant, one can see more clearly the ways in which colonial policy and political institutions have shaped the affairs of indigenous peoples. And once policy has been held constant, one can see more clearly how culture can make a difference. And once culture has been held constant, one can see how gender and status make a difference. Kunitz argues that very few broad generalizations adequately

explain the distribution of diseases in populations and that to truly comprehend such patterns one must understand the local social context as well the biological characteristics of diseases. The book is thus an argument for the importance of local knowledge as a complement to the universalizing sort of knowledge that we associate with science.

Disease, Colonialism, and the State

Over the past century, hundreds of billions of dollars have been invested in programs aimed at improving health on a global scale. Given the enormous scale and complexity of these lifesaving operations, why do millions of people in low-income countries continue to live without access to basic health services, sanitation, or clean water? And why are deadly diseases like Ebola able to spread so quickly among populations? In *A History of Global Health*, Randall M. Packard argues that global-health initiatives have saved millions of lives but have had limited impact on the overall health of people living in underdeveloped areas, where health-care workers are poorly paid, infrastructure and basic supplies such as disposable gloves, syringes, and bandages are lacking, and little effort has been made to address the underlying social and economic determinants of ill health. Global-health campaigns have relied on the application of biomedical technologies—vaccines, insecticide-treated nets, vitamin A capsules—to attack specific health problems but have failed to invest in building lasting infrastructure for managing the ongoing health problems of local populations. Designed to be read

and taught, the book offers a critical historical view, providing historians, policy makers, researchers, program managers, and students with an essential new perspective on the formation and implementation of global-health policies and practices.

Malaria in Colonial South Asia

A free open access ebook is available upon publication. Learn more at www.luminosoa.org. Want, disease, ignorance, squalor, and idleness: first recognized together in mid-nineteenth-century Europe, these are the focus of the Social Question. In 1942 William Beveridge called them the “giant evils” while diagnosing the crises produced by the emergence of industrial society. More recently, during the final quarter of the twentieth century, the global spread of neoliberal policies enlarged these crises so much that the Social Question has made a comeback. *The Social Question in the Twenty-First Century* maps out the linked crises across regions and countries and identifies the renewed and intensified Social Question as a labor issue above all. The volume includes discussions from every corner of the globe, focusing on American exceptionalism, Chinese repression, Indian exclusion, South African colonialism, democratic transitions in Eastern Europe, and other phenomena. The effects of capitalism dominating the world, the impact of the scarcity of waged work, and the degree to which the dispossessed poor bear the brunt of the crisis are all evaluated in this carefully curated volume. Both thorough and thoughtful, the

book serves as collective effort to revive and reposition the Social Question, reconstructing its meaning and its politics in the world today.

Disease and Social Diversity

Choice Outstanding Academic Title Disease and discrimination are processes linked to class in the early American colonies. Many early colonists fell victim to mass sickness as Old and New World systems collided and new social, political, economic, and ecological dynamics allowed disease to spread. Dale Hutchinson argues that most colonists, slaves, servants, and nearby Native Americans suffered significant health risks due to their lower economic and social status. With examples ranging from indentured servitude in the Chesapeake to the housing and sewage systems of New York to the effects of conflict between European powers, Hutchinson posits that poverty and living conditions, more so than microbes, were often at the root of epidemics.

Toxic Archipelago

This study consists of eight essays critical of the currently dominant guns and germs theories in the historiography of European colonial conquest causes. Other methods of conquest, notably communication control, were as vital as firepower and disease importation, and motives were often more important than methods.

For most of the first half of the twentieth century, tuberculosis ranked among the top three causes of mortality among urban African Americans. Often afflicting an entire family or large segments of a neighborhood, the plague of TB was as mysterious as it

Sickness and the State

In responding to the perceived threat posed by venereal diseases in Germany's colonies, doctors took a biopolitical approach that employed medical and bourgeois discourses of modernization, health, productivity, and morality. Their goal was to change the behavior of targeted groups, or at least to isolate infected individuals from the healthy population. However, the Africans, Pacific Islanders, and Asians they administered to were not passive recipients of these strategies. Rather, their behavior strongly influenced the efficacy and nature of these public health measures. While an apparent degree of compliance was achieved, over time physicians increasingly relied on disciplinary measures beyond what was possible in Germany in order to enforce their policies. Ultimately, through their discourses and actions they contributed to the justification for and the maintenance of German colonialism.

Social Aspects of Health, Medicine and Disease in the Colonial and Post-colonial Era

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"For All of Humanity examines the first public health campaigns in Guatemala, southern Mexico, and Central America in the eighteenth and early nineteenth centuries. It reconstructs a rich and complex picture of the ways colonial doctors, surgeons, Indigenous healers, midwives, priests, government officials, and ordinary people engaged in efforts to prevent and control epidemic disease"--Provided by publisher.

Social History of Epidemics in the Colonial Punjab

"During the colonial period, Indian intellectuals--philologists, lawyers, scientists and literary figures--all sought to hold a mirror to their country. Whether they wrote novels, polemics, or scientific treatises, all sought a better understanding of society in general and their society in particular. Curiously, female sexuality and sexual behavior play an outside role in their writing. The figure of the prostitute is ubiquitous in everything from medical texts and treatises on racial evolution to anti-Muslim polemic and studies of ancient India. In this book, Durba Mitra argues that between the 1840s and the 1940s, the new science of sexuality became foundational to the scientific study of Indian social progress. The colonial state and an emerging set of Bengali male intellectuals extended the regulation of sexuality to far-reaching projects that sought to define what society should look like and how modern citizens should behave. An exploration of this history of social scientific thought offers new perspectives to

understand the power of paternalistic and deeply violent claims about sexual norms in the postcolonial world today. These histories reveal the enduring authority of scientific claims to a tradition that equates social good with the control of women's free will and desire. Thus, they managed to dramatically reorganize their society around upper-caste Hindu ideals of strict monogamy"--

Disease and Discrimination

Curing their Ills traces the history of encounters between European medicine and African societies in the nineteenth and twentieth centuries. Vaughan's detailed examination of medical discourse of the period reveals its shifting and fragmented nature, highlights its use in the creation of the colonial subject in Africa, and explores the conflict between its pretensions to scientific neutrality and its political and cultural motivations. The book includes chapters on the history of psychiatry in Africa, on the treatment of venereal diseases, on the memoirs of European 'Jungle Doctors', and on mission medicine. In exploring these representations of disease as well as medical practice, Curing their Ills makes a fascinating and original contribution to both medical history and the social history of Africa.

The Social Basis of Health and Healing in Africa

This book highlights the role of acute hunger in malaria lethality in colonial South Asia and

investigates how this understanding came to be lost in modern medical, epidemic, and historiographic thought. Using the case studies of colonial Punjab, Sri Lanka, and Bengal, it traces the loss of fundamental concepts and language of hunger in the inter-war period with the reductive application of the new specialisms of nutritional science and immunology, and a parallel loss of the distinction between infection (transmission) and morbid disease. The study locates the final demise of the 'Human Factor' (hunger) in malaria history within pre- and early post-WW2 international health institutions – the International Health Division of the Rockefeller Foundation and the nascent WHO's Expert Committee on Malaria. It examines the implications of this epistemic shift for interpreting South Asian health history, and reclaims a broader understanding of common endemic infection (endemiology) as a prime driver, in the context of subsistence precarity, of epidemic mortality history and demographic change. This book will be useful to scholars and researchers of public health, social medicine and social epidemiology, imperial history, epidemic and demographic history, history of medicine, medical sociology, and sociology.

Epidemics and Ideas

This book documents the primary role of acute hunger (semi- and frank starvation) in the 'fulminant' malaria epidemics that repeatedly afflicted the northwest plains of British India through the first half of colonial rule. Using Punjab vital registration data and regression analysis it also tracks the marked decline

in annual malaria mortality after 1908 with the control of famine, despite continuing post-monsoonal malaria transmission across the province. The study establishes a time-series of annual malaria mortality estimates for each of the 23 plains districts of colonial Punjab province between 1868 and 1947 and for the early post-Independence years (1948-60) in (East) Punjab State. It goes on to investigate the political imperatives motivating malaria policy shifts on the part of the British Raj. This work reclaims the role of hunger in Punjab malaria mortality history and, in turn, raises larger epistemic questions regarding the adequacy of modern concepts of nutrition and epidemic causation in historical and demographic analysis. Part of The Social History of Health and Medicine in South Asia series, this book will be useful to scholars and researchers of colonial history, modern history, social medicine, social anthropology and public health.

The Colonial Politics of Global Health

This volume examines the way in which epidemics have influenced ideas from the ancient world to AIDS today.

The Social Question in the Twenty-First Century

This book analyzes the diverse facets of the social history of health and medicine in colonial India. It explores a unique set of themes that capture the diversities of India, such as public health, medical

institutions, mental illness and the politics and economics of colonialism. Based on inter-disciplinary research, the contributions offer valuable insight into topics that have recently received increased scholarly attention, including the use of opiates and the role of advertising in driving medical markets. The contributors, both established and emerging scholars in the field, incorporate sources ranging from palm leaf manuscripts to archival materials. This book will be of interest to scholars of history, especially the history of medicine and the history of colonialism and imperialism, sociology, social anthropology, cultural theory, and South Asian Studies, as well as to health workers and NGOs.

Sex and Control

Studying malaria in modern East Asia in the context of the global history of the disease, this book fills an important gap in our understanding of the cultural, social, economic, and political dimensions of the relationship between malaria and human society in a region which has often been neglected by historians of the disease. The authors examine the development and consequences of various anti-malaria strategies in Hong Kong, Okinawa, Taiwan, mainland China, and East Asia as a whole. The British and Japanese colonial models of disease control are explored, as is the later American technological model of DDT residue spraying, promoted by the Rockefeller Foundation which played a significant role in the global anti-malaria campaign and the development of public health in Asia. In the post- World War II period,

the use of DDT and international political and economic interests helped to shape anti-malaria policies of the Nationalist government in Taiwan. In mainland China, the Beijing government's mass mobilization and primary health care model of anti-malaria control has given way to new strategies as recent changes in the health care system have affected anti-malaria efforts and public health developments. This book illuminates an important and largely unexplored dimension of the history of malaria: the interplay of the state (colonial or sovereign), international interests, new medical knowledge and technology, changing concepts of health and disease, as well as local society in the formulation and implementation of anti-malaria policies. It will be of interest to historians of colonialism, medicine and public health, Asia, as well as health and social policy planners.

Syphilis, Sexuality & Social Control

Before the nineteenth century, travellers who left Britain for the Americas, West Africa, India and elsewhere encountered a medical conundrum: why did they fall ill when they arrived, and why - if they recovered - did they never become so ill again? The widely accepted answer was that the newcomers needed to become 'seasoned to the climate.' Suman Seth explores forms of eighteenth-century medical knowledge, including conceptions of seasoning, showing how geographical location was essential to this knowledge and helped to define relationships between Britain and her far-flung colonies. In this

period, debates raged between medical practitioners over whether diseases changed in different climates. Different diseases were deemed characteristic of different races and genders, and medical practitioners were thus deeply involved in contestations over race and the legitimacy of the abolitionist cause. In this innovative and engaging history, Seth offers dramatically new ways to understand the mutual shaping of medicine, race, and empire.

The Colonial Disease

Disease and Demography in Colonial Burma is an examination of the factors that shaped demographic change in Burma between 1852 and 1941. Despite increasing contemporary interest in the historical demography of the non-European world, there has been little detailed exploration of Burma's extensive but problematic population records. Judith Richell developed a demographic framework for Burma by analysing late nineteenth century and early twentieth century census data, and used this information to analyse population change within the country. Colonial Burma experienced relatively high rates of mortality, and Richell related this phenomenon to nutrition, the development of sanitary and health services, the impact of migration from India, and agricultural change. She also assessed infant, child and adult mortality, the incidence of endemic diseases such as beri beri and malaria, and outbreaks of plague and cholera as well as the influenza pandemic of 1918. The data the author collected and her discussion of these topics provide an

exceptionally valuable resource for scholars interested in Burma, demography and public health in Southeast Asia. Book jacket.

The Colonial Life of Pharmaceuticals

From the 1600s, enslaved people, and after abolition of slavery, indentured labourers were transported to work on plantations in distant European colonies. Inhuman conditions and new pathogens often resulted in disease and death. Central to this book is the encounter between introduced and local understanding of disease and the therapeutic responses in the Caribbean, Indian and Pacific contexts. European response to diseases, focussed on protecting the white minority. Enslaved labourers from Africa and indentured labourers from India, China and Java provided interpretations and answers to health challenges based on their own cultures and medicinal understanding of the plants they had brought with them or which they found in the natural habitat of their new homes. Colonizers, enslaved and indentured labourers learned from each other and from the indigenous peoples who were marginalized by the expansion of plantations. This volume explores the medical, cultural and personal implications of these encounters, with the broad concept of medical pluralism linking the diversity of regional and cultural focus offered in each chapter. Please note: Taylor & Francis does not sell or distribute the Hardback in India, Pakistan, Nepal, Bhutan, Bangladesh and Sri Lanka.

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Tinderbox

This book is a major and wide-ranging study of the great epidemic scourges of humanity--plague, leprosy, smallpox, syphilis, cholera, and yellow fever/malaria--over the last six centuries. It is also much more. Sheldon Watts, a cultural and social historian who has spent much of his career studying and teaching in the world's South, applies a wholly original perspective to the study of global disease, exploring the connections between the movement of epidemics and the manifestations of imperial power in the Americas, Asia, Africa, and in European homelands. He shows how the perceptions of whom a disease targeted changed over time and effected various political and medical responses. He argues that not only did Western medicine fail to cure the diseases that its own expansion engendered, but that imperial medicine was in fact an agent and tool of empire. Watts examines the relationship between the pre-modern and modern medical profession and such epidemic disasters as the plague in western Europe and the Middle East; leprosy in the medieval West and in the nineteenth-century tropical world; the spread of smallpox to the New World in the age of exploration; syphilis and nonsexual diseases in Europe's connection with Asia; cholera in India during British rule; and malaria in the Atlantic Basin during the eras of slavery and Social Darwinism. He investigates in detail the relation between violent environmental changes and disease, and between disease and society, both in the material sphere and in the minds and spirits of rulers and ruled. This book will become

the standard account of the way diseases--arising through chance, through reckless environmental change engineered by man, or through a combination of each--were interpreted in Western Europe and in the colonized world.

Epidemics

From the 1600s, enslaved people, and after abolition of slavery, indentured labourers were transported to work on plantations in distant European colonies. Inhuman conditions and new pathogens often resulted in disease and death. Central to this book is the encounter between introduced and local understanding of disease and the therapeutic responses in the Caribbean, Indian and Pacific contexts. European response to diseases, focussed on protecting the white minority. Enslaved labourers from Africa and indentured labourers from India, China and Java provided interpretations and answers to health challenges based on their own cultures and medicinal understanding of the plants they had brought with them or which they found in the natural habitat of their new homes. Colonizers, enslaved and indentured labourers learned from each other and from the indigenous peoples who were marginalized by the expansion of plantations. This volume explores the medical, cultural and personal implications of these encounters, with the broad concept of medical pluralism linking the diversity of regional and cultural focus offered in each chapter. Please note: Taylor & Francis does not sell or distribute the Hardback in India, Pakistan, Nepal, Bhutan, Bangladesh and Sri

Difference and Disease

Innovative examination of the early globalization of the pharmaceutical industry, arguing that colonialism was crucial to the worldwide diffusion of modern medicines.

Epidemics and History

Every person on the planet is entangled in a web of ecological relationships that link farms and factories with human consumers. Our lives depend on these relationships -- and are imperiled by them as well. Nowhere is this truer than on the Japanese archipelago. During the nineteenth century, Japan saw the rise of *Homo sapiens industrialis*, a new breed of human transformed by an engineered, industrialized, and poisonous environment. Toxins moved freely from mines, factory sites, and rice paddies into human bodies. *Toxic Archipelago* explores how toxic pollution works its way into porous human bodies and brings unimaginable pain to some of them. Brett Walker examines startling case studies of industrial toxins that know no boundaries: deaths from insecticide contaminations; poisonings from copper, zinc, and lead mining; congenital deformities from methylmercury factory effluents; and lung diseases from sulfur dioxide and asbestos. This powerful, probing book demonstrates how the Japanese archipelago has become industrialized over the last two hundred years -- and how people and the

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environment have suffered as a consequence.

A History of Global Health

A “brilliant and sobering” (Paul Kennedy, Wall Street Journal) look at the history and human costs of pandemic outbreaks The World Economic Forum #1 book to read for context on the coronavirus outbreak This sweeping exploration of the impact of epidemic diseases looks at how mass infectious outbreaks have shaped society, from the Black Death to today. In a clear and accessible style, Frank M. Snowden reveals the ways that diseases have not only influenced medical science and public health, but also transformed the arts, religion, intellectual history, and warfare. A multidisciplinary and comparative investigation of the medical and social history of the major epidemics, this volume touches on themes such as the evolution of medical therapy, plague literature, poverty, the environment, and mass hysteria. In addition to providing historical perspective on diseases such as smallpox, cholera, and tuberculosis, Snowden examines the fallout from recent epidemics such as HIV/AIDS, SARS, and Ebola and the question of the world’s preparedness for the next generation of diseases.

Technology, Disease, and Colonial Conquests, Sixteenth to Eighteenth Centuries

A regional history of the Amerindians' biological experience under colonial rule.

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Leprosy in Colonial South India

Recent disease events such as SARS, H1N1 and avian influenza, and haemorrhagic fevers have focussed policy and public concern as never before on epidemics and so-called 'emerging infectious diseases'. Understanding and responding to these often unpredictable events have become major challenges for local, national and international bodies. All too often, responses can become restricted by implicit assumptions about who or what is to blame that may not capture the dynamics and uncertainties at play in the multi-scale interactions of people, animals and microbes. As a result, policies intended to forestall epidemics may fail, and may even further threaten health, livelihoods and human rights. The book takes a unique approach by focusing on how different policy-makers, scientists, and local populations construct alternative narratives-accounts of the causes and appropriate responses to outbreaks- about epidemics at the global, national and local level. The contrast between emergency-oriented, top-down responses to what are perceived as potentially global outbreaks and longer-term approaches to diseases, such as AIDS, which may now be considered endemic, is highlighted. Case studies- on avian influenza, SARS, obesity, H1N1 influenza, HIV/AIDS, tuberculosis, and haemorrhagic fevers- cover a broad historical, geographical and biological range. As this book explores, it is often the most vulnerable members of a population- the poor, the social excluded and the already ill- who are likely to suffer most from epidemic diseases. At the same

time, they may be less likely to benefit from responses that may be designed from a global perspective that neglects social, ecological and political conditions on the ground. This book aims to bring the focus back to these marginal populations to reveal the often unintended consequences of current policy responses to epidemics. Important implications emerge - for how epidemics are thought about and represented; for how surveillance and response is designed; and for whose knowledge and perspectives should be included. Published in association with the Economic and Social Research Council (ESRC)

Native Society and Disease in Colonial Ecuador

Contagion and Enclaves examines the social history of medicine across two intersecting British enclaves in the major tea-producing region of colonial India: the hill station of Darjeeling and the adjacent tea plantations of North Bengal. Focusing on the establishment of hill sanatoria and other health care facilities and practices against the backdrop of the expansion of tea cultivation and labor migration, it tracks the demographic and environmental transformation of the region and the critical role race and medicine played in it, showing that the British enclaves were essential and distinctive sites of the articulation of colonial power and economy.

Disease and Demography in Colonial Burma

This book is the first publication originating from the conference Legacy of Slavery and Indentured Labour: Past, Present and Future, which was organised in June 2013, by the Institute of Graduate Studies and Research (IGSR), Anton de Kom University of Suriname.

Global Health

Jessica Lynne Pearson explores the collision between imperial and international visions of health and development in French Africa as postwar decolonization movements gained strength. The consequences of putting politics above public health continue to play out in constraints placed on international health organizations half a century later.

Contagion and Enclaves

Leprosy is a neglected topic in the burgeoning field of the history of medicine and the colonized body. Leprosy in Colonial South India is not only a history of an intriguing and dramatic endemic disease, it is a history of colonial power in nineteenth-century British India as seen through the lens of British medical and legal encounters with leprosy and its sufferers in south India. Leprosy in Colonial South India offers a detailed examination of the contribution of leprosy treatment and legislative measures to negotiated relationships between indigenous and British medicine and the colonial impact on indigenous class formation, while asserting the agency of the poor and vagrant leprous classes in their own history.

Epidemic Malaria and Hunger in Colonial Punjab

Epidemics and Society

Since the earliest times, epidemics have broken out at regular intervals killing a large number of people. They have presented peculiar problems both to the state and to the society. The colonial India in general and the Punjab in particular were affected intermittently by epidemics. The Punjab was one of the worst affected provinces of the colonial India in which several lakhs of people fell prey to the deadly epidemics. Punjab was the wheat basket of the British empire and the leading recruitment centre for military service in British Indian army. Due to its strategic and military importance, the British handled the epidemics with great vigour. However, in their attempt to contain the epidemic, the British impinged on the privacy and religious susceptibilities of the natives. The present work discusses the role of the state in handling the epidemics and the response of the society to such measures. Sasha: The author is currently working as an Assistant Professor at Panjab University, Chandigarh. She did her doctorate in the faculty of Arts under UGC fellowship from the Panjab University. She has to her credit several publications both in international and national journals on the issues of health, medicine and society in the colonial period.

Legacy of Slavery and Indentured Labour

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Colonial experience was profoundly structured by disease, as expansion brought people into contact with new and deadly maladies. Pathogens were exchanged on a scale far greater than ever before. Native populations were decimated by wave after wave of Old World diseases. In turn, colonists suffered disease and mortality rates much higher than in their home countries. Not only disease, but the idea of disease, and the response to it, deeply affected both colonizers and those colonized. In *Romanticism and Colonial Disease*, Alan Bewell focuses on the British response to colonial disease as medical and literary writers, in a period roughly from the end of the eighteenth century to the middle of the nineteenth century, grappled to understand this new world of disease. Bewell finds this literature characterized by increasing anxiety about the global dimensions of disease and the epidemiological cost of empire. Colonialism infiltrated the heart of Romantic literature, affecting not only the Romantics' framing of disease but also their understanding of England's position in the colonial world. The first major study of the massive impact of colonial disease on British culture during the Romantic period, *Romanticism and Colonial Disease* charts the emergence of the idea of the colonial world as a pathogenic space in need of a cure, and examines the role of disease in the making and unmaking of national identities.

Social Aspects of Health, Medicine and Disease in the Colonial and Post-colonial Era

A case-study in the history of sleeping sickness, relating it to the western 'civilising mission'.

The Social History of Health and Medicine in Colonial India

This dissertation explores the history of venereal disease (VD) in colonial Uganda in the context of fundamental changes in the first three decades of the twentieth century. Of primary interest is how people explained disease causation and spread, and how they defined individual diseases. It argues that the explanations about and definitions of VD which emerged must be seen in the framework of existing Ugandan and European ideas of health, disease, sexuality, and gender, and that responses to VD had much to do with struggles to control the dynamic colonial society.

Indian Sex Life

Besides looking at major outbreaks of diseases and how they were coped with, diseases such as malaria, smallpox, tuberculosis, plague, venereal disease, avian flu and SARS, this book also examines how the successive government regimes in Hong Kong took action to prevent diseases and control potential threats to health. It shows how policies impacted the various Chinese and non-Chinese groups, and how policies were often formulated as a result of negotiations between these different groups. By considering developments over a long historical period, the book contrasts the different approaches in

the periods of colonial rule, Japanese occupation, post-war reconstruction, transition to decolonization, and Hong Kong as Special Administrative Region within the People's Republic of China.

Curing Their Ills

By the end of the eighteenth century, Peru had witnessed the decline of its once-thriving silver industry, and it had barely begun to recover from massive population losses due to smallpox and other diseases. At the time, it was widely believed that economic salvation was contingent upon increasing the labor force and maintaining as many healthy workers as possible. In *Medicine and Politics in Colonial Peru*, Adam Warren presents a groundbreaking study of the primacy placed on medical care to generate population growth during this era. The Bourbon reforms of the eighteenth century shaped many of the political, economic, and social interests of Spain and its colonies. In Peru, local elites saw the reforms as an opportunity to positively transform society and its conceptions of medicine and medical institutions in the name of the Crown. Creole physicians in particular, took advantage of Bourbon reforms to wrest control of medical treatment away from the Catholic Church, establish their own medical expertise, and create a new, secular medical culture. They asserted their new influence by treating smallpox and leprosy, by reforming medical education, and by introducing hygienic routines into local funeral rites, among other practices. Later, during the early years of independence, government

officials began to usurp the power of physicians and shifted control of medical care back to the church. Creole doctors, without the support of the empire, lost much of their influence, and medical reforms ground to a halt. As Warren's study reveals, despite falling in and out of political favor, Bourbon reforms and creole physicians were instrumental to the founding of modern medicine in Peru, and their influence can still be felt today.

Infectious Fear

In this groundbreaking narrative, longtime Washington Post reporter Craig Timberg and award-winning AIDS researcher Daniel Halperin tell the surprising story of how Western colonial powers unwittingly sparked the AIDS epidemic and then fanned its rise. Drawing on remarkable new science, *Tinderbox* overturns the conventional wisdom on the origins of this deadly pandemic and the best ways to fight it today. Recent genetic studies have traced the birth of HIV to the forbidding equatorial forests of Cameroon, where chimpanzees carried the virus for millennia without causing a major outbreak in humans. During the Scramble for Africa, colonial companies blazed new routes through the jungle in search of rubber and other riches, sending African porters into remote regions rarely traveled before. It was here that humans first contracted the strain of HIV that would eventually cause 99 percent of AIDS deaths around the world. Western powers were key actors in turning a localized outbreak into a sprawling epidemic as bustling new trade routes, modern

colonial cities, and the rise of prostitution sped the virus across Africa. Christian missionaries campaigned to suppress polygamy, but left in its place fractured sexual cultures that proved uncommonly vulnerable to HIV. Equally devastating was the gradual loss of the African ritual of male circumcision, which recent studies have shown offers significant protection against infection. Timberg and Halperin argue that the same Western hubris that marked the colonial era has hamstrung the effort to fight HIV. From the United Nations AIDS program to the Bush administration's historic relief campaign, global health officials have favored well-meaning Western approaches--abstinence campaigns, condom promotion, HIV testing--that have proven ineffective in slowing the epidemic in Africa. Meanwhile they have overlooked homegrown African initiatives aimed squarely at the behaviors spreading the virus. In a riveting narrative that stretches from colonial Leopoldville to 1980s San Francisco to South Africa today, *Tinderbox* reveals how human hands unleashed this epidemic and can now overcome it, if only we learn the lessons of the past.

The Colonial Disease

This 1996 book is a history of health and disease in Malaya from colonisation to World War II.

Health Policy and Disease in Colonial and Post-Colonial Hong Kong, 1841-2003

In this lesson-packed book, Mark Nichter, one of the

world's leading medical anthropologists, summarizes what more than a quarter-century of health social science research has contributed to international health and elucidates what social science research can contribute to global health and the study of biopolitics in the future. Nichter focuses on our cultural understanding of infectious and vector-borne diseases, how they are understood locally, and how various populations respond to public health interventions. The book examines the perceptions of three groups whose points of view on illness, health care, and the politics of responsibility often differ and frequently conflict: local populations living in developing countries, public health practitioners working in international health, and health planners/policy makers. The book is written for both health social scientists working in the fields of international health and development and public health practitioners interested in learning practical lessons they can put to good use when engaging communities in participatory problem solving. Global Health critically examines representations that frame international health discourse. It also addresses the politics of what is possible in a world compelled to work together to face emerging and re-emerging diseases, the control of health threats associated with political ecology and defective modernization, and the rise of new assemblages of people who share a sense of biosociality. The book proposes research priorities for a new program of health social science research. Nichter calls for greater involvement by social scientists in studies of global health and emphasizes how medical anthropologists in particular can better involve themselves as scholar activists.

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