

A photograph of a woman in a light-colored sari working on a large, industrial textile machine. She is looking down at her work with a focused expression. The machine has several large, dark, circular components. The background is slightly blurred, showing more of the machine and some white cylindrical objects.

PRIYANKA SRIVASTAVA

THE WELL-BEING OF THE LABOR FORCE IN COLONIAL BOMBAY

Discourses and Practices



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Priyanka Srivastava

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ABOUT THE BOOK

This study approaches the social history of industrial labor in colonial India through the lens of well-being. Focusing on the cotton millworkers in Bombay, it moves beyond trade union politics and examines the complex ways in which the broader colonial society considered the subject of worker well-being. The projects of worker well-being unfolded in the contexts of the British Empire, Indian nationalism, extraordinary infant mortality, epidemic diseases, and uneven urban development. In the late nineteenth and early twentieth centuries, the real and imagined threats of epidemics compelled the colonial government and Indian millowners to take up industrial housing and health programs. During the interwar period, nationalists and social reformers expanded these initiatives and constructed the moral and physical health of industrial workers and their families as vital for the economic growth of a future nation.

Drawing on extensive archival research, this book redraws the map of labor, gender, and urban history, suggesting how colonial local governance, public health policies, and deeply gendered local and transnational voluntary social activism played out in the lives of working-class people.

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ABBREVIATIONS

AIWC	All India Women's Conference
AMWI	Association of Medical Women in India
ARMCB	Administration Report of the Municipal Commissioner of Bombay
<i>BC</i>	<i>Bombay Chronicle</i>
BIT	City of Bombay Improvement Trust
BLC	Bombay Legislative Council Debates
BMC	Bombay Municipal Corporation
<i>BPNNR</i>	<i>Report on Native Newspapers in the Bombay Presidency</i>
BPWC	Bombay Presidency Women's Council
BSA	Bombay Sanitary Association
BMOA	Bombay Millowners' Association
DD	Bombay Development Department
EIC	East India Company
<i>EPW</i>	<i>Economic and Political Weekly</i>
FC, 1885	Report of the Factory Commission of 1885
GOI	Government of India
HMSO	His Majesty's Stationery Office
<i>IESHR</i>	<i>Indian Economic and Social History Review</i>
IFC, 1890	Report of the Indian Factory Commission, 1890
IFLC, 1908	Report of the Indian Factory Labour Commission, 1908
IIC	Indian Industrial Commission
ILO	International Labour Organization
INC	Indian National Congress
<i>ITJ</i>	<i>Indian Textile Journal</i>
IWC	Infant Welfare Center
IWS	Infant Welfare Society

<i>JAMWI</i>	<i>Journal of the Association of Medical Women in India</i>
<i>LG</i>	<i>Bombay Labour Gazette</i>
LMS	Licentious of Medicine and Surgery
<i>MAS</i>	<i>Modern Asian Studies</i>
MSA	Maharashtra State Archives
NCWI	National Council for Women in India
NMML	Nehru Memorial Museum and Library
RCLI	Royal Commission on Labour in India, 1929–30
SSL	Social Service League
<i>SSQ</i>	<i>Social Service Quarterly</i>
TLIC	Textile Labour Inquiry Committee
<i>TOI</i>	<i>Times of India</i>
YMCA	Young Men's Christian Association
YWCA	Young Women's Christian Association
WIA	Women's India Association
WMS	Women's Medical Service

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Introduction

On 1 October 1922, a party of thirty social activists participated in the “sanitary round” of a working-class locality in G ward of Bombay Municipality. The inspection tour was organized by the Social Service League, one of Bombay’s leading voluntary organizations. In his written report of this sanitary round, Hiralal L. Kaji, a professor of economics at Sydenham College and an eminent social activist, decried the lack of basic civic amenities in the locality visited. His report documented the “terrible degree of overcrowding,” the “horrible privies,” and the “leaking drainage pipes” in the dwellings of working people. Professor Kaji expressed apprehension and fear over the possible social consequences of the filthy living conditions. He was convinced that “such insanitary areas are the surest breeding places for criminals, for clearly jails offer much better living conditions.” Linking insanitation to moral decay, he asked, “Is it any wonder if such homes drive the labourer from the factory to the grog shop where he drown his cares?”¹ Professor Kaji’s report reminded the educated, socially conscious people of Bombay about their social obligations and urged them to “uplift” the working classes:

Bombay’s educated citizens owe some duty to their less fortunate brothers and sisters because laboring classes themselves have not yet awakened to resent their conditions of life outside the factory. They are illiterate, inured to hardships [and] acclimatised to these slums. These people are dumb and passive sufferers . . . when the lower strata are [*sic*] dumb, it is

the middle strata that have to come forward and voice the grievances and expose the horrible conditions of life of the Bombay workmen which is such a shame to civilisation, such a scandal of the 20th century and such a blot on the escutcheon of Bombay [,] “The queen of the East.”²

Professor Kaji’s remorse for the ill-being of working-class people and his call for ameliorative interventions were not untypical. British officials, public health experts, and an eclectic mix of middle-class social activists shared such stereotypical images of industrial workers and the threats they supposedly posed to the city’s health and social order. Favoring a top-down imposition of change to working-class lives, they designed several remedial programs that aimed to create a healthy, contented, and productive class of urban industrial workers. Focusing on the cotton textile millworkers in Bombay in the late nineteenth and early twentieth centuries, this study analyzes the discourses and practices of worker well-being. The projects of worker well-being unfolded in the contexts of the British Empire, Indian nationalism, social reform movements, extraordinary infant mortality, epidemic diseases, and uneven urban development. The book examines how colonial political and economic relations, the patterns of urban development, the real and imagined dread of disease, and the complex dynamics of class, gender, and caste influenced the discourse and practices of worker well-being.

The interpretive framework of well-being offers a new way to analyze labor history. The theorizing and application of well-being are considered important interventions in the fields of development economics and policy studies. Discussing this category, development studies scholars have argued that as an umbrella concept, well-being (and its inevitable obverse ill-being) encompasses discussions and debates over many different types of poverty—from income and consumption poverty, to poverty arising from social exclusion and the lack of access to basic public goods.³ For instance, leading development economists Amartya Sen and Jean Dreze have related that the “poverty of a life lies not merely in the impoverished state in which the person actually lives, but also in the lack of real opportunity—given by social constraints as well as personal circumstances—to choose from other types of living.”⁴ The authors do not invalidate the central place of insufficient incomes (economic poverty) in curtailing human capabilities to achieve well-being. However, they point out that an increase in per capita income by itself is not a sufficient condition for well-being. A public policy that enables people to be

adequately nourished and free from avoidable diseases, and that provides them with the means to be literate and socially active, is equally crucial in determining the well-being of a large part of the population.⁵ Thus, the overall development of a society depends on its willingness to allocate resources in ways that enhance the human capability to attain bodily health, contentment, and social connectedness and that eliminates all forms of poverty—economic, social, and political.

It is pertinent to note here that the concept of well-being is relatively novel and no scholarly consensus regarding its meaning has yet emerged. It is, however, a useful term precisely because it denotes a variety of related ideas. In the context of this study, the term “well-being” suggests that in the industrial cities of colonial India, the poor quality of working-class lives was largely reflective of factory workers’ abysmal incomes. At the same time, workers’ well-being/ill-being crucially depended on the availability—or the lack—of clean adequate housing, facilities for leisure activities, and amenities for childbirth and childcare. Thus, the deprivations or ill-being of working-class people was also the product of an ineffective social policy that failed to create healthy conditions of living and working for the urban subalterns. Incorporating well-being into the historiography of South Asian labor allows a critical evaluation of colonial social policies with regard to urban industrial workers.

Development studies thinkers have pointed out that well-being is a relational and fluid concept and the meanings attached to it shift according to objective circumstances. Perceptions and practices of well-being/ill-being are continually produced and reproduced in the complex interplay between social, political, and economic processes.⁶ Examining the shifts in worker well-being discourses and practices in colonial Bombay, this study delineates how the objective circumstances arising from a rapid industrial and urban growth stimulated the discourse of worker well-being. The threat of disease and discontent compelled local administrators and employers of labor to design worker well-being projects. However, the narrow material interests of colonial administrators and millowners restricted actions and postponed necessary improvements in the urban built environment. Contemporary nationalist ideology and elite-dominated social service rhetoric were also critical in shaping perceptions about worker well-being. By focusing on the notions of worker well-being, this book reveals the deeply gendered, paternalistic, and elitist nature of nationalist as well as voluntary activism in colonial times. Cited at the beginning of this chapter, the views of Professor Kaji

illustrate the paternalism that was inherent in the nationalistic social service rhetoric of colonial Bombay. The framework of well-being thus provides ample opportunities to bring together scattered threads of urban, gender, social reform, and nationalist histories and reconstruct a much broader, embedded history of industrial labor in colonial India.

The cotton textile industry and its workforce had played a significant role in the transformation of Bombay from an inhospitable fishing hamlet into a modern industrial city. The first cotton mills were built in the city in the 1850s. The industry expanded rapidly throughout the late nineteenth century, and by the 1890s, there were nearly seventy mills in the city.⁷ The mills exported yarn to the Chinese market and also supplied yarn and coarse cloth for domestic consumption. Despite fluctuating market demands and an unfavorable environment in which the colonial regime supported British textile manufacturers with protective tariffs, Indian textile production began to undercut that of Lancashire by the 1880s. In the late nineteenth century, India's textile industry was primarily based in Bombay City. Subsequently, the industry gradually dispersed to other areas, especially Ahmedabad and Nagpur, but Bombay retained its prime position as the hub of cotton textile production.

The expansion of textile mills in Bombay created an urban industrial working class. The average number of millhands employed daily on all shifts in textile mills grew from 6,557 in 1865 to 213,085 in 1945.⁸ The industry drew its laborers from the rural migrants who flocked to Bombay to find work in its mills. Most migrants came from the famine-stricken neighboring regions of Deccan and Konkan, especially the Ratnagiri district of Konkan, a densely populated and impoverished coastal area south of Bombay.⁹ Women constituted between 20 and 25 percent of the total workforce.¹⁰ Although men and women from Deccan and Konkan continued to dominate the textile labor force, rural poor from the United Provinces in North India and other regions of the Bombay Presidency were also present.¹¹ The migrant men and women workers and their families settled close to their mills in haphazardly constructed, dingy, overcrowded, undrained, and ill-ventilated *chawls*.¹² These chawls were typically multistory, barrack-like buildings with one-room tenements and shared bathing and washing spaces. The rapid spread of chawls coincided with the industrial growth of Bombay and gradually these structures became a feature of working-class neighborhoods. Situated in the northern parts of the city, the textile factories and workers' chawls constituted the *girangaon* or the mill districts of Bombay.¹³

This burgeoning industry in colonial Bombay was significant both politically and economically. In the industrial economy of colonial India, British capital featured prominently, as it dominated the Indian railways, the jute mills of Calcutta, and the textile mills of Cawnpore in North India and Madras in South India. In contrast, Indian entrepreneurs pioneered the establishment of Bombay's cotton mills. Thus, in the late nineteenth century, the textile industry of Bombay had acquired a particular significance in the anti-colonial nationalist discourse. Reflecting the influence of Western modernity, the economic nationalist ideology of the late nineteenth century promoted large-scale industrialization as a panacea for India's alleged economic and social backwardness. The nationalist leaders postulated that India's fundamental economic progress was possible only when indigenous capital initiated and developed the process of industrialization.¹⁴ The textile industry in Bombay underscored the dynamism of Indian capital.

The nationalists would defend this modern indigenous venture against real and putative threats, including unfair competitive conditions vis-à-vis British textile producers or labor unrest within the industry. This ideology of economic nationalism informed the opposition to legislation in the factories and mines of colonial India.¹⁵ In addition, contemporary, transnational models of economically sovereign nations, such as Germany and Italy, informed Indian nationalists' ideas about nationhood based on economic modernization.¹⁶ In the Bombay textile industry, Indian nationalist leaders compromised the well-being of workers for the abstract concept of nation. Although Indian reformers such as S. S. Bengali and N. M. Lokhande were concerned about the conditions of laborers, in the late nineteenth century the goal of an economically strong nation resulted in apathy toward the plight of mill labor engaged in Indian-owned industries. By the early 1900s, in their efforts to build a cohesive, mass-based, anti-colonial movement, nationalists became sympathetic to the working and living conditions of mill laborers. However, an underlying pro-Indian industrialist approach continued to constrain the resultant labor welfare discourse of the twentieth century. Interestingly, while the late nineteenth-century nationalist rhetoric neglected the subject of worker well-being, the topic was gaining much prominence in local public health discourse.

In ways both actual and metaphorical, contagion and miasma figured distinctly in the nineteenth-century social policy discourse regarding industrial workers. Studies on this topic have observed that even though

middle- and upper-class people also died of communicable diseases, working-class bodies, dwellings, and neighborhoods were seen as the repositories of disease.¹⁷ Scientific discussions about the role of the social conditions of the poor in the transmission of disease established the links between poverty, sickness, and death, as Aisenberg has noted in the context of early nineteenth-century France.¹⁸ The occurrence and regulation of contagious diseases such as plague, cholera, and influenza became occasions to discuss the obligations of the government and employers to mitigate the deleterious social problems associated with industrialization and urban growth. These issues gained prominence in the city of Bombay after the outbreak of a devastating bubonic plague epidemic in 1896 that lingered in varying intensity for more than a decade. Between 1896 and 1910, the plague claimed over 170,000 lives and severely disrupted the social and commercial order of the city.¹⁹ The concerns over workers' ill-being gained prominence in the context of the epidemic as it posed a serious threat to the city's commercial economy and public health. In 1896, the etiology of plague was inconclusive and it was not until around 1908 that biomedical researchers managed to determine the role played by rats' fleas in the spreading of disease.²⁰ Consequently, urban miasma, insanitation, and overcrowding of working-class quarters, and the supposed unhygienic personal habits of poorer people, were considered to be the primary reasons for the occurrence and spread of the epidemic. As Chapter 3 of this study delineates, the urgency to control bubonic plague stimulated various government and voluntary projects of worker well-being that targeted the problems of unsanitary living. The outbreak of plague in Bombay thus had a definitive impact on the notions of worker ill-being/well-being as it established the links between poverty and disease.

In the interwar period, nationalistic social service groups as well as official deliberations about factory workers extended these notions. Reformers drew similar connections between poverty and the occurrence of epidemics such as cholera, influenza, and malaria. Kanji Dwarkadas, a prominent early twentieth-century local social activist and a champion of worker well-being, asserted that the influenza epidemic that struck Bombay in 1918 was "naturally worse in mill areas due to the lower powers of resistance of the working classes on account of poverty, undernourishment and bad working and housing conditions."²¹ The report of the Royal Commission on Labour in India echoed these sentiments as it represented the supposedly disease-inducing atmosphere of working-class

dwellings and a general lack of vigor among the city's working-class people as threats to the industrial productivity and society of a future nation, and as obstacles in the path of "national progress."²² By this time, social reformers frequently cited the supposed pervasive habit of alcoholism among the city's working classes as one of the primary reasons of workers' ill-being. These assumptions underlined the need for an effective social policy with regard to industrial laborers, while they also inspired voluntary groups to design worker well-being projects.

As this study shows, in colonial Bombay, the real and imagined conditions of insanitation, sickness, deaths, stillbirths, and alcoholism provided a backdrop to the worker well-being programs. The shifting global and national contexts attributed broader meanings to the projects of worker well-being. Held in 1919 in Washington, DC, the International Labour Convention and the subsequent formation of the International Labour Organization (ILO) strengthened the links between workers' well-being and the economic prosperity of a country.²³ The ensuing global standards of worker well-being encouraged sporadic investigations into the health conditions of industrial workers in India. The intermittent enquiries were conducted by biomedical experts and received support from provincial governments as well as agencies of medical research such as the Indian Research Fund Association.²⁴ Significantly, these official investigations were not parallel to or isolated from the nationalist and social reform practices of the interwar period. The inclusive thrust of Gandhian nationalism inspired local labor and feminist activists to conceive a stronger association between worker well-being and the creation of an ordered, productive, and vigorous society. Voluntary organizations such as the Social Service League and the Bombay Baby and Health Week Association conducted their own investigations of working-class localities but they also drew on governmental enquiries to determine the causes and remedies of worker ill-being. The increasing concerns over workers' health rendered urban subalterns visible in the broader public discourse. It also yielded a scientific rationality to the interventionist efforts of the state and voluntary groups in managing the everyday lives as well as the productive and reproductive capacities of industrial workers.

Taken together, the five chapters of this book demonstrate how the anxieties over the unhealthy living conditions of workers and its perceived potential to disrupt the social and economic order of the city were decisive in shaping the complex, interconnected features of worker well-being practices. The rhetoric of hygiene and health created a tension between systemic changes and the need for improving an individual's

habits. Although the links between ill-health and uneven urban development highlighted the need for the expansion of basic civic amenities, the rhetoric of sanitation and disease prevention constructed working-class individuals, their families, and homes as objects of investigations and reforms. The period between 1896 and 1947 witnessed the rise of social medicine or preventive care that involved home visits to working-class neighborhoods by district nurses, sanitary inspectors, health visitors, scientifically trained midwives, and social activists. Together, these actors aimed to discipline working-class people and impose a social, moral, and scientific order of being. Significantly, the association of health and hygiene with the space and function of the home and family highlighted the gendered nature of well-being practices, rendering working-class women responsible for the health and happiness of their families. Finally, the focus on workers' habits of life justified the interventions of educated middle-class reformers and administrators into the lives of working-class people. The ensuing top-down model of worker well-being betrayed the elitist and hegemonic tendencies of social reform, nationalist and feminist politics, and the limitations of colonial social policies with regard to industrial labor. While highlighting the overlooked narratives of labor history, this work critically interrogates the assumptions and approaches that have constituted the historical literature on urban industrial labor in colonial India.

THE PLATITUDES OF A MODERNIST PARADIGM

From the early twentieth century, modern factory industries and their labor in India generated considerable curiosity. The perceived potential of factory industry to modernize the country's economy and society stimulated written debates. By 1917, the communist movement in Europe and the Bolshevik revolution in Russia had established proletariats as the agents of social change. Moreover, by 1922, India replaced Switzerland to become the eighth most-industrialized member country of the ILO. The ILO recommended that India adopt international guidelines for regulating industrial work without further delay.²⁵ These broader contexts intensified academic and activist efforts to understand the characteristics of Indian factory labor, its socioeconomic positioning, and its potential to resist capitalist oppression.

During the late colonial period, British civil servants, visiting British and American observers, and educated Indians described what they saw

as the problems that blocked India's transition from a backward rural economy to a modern, industrial economy. In books and essays, they highlighted the dearth of infrastructure and capital in the subcontinent and underscored the difficulties of acquiring an efficient, adequate, and regular supply of labor for the emerging mills and factories.²⁶ Their reflections on the lack of commitment and discipline among the semi-peasant, migrant workers reproduced the discussions in the proceedings of the government-appointed colonial factory commissions. These government factory reports essentialized certain characteristics of Asiatic labor and constructed it as the inferior, idle "other" of European factory labor. The continued links of laborers in Bombay to their rural bases were deemed the cause of a lack of commitment to factory work and a shortage of labor. Simultaneously, their agricultural origins explained workers' alleged dilatory habits of work, and their inability to cope with the routines of the modern factory.²⁷

By the early 1920s, Indian labor spokespersons and trade unionists recorded the harshness of factory life and the abysmal living conditions of workers. Among others, Rajani Palme Dutt, a member of the Communist Party of Great Britain and India since the 1920s, uncritically deployed classical Marxist concepts of "production," "appropriation of surplus value," and "class for itself" to explain the workers' plight and their organized efforts to resist exploitation.²⁸ In this Marxist perspective, the frequency and length of labor strikes became accepted parameters to measure "the political organisation of class-conscious workers." Apart from communist commentators, intellectuals such as Rajani Kanta Das, a trained economist and a prolific labor and industry analyst, constructed a linear narrative of workers' organizing, which steadily progressed from scattered work strikes to unified, class-based Marxist radical trade unionism.²⁹ Despite their differences, both genres of colonial writings constructed workers primarily as economic beings. In their modernist paradigm, the transformation of Indian society crucially depended on the progressive transition of laborers from semi-peasants to committed, disciplined workers, and from naïve workmen to politicized, class-conscious proletarians.

Continuing this trend, the postcolonial commentaries on labor mainly concentrated on issues of industrialization, class formation, and collective action. The post-independence development plans of Jawaharlal Nehru, independent India's first prime minister, emphasized the modernization of the economy. His encouragement of large-scale industrialization

was reflected in academic projects concerning organized industry and its labor. Histories of labor and industry primarily focused on identifying the problems that stunted industrial growth. Consequently, the labor market, recruitment, and industrial discipline continued to dominate scholarly analyses.³⁰ Even the relatively more nuanced study of Morris D. Morris ignored the role played by non-class identities, such as caste, region, and gender, in shaping the social and political world of labor.³¹

During the 1970s, the underlying objective of most labor histories was to explain why India had not completed its transition to an industrial modernism and how the perceived lack of efficient labor and flawed recruitment policies hindered further industrialization.³² This perspective reduced workers to passive human capital whose apt deployment was crucial to industrial progress.

Ignoring the diversity of workers' existence, the trade union histories of the 1960s and 1970s constructed strikes and trade unionism as the only forms of mobilization of factory workers. In their rather simplistic studies, historians documented the emergence of class identity among workers, which transcended the "archaic," pre-capitalist identities based on caste, community, and region.³³ Even Richard Newman's relatively sophisticated narrative about the textile workers of Bombay emphasized the workers' rural and regional ties and how these ties adversely impacted laborers' collective actions.³⁴ Despite his subtle analysis, Dick Kooiman emphasized the struggle of labor leaders to extricate their constituents from their primordial loyalties to their caste and community leaders.³⁵

Mill and factory workers inhabited an extremely vibrant and multifaceted colonial urban milieu. Industrialization and subsequent urbanization impacted the lives of hundreds of thousands of human beings employed as workers in the mills of colonial cities. They had multiple identities, including their caste, community, and gender, and were not defined exclusively by a perceived universal class identity. Production and production relations certainly had a role in determining workers' lives, but there was more to mill laborers' existence than factory life and labor unionism. Equally forceful in shaping the daily lives of millworkers were the coexisting currents of nationalist and municipal politics, the sanitation and public health arrangements of Bombay City, the programs to regulate the moral and physical world of workers, and the early twentieth-century debates around social reproduction.

Culture was also highly important in fashioning workers' lives, as Dipesh Chakrabarty showed in his 1989 study of colonial jute millworkers

in Bengal.³⁶ He demonstrated that workers' relations with their employers, managers, union leaders, and fellow laborers were rooted in a pre-bourgeois hierarchical culture, not in a unified class consciousness. Laborers' religious, caste, and regional identities dominated each domain of their lives, even their confrontations with employers, and existing religious and regional conflicts among workers could overshadow the economic demands of a strike. Chakrabarty's ambitious study offered a critique of modernizing theories and Marxian political economy. However, the historian's insistence on the "otherness" of Indian workers reinforced a cultural essentialism that was inherent in colonial discourses on labor. Indeed, colonial discourse on labor reflected an inherent cultural essentialism. From the late nineteenth century, the pro-industrialist Indian elites and colonial officials both constructed Indian workers as fundamentally differing from the factory workers of Britain. The discursive construction of Indian workers as idle and comparatively less productive was deployed to dismiss demands to regulate the grueling work schedules in the mills and factories.³⁷ Similarly, in official and entrepreneurial discourse, the lack of sanitation and the conditions of overcrowding in working-class neighborhoods appeared as problems related to a specific class culture, a way of living.³⁸ This insistence on "habits of life" obscured the failure of the local and provincial governments and millowners to ensure basic sanitary housing and healthcare infrastructure for industrial workers. In other words, the dominant groups invoked and reformulated culture to obscure material conditions of poverty and inequality.

CONSTRUCTING URBAN WORKING-CLASS NEIGHBORHOODS AS SITES OF LOCAL POLITICS

Relationships among the labor market, collective action, and the quotidian lives of textile workers were dynamic, as Rajnarayan Chandavarkar shows in his study of the emergence of industrial capitalism and the formation of a working class in late nineteenth- and early twentieth-century Bombay. In the specific conditions of Bombay, the capitalists opted for short-term, speculative investments. Fluctuations in textile demands kept them from modernizing production technologically or developing a formal labor market. Therefore, rather than leading to proletarianization in the Western sense, industrialization in Bombay created a migrant working class that anxiously safeguarded and deployed its rural, caste, kin, and regional networks to secure jobs in a highly volatile labor market.³⁹

Rural ties were vital to workers' survival, as Chandavarkar demonstrates by exploring patterns of association in Bombay's workplaces and mill districts. In a situation where industrial housing was scarce, workers' rural ties and social connections in their neighborhoods helped them to find shelter in the city. Kinship and village connections often facilitated workers' access to the informal credit market, essential for survival through fluctuating employment and during lengthy mill strikes. Moreover, mill neighborhoods gradually became a site for trade union activism.⁴⁰

Thus, working-class localities were not necessarily sites that reproduced the primordial identities of caste, community, and region. In late nineteenth- and early twentieth-century Bombay, working-class neighborhoods became emblematic of the limitations of colonial sanitation and health policies. Extreme overcrowding in workers' quarters, and the near absence of sanitation facilities in their localities, not only reflected the unevenness of urban development in Bombay, but also demonstrated the narrow cost-benefit logic of the provincial government and Indian millowners. The partial execution of housing and sanitation reforms in working-class areas underscored how the elites dominated the Bombay Municipality, the body responsible for administering civic amenities in Bombay. Hence, urban spatial organization is significant in understanding the systemic factors that determined the everyday lives of millworkers.

This study locates the pro-working-class development schemes in early twentieth-century Bombay in the contemporary politics of urban space. The built environment of colonial Bombay was fashioned according to the needs of its trading and commercial elites, as historians of colonial urbanization have emphasized.⁴¹ Despite their claims about ameliorating the filth and squalor of urban slums, government bodies such as the City of Bombay Improvement Trust actually intensified overcrowding and unsanitary conditions in poorer-class localities, as Prashant Kidambi has argued in his study of the growth of Bombay as a metropolis in the early 1900s. The inherent class biases and narrow visions of colonial urban developers restricted civic amenities to the British colonial and Indian elites.⁴² As this work shows, the elite-dominated politics of urban development impacted the lives of Bombay's textile millworkers. Elite Indians, including millowners, were important participants in the development of Bombay: as financiers of various urban development projects, as municipal corporators, and as members of the provincial legislative assembly. They deployed their influence to avoid the financial burden of providing clean and healthy living spaces to their employees. Housing and sanitation projects to improve millworkers' living conditions became

responsibilities that the provincial and local governments and Indian millowners kept passing among themselves.

MANAGING POPULATION: SOCIAL SERVICE AND CIVIC ETHIC IN COLONIAL BOMBAY

Workers' allegiance to and participation in trade union actions was contingent and fluctuating.⁴³ Textile trade unions were a transient influence—one among many forces that attempted to shape the lives and choices of laborers. In the early 1900s, educated and philanthropic sections of Bombay increasingly constructed the presence of a large laboring population as a “problem.” With a growing sense of responsible citizenship, they formed social service groups that sought to mediate among the municipality, the millowners, and the “ignorant” millworkers. Organizations such as the Social Service League (SSL) and the Young Men's Christian Association (YMCA) tried to inculcate the workers with values of healthy and decent living through a range of activities that included instruction in sanitation, temperance campaigns, physical training, and sports. With their non-confrontational approaches, these groups emerged as alternatives to the militant trade unions. Their modes of managing the lower-class population reflected contemporary nationalist rhetoric regarding self-discipline and self-improvement.⁴⁴

By the early 1920s, the mainstream, anti-colonial nationalism in India entered into its mass phase. The Indian National Congress (INC), with M. K. Gandhi as its leader, worked to mobilize the masses for its programs of non-cooperation, anti-British agitation, and self-help. The nationalist leadership in Bombay sought to include millworkers in its campaigns, including *Swadeshi* and temperance.⁴⁵ Increasingly, the nationalist leadership promoted the INC not merely as a political party but as a hegemonic movement that subsumed political formations ranging from voluntary organizations to trade unions. However, despite their self-proclaimed nonpartisan image, the leadership of the Congress, throughout the colonial period, primarily represented the class interests of the Indian bourgeoisie.⁴⁶

The regulation of mass behavior reflected a desire to avert class confrontations within the nationalist movement.⁴⁷ The nationalist discourse concerning sobriety and a need to discipline the habitually undisciplined (read: peasants and workers) echoed in the activities of the SSL

and the YMCA. The Gandhian vision of a harmonious nation devoid of class tensions encouraged the growth of non-trade union and non-confrontational modes of association among millworkers. Moreover, Gandhi's perceptions about a nation in which the privileged elite served as trustees for the underclass significantly informed the paternalist trends in social service activism concerning millworkers.⁴⁸

This labor-oriented social service activism also reflected the limitations of British governmentality in India. To explain the development of modern governments in Western Europe, Michel Foucault articulates a concept of governance that transcends the usual strict political meaning attached to this term.⁴⁹ Foucault argues that the stability and power of modern governments do not depend only on the institution of disciplinary state apparatuses. Rather, like the head of a family, governments ensure the well-being of their populations. In addition to legitimizing state power, welfare programs become a pretext to intervene into the daily lives of people and acquire knowledge about their social and physical world. In this framework, the projects to control disease, filth, and poverty can also be seen as attempts to render people as decipherable entities. Thus, the twin intents of legitimizing power and controlling people encouraged the development of modern governments' welfare programs.

The colonial state in India vigorously collected data about the colonized, and the state implemented its sanitation and public health policies with hegemonic ambitions. However, this colonial governmentality remained limited because of the empire's fiscal conservatism and its inability to manage the vast and diverse subject population of India. This systemic failure created greater space for the voluntary actions of philanthropic or social service organizations, both Indian and foreign. Leaders of these social service groups did not simply mediate between the state and the people. As the putative vanguard of a future nation, reformers perceived themselves to be the trustees of India's underclass. Their aim of ensuring the people's well-being by regulating their social conduct expressed a desire to discipline and govern the future citizens of an independent nation.

WAGE WORK, MOTHERHOOD, MOTHERCRAFT, AND WORKING-CLASS WOMEN

The broader politics of social reform, nationalism, gender, and colonial public health had a particular impact on the lives of women millworkers, and this book examines how maternal and infant health programs

impacted the lives of these women.⁵⁰ In contrast to educated Indian women, non-literate working-class women did not document their own experiences. However, observers, including colonial officials, social activists, medical professionals, and publicists, frequently wrote about working-class women's work schedules, sexuality, domesticity, and child-bearing and parenting practices.

Modern manufacturing marginalized women workers in multiple ways, as Samita Sen showed in her study of the jute industry of colonial Bengal.⁵¹ The wives or women relatives of migrant male workers labored on their rural farms. However, their work was devalued and seen merely as a part of their domestic duty. When rural distress compelled them to migrate and to seek employment in jute mills, employers used dominant ideas about the sexual division of labor to maintain gendered skill and wage differentials in the industry. A simultaneous *bhadralok* glorification of women's domestic roles as wives and mothers further devalued women's paid work in jute mills.

Formed in 1919, in the aftermath of the First World War, the ILO paid significant attention to working-class families and consequently to the role of women workers as mothers and wives. As Sen has argued, this insistence on family reflected a desire to rejuvenate a war-ravaged world by ensuring the reproduction of labor.⁵² Thus, protection of pregnant women and provisions such as maternity benefits largely reflected the needs of capital. As Dagmar Engels has demonstrated, the need for child labor in the tea plantations and coal mines of colonial Bengal necessitated employers to grant limited maternity benefits to women workers there.⁵³ In Bombay, the alarmingly high infant death rates generated concerns for the well-being of working-class families. Despite these global and local pushes, neither the provincial government nor millowners were willing to bear the cost of childcare facilities or basic benefits such as paid maternity leave. However, Indian labor welfare leaders, nationalists, and women's rights activists relentlessly campaigned for the implementation of the maternity benefit recommendations of the Washington Draft Convention. This book delineates in detail how the nationalist iconography of motherhood informed their campaigns. In the debates on this topic, the glorification of women's maternal roles transformed a basic right of female wage workers into a quest to create a future nation peopled with healthy children and dutiful mothers.

Beginning in the 1920s, the increasing focus on working-class women's maternal functions downplayed their roles in millworkers' collective

struggles for better work conditions. The crystallization of the idea of a family wage in official discourse constructed women workers as supplementary wage earners, as Radha Kumar argues in her essay on women millworkers of Bombay.⁵⁴ Such constructions made women more vulnerable to the fluctuations of the textile labor market and obscured their identity as workers in their own right. In the early twentieth century, infant mortality figures in Bombay remained consistently high. Between 1900 and 1920, the municipality recorded an average annual infant death rate of 588 per 1,000 live births.⁵⁵ The desire to control these appalling child mortality rates stimulated several efforts to reform the childbirth and infant care practices of the city's working class, which formed the majority of its population. Beginning in the 1910s, the Bombay Municipality, various voluntary organizations, philanthropic individuals, and millowners initiated programs to create maternity homes and infant welfare centers for working-class women and their infants. Led by educated and affluent British and Indian women, some voluntary infant and maternal welfare organizations gained prominence by the 1920s. A significant part of their reform activities targeted the supposed "harmful" and "backward" childcare practices of working-class mothers that supposedly endangered the lives of their infants. The ensuing emphasis on improved mothering practices rendered working-class neighborhoods the sites of cross-national and interracial activism carried out by elite women.

Although British feminists were not intentional agents of empire, their concerns for Indian women evinced dominant imperialist ideas that constructed the colonized as inferior subjects in need of guidance from their superior rulers.⁵⁶ Barbara Ramusack has termed Western women activists as "benevolent maternal imperialists" who were "referred to as mothers or saw themselves as mothering India and Indians."⁵⁷ Their concerns reaffirmed the parent-child, dominant-subordinate relationships between British and Indian women. Although elite Indian and Western women cooperated to promote women's rights in colonial India, they could not transcend the power relations inherent in their collaborations.⁵⁸ The moves to extend modern childbirth facilities to Indian women displayed similar tendencies.

An underlying faith in the civilizing features of the British Empire informed the actions of European women doctors and philanthropists, as Antoinette Burton has argued.⁵⁹ Queen Victoria's concern for Indian women's tribulations during childbirth is well documented.⁶⁰ In 1885,

acting upon the queen's suggestions, Harriet Georgina Dufferin, wife of India's governor-general, inaugurated the Dufferin Fund to extend medical relief to Indian women, the perceived helpless victims of archaic customs such as child marriage and *purdah*. Although by the early 1900s some Indian women had acquired medical educations and were coordinating efforts to provide childbirth facilities to Indian women, Western women continued to generalize them as passive victims of *purdah* and superstitions.⁶¹ Without discounting these power dynamics, which are inherent in this transnational, collaborative activism, this work argues that the discourse of infant and maternal welfare did not simply represent the binary opposition of East and West. In early twentieth-century Bombay, this discourse reflected the class positions of both elite Western and Indian women, who, despite their cultural differences, were unanimous in essentializing working-class women as steeped in maternal ignorance. Some women physicians, such as Margaret Balfour and Florence Barnes, indicated how poverty affected the health of working-class mothers and their infants.⁶² However, the theme of maternal negligence dominated the initiatives of the Bombay Municipality, of medical professionals, and of voluntary women's groups.

Unlike most previous studies of industrial labor in colonial India, this study moves beyond trade union politics, emphasizing how labor well-being discourse and policies strove to reallocate resources in order to enhance the productive and reproductive capacities of the nation's labor power. The intention is not to dismiss the role of trade unions and labor movements in raising the questions of worker welfare. Rather, this study illustrates that attention to social policies and labor-oriented activism of various formations is helpful in understanding the complex processes that constituted the social world of industrial workers. By placing Bombay's textile millworkers—both male and female—in their urban context, this study shows that industrial workers were not simply products of their economic conditions; their socialization in the city was equally important in constituting their identities and politics. Drawing on extensive archival research, the book redraws the map of labor history, suggesting how the built urban environment, colonial local governance, public health policies, and deeply gendered local and transnational voluntary reform programs constituted working-class lives. By placing textile workers at the center of urban history, this work also provides a specific, class-based analysis of urban society, politics, and spatial arrangements.

ORGANIZATION OF THE STUDY

The political economy of textile labor in colonial Bombay cannot be fully understood without accounting for the structural negligence of workers' health and physical well-being, which were crucial to the global dynamics of the textile markets and the competitive practices of cotton manufacturers. As Chapter 2 delineates, from the inception of the industry, the labor force encountered carbonic emissions, close contact with cotton particles, and an excruciating working schedule without recess or regular holidays. Inadequate housing and dismal sanitary management in the chawls posed serious threats to workers' health. However, both the colonial state and Indian millowners evaded responsibility for workers' health and well-being. Because Indian millowners dominated the commercial and political life of Bombay, they could thwart regulations regarding workers' welfare. Contemporary nationalist thought, which defended a nascent Indian enterprise against unfair foreign competition, ignored the indifference of Indian millowners.

Crises such as the outbreak of a virulent bubonic plague in 1896 momentarily eroded the apathy toward millworkers' living conditions. Before turning to post-plague urban renewal schemes, Chapter 3 briefly traces the history of class-based urban growth in Bombay, highlighting how the built environment of the city accentuated industrial workers' spatial marginalization. The plague panic prompted a more inclusive urban growth. However, growing tensions among various government bodies—the Bombay Improvement Trust, the Bombay Municipality, and the provincial Development Department—and the financial conservatism of millowners and the colonial state impeded the implementation of early twentieth-century industrial housing and sanitation projects. As the epidemic-induced urgency subsided, the efforts to reallocate resources lost their zeal, and the problems of spatial and structural inequalities also went largely unaddressed in the post-plague period.

The limited successes of housing and sanitation programs switched the reformers' focus from systemic changes to individual behavior, a discursive shift that created spaces for elite interventions into workers' lives. In early twentieth-century Bombay, the activism of voluntary social service groups among millworkers increased significantly. Chapter 4 examines the worker well-being rhetoric of the Bombay Sanitary Association, the Social Service League, and the Bombay branch of the Young Men's Christian Association, the three most active formations among

millworkers. Embodying a range of global, nationalist, and local perspectives, these groups constructed the unsanitary living and “uncontrolled” merrymaking of workers as injurious to workers’ own lives and as threats to the colonial urban order. Their desire to create a “decent” and sanitized working class was accompanied by an urgent desire to neutralize the growing influence of trade unions. With active support from millowners, voluntary groups occupied a welfarist presence, creating greater awareness about dismal living conditions and engaging workers in healthier, non-combative activities. This chapter analyzes caste, gender, and class biases inherent in the welfare discourses and practices of voluntary groups. Moreover, it draws attention to the role of voluntary action in shaping ideas and practices about worker well-being and in influencing colonial class politics.

Chapter 5 critically maps the ways in which Indian elites and colonial administrators of Bombay considered the well-being of women millworkers. Until the 1920s, working-class women were marginal to the colonial gender reforms and women’s rights discourse. The Draft Convention meeting of the International Labour Conference triggered concerns for the welfare of women workers in India, a member country. Consistently high local infant mortality figures and the pressures to conform to new international labor welfare standards prompted Bombay’s educated social activists to campaign for paid maternity leave for female millworkers and nurseries for their infants. Their relentless campaigns drew attention to an aspect of women workers’ lives that colonial bureaucrats, millowners, and the textile trade union movement of Bombay had neglected. Despite its successes, the discourse of maternal and infant welfare failed to espouse a liberal vocabulary of women workers’ rights; it drew uncritically on the nationalist ideologies of gender. The maternity benefits debate exalted working-class women’s roles in social reproduction, undermining their identities as productive workers. Also, the debates re-emphasized the agency of middle-class, educated reformers in determining and resolving the problems of the working classes, ignoring millworking women’s own initiatives for improving their well-being.

Expanding on the previous chapter, Chapter 6 also examines the efforts of voluntary groups, the Bombay Municipality, and Indian millowners to prevent infant mortality. These included campaigns to medicalize childbirth, establish crèches, and organize informal education in mothercraft for working-class women. Voluntary groups and the Bombay Municipality collaborated to appoint “scientifically” trained midwives

and health visitors in working-class areas and created maternity homes in mill localities to reduce the dominance of “untrained” traditional midwives. Despite inadequate funds, the creation of infant welfare centers and an employer-funded maternity hospital accelerated the attempts to medicalize childbirth and provide both antenatal and postnatal care for working-class women and their infants. Simultaneously, the Bombay Baby and Health Week Association regularly organized Baby Weeks in the mill districts to showcase “appropriate” methods of infant care. These spectacles and informal educational programs highlighted the role of mothercraft in making healthy working-class babies and de-emphasized structural factors such as poverty and the lack of sanitary infrastructure that endangered infant health.

The epilogue briefly reviews the forms of labor well-being practices and their implications for the spatial and class politics of a colonial metropolis. The labor well-being programs were meant to address urban inequalities. However, inadequate funding constrained welfare schemes, shifting the focus to individual attributes. Consequently, the government and voluntary activists concentrated on improving behaviors and attitudes, leaving economic and social inequalities unaddressed. This historical context helps illuminate the spatial and class politics of today’s neoliberal Mumbai. The rapid growth of Mumbai’s financial and service economy, the closure of textile mills, and the sharp rise in real estate prices has further pushed the urban laboring classes to the underdeveloped margins of the city. At the same time, shrinking public expenditure has created more spaces for non-governmental organizations (NGOs). Like the earlier voluntary groups, and despite their claims that they are improving the conditions of the urban poor, the NGOs are unable to address fundamental socioeconomic inequalities in the megacities of the Global South.

Together, the five chapters of *The Well-Being of the Labor Force in Colonial Bombay* explore the complex intersections of the histories of public health, urban development, social reform, class and gender, and nationalism. The use of well-being as an overarching concept allows this study to incorporate missing narratives and overlooked sources in the history of South Asian labor. Moreover, the focus on Indian activists and industrialists makes this study a historical as well as political inquiry into the nationalist and feminist practices of colonial India. The analyses of these political practices question the binary of colonizer and colonized and identify the power dynamics that constituted Indian society in colonial as well as postcolonial times.

NOTES

1. "Impressions of Prof. H. L. Kaji: Bombay Slums," *Social Service League Bombay, Sanitation Department, Pamphlet No. 1*, Bombay Pamphlets, etc., Royal Asiatic Society Library, Mumbai (henceforth RASL), Vol. 3, 1, 1922, n.p.
2. Ibid.
3. Jean Dreze and Amartya Sen, *India: Economic Development and Social Opportunity* (Delhi: Oxford University Press, 1995), 9–16; Ian Gough, J. Allister McGregor, and Laura Camfield, "Theorising Wellbeing in International Development," in Ian Gough and J. Allister McGregor, eds., *Wellbeing in Developing Countries: From Theory to Research* (Cambridge: Cambridge University Press, 2007), 3–5.
4. Dreze and Sen, *India*, 11.
5. Ibid., 12–16; Amartya Sen, *Commodities and Capabilities* (Delhi: Oxford University Press, 1999), 12–21.
6. Gough, McGregor, and Camfield, "Theorising Wellbeing in International Development," 4–5.
7. In 1905, there were 197 mills in India, and 81 of these were located in Bombay City. By 1925, the number of mills in India had increased to 337, while the number of mills in Bombay remained at 82. However, in 1925 these 82 Bombay mills ran 3,456,233 spindles and 72,266 looms and employed an average of 153,009 workers daily. The 337 mills in the whole of India had 8,510,633 spindles, 154,202 looms, and employed a daily average of 367,877 laborers. In terms of size, Bombay City still dominated the production of cotton textiles. S. M. Rutnagur, *Bombay Industries: The Cotton Mills, A Review of the Progress of the Textile Industry in Bombay from 1850 to 1926* (Bombay: Indian Textile Journal Press, 1927), 386–87; D. H. Buchanan, *The Development of Capitalist Enterprise in India* (New York: Macmillan, 1934), 206; Claude Markovits, *Indian Business and Nationalist Politics, 1931–39: The Indigenous Capitalist Class and the Rise of the Congress Party* (Cambridge: Cambridge University Press, 1985), 202.
8. Rutnagur, *Bombay Industries*, 328; Morris D. Morris, *The Emergence of an Industrial Labor Force in India: A Study of the Bombay Cotton Mills* (Berkeley: University of California Press, 1965), 213–14.
9. S. M. Edwardes, *The Gazetteer of the Bombay City and Island* (henceforth *City Gazetteer*), Vol. I (Bombay: Times of India Press, 1909), 207; *Report of the Royal Commission on Labour in India* (henceforth *RCLI*) (Calcutta: Government of India, Central Publication Branch, 1931), 11; Gill Yamin, "The Character and Origins of Labour Migration from Ratnagiri District 1840–1920," *South Asia Research*, Vol. 9, No. 1 (1989): 33–53.
10. Morris, *Emergence of an Industrial Labor Force in India*, 217–18.

11. *RCLI*, 11; B. R. Tomlinson, *The Economy of Modern India* (Cambridge: Cambridge University Press, 1993), 114; Rajnarayan Chandavarkar, *Origins of Industrial Capitalism in India: Business Strategies and the Working Classes in Bombay, 1900–1940* (Cambridge: Cambridge University Press, 1994), 128–30.
12. “Chawl” is a local language term for a specific type of lower-class tenements.
13. S. M. Edwardes, “Report,” Part IV of *Census of India, 1901*, Vol. XI, *Bombay: Town and Island* (Bombay: Times of India Press, 1901), 17.
14. Bipan Chandra, *The Rise and Growth of Economic Nationalism in India: Economic Policies of Indian National Leadership, 1880–1905* (New Delhi: People’s Publishing House, 1969), 90–141.
15. *Ibid.*
16. Manu Goswami, *Producing India: From Colonial Economy to Nationalist Space* (Chicago: University of Chicago Press, 2004), 209–41.
17. See, for example, Gerry Kearns and C. W. J. Withers, “Introduction: Class, Community, and the Processes of Urbanization,” in Gerry Kearns and C. W. J. Withers, eds., *Urbanising Britain: Essays on Class and Community in the Nineteenth Century* (Cambridge: Cambridge University Press, 1991), 1–11; Bryan S. Turner, *Medical Power and Social Knowledge* (London: Sage Publications, 1995); Andrew R. Aisenberg, *Contagion: Disease, Government, and the “Social Question” in Nineteenth-Century France* (Stanford: Stanford University Press, 1999), 1–14; Lucinda McCray Beier, *For Their Own Good: The Transformation of English Working-Class Health-Culture, 1880–1970* (Columbus: Ohio University Press, 2008), 145–207.
18. Aisenberg, *Contagion*, 10–12.
19. J. S. Nerurker, *Turner and Goldsmith’s Sanitation in India* (Bombay: Times of India Press, 1934), 603.
20. David Arnold, *Colonizing the Body: State Medicine and Epidemic Disease in Nineteenth-Century India* (Berkeley: University of California Press, 1993), 210.
21. Kanji Dwarkadas, *Forty-Five Years with Labour* (Bombay: Asia Publishing House, 1962), 20–21.
22. *RCLI*, 243–44.
23. Janet H. Kelman, *Labour in India: A Study of the Conditions of Indian Women in Modern Industry* (London: George Allen and Unwin, 1923), 178–79.
24. *RCLI*, 253–54. In the interwar period, the government of Bombay as well as the Indian Research Fund Association occasionally commissioned investigations into the health conditions of industrial workers. See, for example, Margaret I. Balfour and Shakuntala K. Talpade, “The Maternity Conditions

- of Women Mill-Workers in India,” *The Indian Medical Gazette*, Vol. LXV, May 1930, 241–49; “Infant Mortality among Working Classes in Bombay City: Report of an Enquiry Conducted by the Labour Office,” *Bombay Labour Gazette*, January 1931, 494–507; Margaret I. Balfour, “Early Infant Mortality in India with Special Reference to Pre-Mature Death,” *The Indian Medical Gazette*, Vol. LXV, November 1930, 630–36.
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 26. Vera Anstey, *The Economic Development of India* (1929, rpt. New York: Arno Press, 1977); G. M. Broughton, *Labour in Indian Industries* (London: Oxford University Press, 1924); Buchanan, *The Development of Capitalist Enterprise in India*; A. R. Burnett-Hurst, *Labour and Housing in Bombay* (London: P. S. King, 1925); R. N. Gilchrist, *Indian Labour and the Land* (Calcutta: Government of Bengal Press, 1932); Kelman, *Labour in India*; Dewan Chaman Lal, *Coolie—The Story of Labour and Capital in India* (Lahore: Oriental Publishing House, 1932); R. K. Mukherjee, *The Indian Working Class* (Bombay: Hind Kitab, 1945); S. G. Panandikar, *Industrial Labour in India* (Bombay: Longman Greens, 1933).
 27. *Report of the Indian Factory Labor Commission*, 1908 (henceforth IFLC 1908), Vol. I, 18–20; *Report of the Royal Commission on Labour in India* (London: His Majesty’s Stationary Office [HMSO], 1931), 41–42; Morris, *Emergence of an Industrial Labor Force in India*, 84–100.
 28. R. K. Das, *Labour Movement in India* (Berlin: De Gruyter, 1923); N. M. Joshi, *The Trade Union Movement in India* (Bombay: Times of India Press, 1927); P. S. Loknathan, *Industrial Welfare in India* (Madras: Methodist Publishing House, 1929); Ahmad Mukhtar, *Trade Unionism and Labour Disputes in India* (Bombay: Longman Greens, 1935); B. Shiva Rao, *The Industrial Worker in India* (London: George Allen and Unwin, 1939); R. P. Dutt, *India Today* (London: Victor Gollancz, 1940).
 29. Rajani Kanta Das obtained his Ph.D. in economics from the University of Wisconsin, Madison, in the United States in 1917. In the 1920s and 1930s, Das worked in the International Labour Organization. He frequently wrote on Indian factory and labor legislation, working conditions of children and women in Indian factories, and labor migration issues. J. Krishnamurty, “The Indian Antecedents of Disguised Unemployment and Surplus Labour,” in N. Jayaram and R. S. Deshpande, eds., *Footprints of Development and Change: Essays in Memory of Prof V. K. R. V. Rao* (Delhi: Academic Foundation, 2008), 475.

30. See C. A. Myers, *Labor Problems in the Industrialization of India* (London: Oxford University Press, 1958); on "commitment theory," see S. D. Mehta, *The Cotton Mills of India* (Bombay: The Textile Association, 1954).
31. Morris, *Emergence of an Industrial Labor Force in India*, 39–83, 154–77.
32. Ranajit Das Gupta, *Problems of Economic Transition: Indian Case Study* (Calcutta: National Publisher, 1970); R. Newman, "Social Factors in the Recruitment of the Bombay Millhands," in K. N. Chaudhary and C. J. Dewey, eds., *Economy and Society: Essays in Indian Economic and Social History* (Delhi: Oxford University Press, 1979); C. P. Simmons, "Recruiting and Organizing an Industrial Labour Force in Colonial India: The Case of the Coal Mining Industry, 1880–1939," *Indian Economic and Social History Review* (henceforth *IESHR*), Vol. 13, No. 4 (1976): 455–85; D. Mazumdar, "Labour Supply in Early Industrialization: The Case of the Bombay Textile Industry," *English Historical Review*, Vol. 26, No. 3 (1973); R. Dasgupta, "Factory Labour in Eastern India: Sources of Supply, 1855–1946: Some Preliminary Findings," *IESHR*, Vol. 13, No. 3 (1976): 277–328; B. Misra, "Factory Labour During the Early Years of Industrialization: An Appraisal in the Light of the Indian Factory Labour Commission 1890," *IESHR*, Vol. 12, No. 3 (1975): 203–28.
33. Some such works are V. B. Karnik, *Indian Trade Unions: A Survey* (Bombay: Manaktalas, 1966); Karnik, *Strikes in India* (Bombay: Manaktalas, 1967); J. S. Mathur, *Indian Working Class Movement* (Allahabad: Pustakyan, 1964); G. K. Sharma, *Labour Movement in India: Its Past and Present* (New Delhi: Sterling, 1971); Sukomal Sen, *Working Class of India: History of Emergence and Movement, 1830–1970* (Calcutta: K. P. Bagachi, 1977); and C. Revri, *The Indian Trade Union Movement, 1880–1947* (New Delhi: Orient Longman, 1972).
34. R. Newman, *Workers and Unions in Bombay, 1918–29: A Study of Organisation in the Cotton Mills* (Canberra: Australian National University, 1981).
35. Kooiman asserted that in the absence of a formal labor market, millowners in Bombay obtained labor through jobbers who recruited job-seeking migrants from their own rural and caste networks. Because of this role, jobbers held a position of power among the millworkers of Bombay. As caste and community leaders, jobbers represented a formidable challenge to trade union leaders who sought to organize workers along class lines. Dick Kooiman, "Jobbers and the Emergence of Trade Unions in Bombay City," *International Review of Social History*, Vol. 22, No. 3 (1977): 313–28; "Bombay Communists and the 1924 Textile Strike," *Economic and Political Weekly* (henceforth *EPW*), Vol. 15, No. 29 (19 July 1980): 1223–36.

36. Chakrabarty, *Rethinking Working-Class History*.
37. K. N. Bahadurji, "Indian Factory Workers," 10–11.
38. A chapter in labor historian Subho Basu's book on the jute mill labor of colonial Bengal delineates how discriminatory municipal politics in the mill towns of Calcutta coincided with the essentialization of workers as ignorant and as prisoners of their own culture. Subho Basu, *Does Class Matter: Colonial Capital and Workers' Resistance in Bengal, 1890–1937* (Delhi: Oxford University Press 2004), 74–105.
39. Chandavarkar, *Origin of Industrial Capitalism*, 72–123, 239–77.
40. *Ibid.*, 124–238.
41. Prashant Kidambi, *The Making of an Indian Metropolis: Colonial Governance and Public Culture in Bombay, 1890–1920* (Hampshire, UK: Ashgate, 2007); Sandip Hazareesingh, "Colonial Modernism and the Flawed Paradigm of Urban Renewal: Uneven Development in Bombay, 1900–1925," *Urban History*, Vol. 28, No. 2 (2001): 235–55; Mariam Dossal, *Imperial Designs and Indian Realities: The Planning of Bombay City, 1845–1875* (Bombay: Oxford University Press, 1996); Meera Kosambi, *Bombay in Transition: The Growth and Social Ecology of a Colonial City, 1880–1980* (Stockholm: Almqvist and Wiskell International, 1986).
42. Kidambi, *Making of an Indian Metropolis*, 78–113.
43. Chandavarkar has dismantled the commonly held view that the working classes naturally bonded with each other. His analysis traces how the fluctuations of labor demand created rivalries among workers. The diversity of work conditions and wages among individual mills within Bombay intensified competition among laborers. Consequently, even the unity displayed during the mill strikes of the 1920s and 1930s was not an unwavering expression of millworkers' class consciousness. Rather, this solidarity was contingent upon specific economic and political situations. Chandavarkar, "Workers' Politics and the Mill Districts in Bombay."
44. For some reflections on the rhetoric of self-discipline in Indian nationalism, see John Roselli, "The Self-Image of Effeteness: Physical Education and Nationalism in Nineteenth-Century Bengal," *Past and Present*, No. 86 (February 1980): 121–48; Joseph S. Alter, "Celibacy, Sexuality, and the Transformation of Gender into Nationalism in North India," *Journal of Asian Studies*, Vol. 53, No. 1 (February 1994): 45–66; Alter, "Gandhi's Body, Gandhi's Truth: Nonviolence and the Biomoral Imperative of Public Health," *Journal of Asian Studies*, Vol. 55, No. 2 (May 1996): 301–22; Ashwini Tambe, "Gandhi's 'Fallen' Sisters: Difference and the National Body Politic," *Social Scientist*, Vol. 37, No. 1–2 (January–February 2009): 21–38.

45. Ravinder Kumar, "From Swaraj to Purna Swaraj: Nationalist Politics in the City of Bombay, 1920–1932," in D. A. Low, ed., *Congress and the Raj: Facets of the Indian Struggle, 1917–1947* (New Delhi: Oxford University Press, 2004), 77–108; Jim Masselos, *The City in Action: Bombay Struggles for Power* (New Delhi: Oxford University Press, 2007), 153–95.
46. S. Bhattacharya, "Swaraj and Kamgar: The Indian National Congress and the Bombay Working Class, 1919–1931," in Richard Sisson and Stanley Wolpert, eds., *Congress and Indian Nationalism* (Berkeley: University of California Press, 1988), 223–49.
47. Ranajit Guha, *A Disciplinary Aspect of Indian Nationalism* (Santa Cruz: Merrill Publication, 1991), 19–39; Ranajit Guha, "Discipline and Mobilize," in Partha Chatterjee and Gyanendra Pandey, eds., *Subaltern Studies VII: Writings on South Asian History and Society* (New Delhi: Oxford University Press, 1994), 69–120.
48. In his key ideological text titled *Hind Swaraj or the Indian Home Rule* (1909), Gandhi articulated his vision of an ideal national community. Privileged groups would voluntarily work toward the well-being of the entire nation, including its most marginalized sections. During his involvement in the Ahmedabad millworkers' strike of 1918, Gandhi further developed his ideas about integrationist relations, as opposed to confrontational relations, between capitalists and workers. Although he advocated for workers' demands, Gandhi cautioned them against confrontational methods and preached that they should discipline themselves by cultivating temperance, cleanliness, and a minimalist lifestyle. M. K. Gandhi, *Hind Swaraj or Indian Home Rule* (Ahmedabad: Navjivan Trust, 1938); *Collected Works of Mahatma Gandhi*, Vol. XIV (October 1917–July 1918) (Ahmedabad: Navjivan Press, 1965), 212–73.
49. Michel Foucault, "Governmentality," in Graham Burchell, Colin Gordon, and Peter Miller, eds., *The Foucault Effect: Studies in Governmentality* (Chicago: University of Chicago Press, 1991), 87–104.
50. Some prominent existing works in the field of the colonial politics of reproduction include Barbara N. Ramusack, "Embattled Advocates: The Debates on Birth Control in India, 1920–1940," *Journal of Women's History*, Vol. I, No. 2 (Fall 1989): 34–64; Sarah Hodges, ed., *Reproductive Health in India: History, Politics, Controversies* (New Delhi: Orient Longman, 2006); Sanjam Ahluwalia, *Reproductive Restraints: Birth Control in India, 1877–1947* (Urbana: University of Illinois Press, 2008); Hodges, *Contraception, Colonialism and Commerce: Birth Control in South India, 1920–1940* (Hampshire, UK: Ashgate, 2008).
51. Samita Sen, *Women and Labour in Colonial India*; Sen, "Motherhood and Mothercraft: Gender and Nationalism in Bengal," *Gender and History*, Vol. 5, No. 2 (1993): 231–43.

52. Sen, *Women and Labour in Colonial India*, 143.
53. Dagmar Engels, "The Myth of the Family Unit: Adivasi Women in Coal Mines and Tea Plantations in Early Twentieth Century Bengal," in Peter Robb, ed., *Dalit Movements and the Meaning of Labor in India* (Delhi: Oxford University Press, 1993), 225–45.
54. Radha Kumar, "Family and Factory."
55. Constructed from the *Annual Reports of the Municipal Commissioner of Bombay, 1900–1920*.
56. Edward Said maintained that scholars of empire must recognize the ubiquitous presence of imperial power relations in every sphere and institution of the empire, including the political, cultural, economic, and educational spheres. Feminist historians of empire, most notably Antoinette Burton, have deployed his framework to understand the power dynamics inherent in the transnational sisterhood. Edward Said, *Culture and Imperialism* (New York: Vintage Books, 1994), 15–19.
57. Barbara N. Ramusack, "Cultural Missionaries, Maternal Imperialists and Feminist Allies: British Women Activists in India, 1865–1945," in Chaudhuri and Strobel, eds., *Western Women and Imperialism*, 119–36.
58. Mrinalini Sinha, *Specters of Mother India: The Global Restructuring of an Empire* (Durham: Duke University Press, 2006), 152–96.
59. Antoinette Burton, "Contesting the Zenana: The Mission to Create 'Lady Doctors for India,' 1874–1885," *Journal of British Studies*, Vol. 35 (July 1996): 368–97.
60. Apparently upon their return from India to Britain, two women doctors, Dr. Elizabeth Bielby and Dr. Mary Scharlieb, narrated to Queen Victoria the lack of medical facilities and the consequent sufferings of Indian women during childbirth. In 1883, as Harriet Dufferin departed to India, the queen instructed her to initiate medical relief for Indian women. Margaret I. Balfour and Ruth Young, *The Work of Medical Women in India* (London: Humphrey Milford, 1929), 33; Kelman, *Labour in India*, 173.
61. In 1926, while addressing a meeting of the Dufferin Fund in Delhi, India, Lady Irwin, the wife of India's viceroy Lord Irwin (1926–1931), praised British women for reaching out to Indian women who were still bound by the rules of purdah. Quoted in the *Annual Report of the National Association for Supplying Medical Aid by Women to the Women of India* (Calcutta: Superintendent of Government Printing, 1926), 4.
62. F. D. Barnes, "Maternity Benefits to Industrial Workers: Final Report of the Lady Doctor," *Bombay Labour Gazette*, September 1922, 31–35; Balfour and Talpade, "The Maternity Conditions of Women Mill Workers in India," 238–45.

The Political Economy of the Textile Industry and Its Labor

The Report of the Medical Committee of the Factory Commission of 1884 most distinctly lays it down that mill operatives do not exhibit any material deterioration in health or condition . . . the women were found to be particularly healthy and strong as compared with women labourers outside the mills. . . . The mill hands are the best class of patients, they bear operations well, their progress in the hospital is satisfactory; their wounds heal quickly; and their recovery is rapid. It is healthy wound [*sic*] that do well and heal rapidly, and healthy wounds require healthy flesh and healthy blood, and healthy flesh and healthy blood can only belong to a healthy and well nourished body. This one single fact more than any other truly tells the condition of the Indian mill-hand and ought to soothe and settle at rest the troubled minds and hearts of mistaken humanitarians.¹

Thus wrote Dr. K. N. Bahadurji, commenting on a government-appointed factory commission. These discursive constructs of vigorous and healthy workers were in sharp contrast to the images of overworked and fatigued mill laborers documented in contemporary reports on factories and labor.² However, in late nineteenth-century Bombay, most nationalists and reformers, the local press, and millowners adhered to Bahadurji's views about a healthy and contented workforce, ignoring the realities of millworkers' harsh working and living conditions. Their silence over the issue of overwork and their fierce opposition to factory reforms did not come only from a lack of knowledge or from class biases. Rather, they evinced a broader nationalist desire to promote a nascent

Indian industry, which they viewed as an example of Indian enterprise in a colonial situation.

In the late nineteenth century, anti-colonial nationalism mainly centered on a politics of petitioning, urging the British to extend colonial institutions and services to include Indians. However, some leaders of this “moderate” phase, most notably Dadabhai Naoroji, Romesh Chunder Dutt, and Mahadeo Govind Ranade, articulated a radical critique of colonial economy.³ The late nineteenth-century growth of economically sovereign nations such as Germany, Italy, the United States, Russia, and Japan exemplified the advantages of nationally regulated capitalism, as Manu Goswami describes.⁴ Such examples sharpened the contradictions between a colonized and a national economy. The links between the autonomy of the nation-state and economic development influenced the nationalist discourse across geographical regions. Reflecting these transnational ideals of nationhood and progress, Indian leaders analyzed how colonialism integrated India into a world economic system, a linkage that gradually impoverished India and enriched Britain. This integration transformed the country into a producer of cotton, jute, wheat, sugarcane, and tea—raw material and agricultural products needed to sustain the Industrial Revolution in Britain. Simultaneously, colonized India became a captive market for finished British industrial goods.⁵ The colonial government’s support for British industries eroded domestic, artisanal industries, intensifying Indian dependency on agriculture as a source of livelihood. By the late nineteenth century, the nationalist critics of colonial economic policies claimed that the rapid expansion of modern industries could reverse the process.

Thus, Bombay’s rapidly expanding, Indian-owned cotton industry represented progress and self-reliance. Consequently, Indian nationalists anxiously guarded this industry from all possible threats, a policy that informed their opposition to any legislation regulating Indian factories and mines.⁶ The development of Bombay as an industrial metropolis significantly informed its demographic features and the changes in the city’s environment. As subsequent sections show, millworkers were at the receiving end of these environmental and demographic changes. However, the proponents of unimpeded industrialization ignored harsh working conditions, neglected the dismal living environment of millworkers, and maintained a conspicuous silence over issues such as the lack of sanitary industrial housing. But economic nationalism, although a significant factor in the late nineteenth century, was not solely responsible for the

tepid responses to the well-being/ill-being of millworkers. The economic rivalry between Lancashire and Bombay cotton producers, the dominant positions of millowners in the power structure of colonial Bombay, and the abundance of labor and lack of organization among millworkers all contributed to the lack of concern about the ill-being of laborers.

THE RISE OF BOMBAY CITY AND ITS COTTON MILLS

One of the most striking features of Bombay's cotton industry was the dominance of Indian ownership. Although British entrepreneurs created jute mills, coal mines, railways, and plantations during the colonial era, Indian traders and financiers launched the cotton textile factories of India, particularly in Bombay.⁷ During the late eighteenth and nineteenth centuries, indigenous businessmen and traders collaborated with the British in the profitable international trade of raw cotton and opium and accumulated capital for this industrial investment.⁸ The rise of successful Indian entrepreneurs was intimately linked to the growth of Bombay as the *Urbs Prima in Indis* (the First City in India), the primary hub of industrial and commercial activities in colonial India.⁹

The British Crown acquired Bombay from the Portuguese as part of Catherine Braganza's dowry when she married Charles II in 1661 and subsequently transferred it to the East India Company (EIC) in 1668.¹⁰ A natural harbor on the western coast of India on the Arabian Sea, Bombay was a cluster of seven islands poorly integrated with the mainland.¹¹ Until the late eighteenth century the EIC considered Bombay a barren, rocky island, an unhealthy site with feverish swamps, and an unlikely site for commercial exploitation.¹² Consequently, Surat, which was farther north, retained its position as western India's prime coastal trading post during the eighteenth century. Situated in the rich cotton-textile-producing region of Gujarat, Surat had been, since the Mughal period, the center for western India's trading communities.¹³ Unlike Surat, Bombay lacked merchandise to ship, a resident trading and mercantile community, and efficient port facilities.¹⁴ The EIC could not immediately begin local production of textiles, one of the most lucrative export items, because Bombay lacked a resident weaving community.¹⁵

Bombay's subsequent growth into a thriving commercial and industrial colonial city was contingent upon several political and economic elements. Two key factors were the eclipse of Surat—a result of political and military clashes between the Mughals and the Marathas—and the rapid growth of the cotton and opium trade with China during the late eighteenth and early

nineteenth centuries.¹⁶ Prior to that, in 1687, the EIC had moved its headquarters in western India from Surat to Bombay to escape the trade supervision and custom duties imposed by the Mughals. Moreover, the EIC's possession of Bombay enabled it to operate without competition from the rival European trading companies of the Netherlands, Portugal, and France.¹⁷ The EIC deployed this relative advantage to attract the indigenous trading and mercantile communities away from Surat to Bombay.¹⁸

By the early nineteenth century, the British had extended their hegemony over the Marathas in western India. The 1817–1818 British conquest of the Deccan transformed Bombay from a trading town into the capital of a large province.¹⁹ The British could now control a vast regional hinterland and the production of raw cotton.²⁰ The port town of Bombay facilitated both the export of raw cotton to the textile industries of Britain, and the import of finished British textile goods to the colony.²¹ The opening of new road networks and the expansion of a railway network during the 1850s and 1860s expedited the movement of trading goods.²²

Historians of colonial trade and commerce have argued that it was not just the export of cotton to China and Europe that acted in Bombay's favor. In the 1820s, Bombay began to contribute to the EIC's ongoing export of opium to China. The export of opium provided the company with a commodity, other than raw cotton, to exchange for tea in China.²³ With the outbreak of the American Civil War, the demand for and export of raw cotton rose sharply in the early 1860s. This war periodically dried up the supply of raw cotton from North America to Britain, stimulating exports from Bombay.²⁴ The expansion of the credit market, the banking sector, and the shipbuilding industry complemented this commercial boom.²⁵ The end of the Civil War in 1865 resulted in an economic crash that adversely impacted Bombay's trade and commerce. However, the opening of the Suez Canal in 1869, and a further improvement in the railway and road network, ensured a profitable trade with British and continental markets.²⁶ These business activities accelerated Bombay's establishment as one of the principle centers of trade and commerce in colonial India.

The advent of experienced, successful, and enterprising indigenous trading communities in Bombay began in the early nineteenth century.²⁷ Willingly accepting the security and stability offered by the British, the leading indigenous commercial and trading communities of western India—Parsis, Hindu Baniyas, and Muslim Bohras, Khojas and

Memons—migrated in large numbers to Bombay City.²⁸ As shipbuilders, traders, bankers, guarantee brokers, and agents of the British mercantile firms, these indigenous groups cooperated with Britons in their inland and sea trade.²⁹ These trading communities, especially Parsis, significantly profited from the raw cotton and opium trade with China. Popularly known as *shets* or *shetias*, the financially successful Parsi families, such as Wadias, Jehangirs, Petits, and Tatas, acquired considerable wealth, established mutually profitable relationships with the British colonial rulers, and emerged as leaders in their communities and in local governance.³⁰ In the mid-nineteenth century, the same *shets* or *shetias* pioneered the cotton mill industry of Bombay.

The uncertainties of the raw cotton trade encouraged Indian traders to explore more profitable and secure investments. Access to raw material, labor, and markets facilitated their new entrepreneurial ventures. With its rich cotton-producing hinterland, ranking second only to the United States, Bombay had an obvious advantage.³¹ The recurrent agricultural distress of the nineteenth century in western India ensured the availability of cheap and abundant labor. There was a ready market for the mill-produced yarn in China and the Indian countryside.³² Although Bombay, unlike Bengal, lacked proximity to coal mines, coal imported from England enabled Cowasji Nanabhai Davar (1814–73) to establish the first cotton mill in Bombay in 1851 and to inaugurate Bombay's growth as an industrial center.³³ By 1889, Bombay had sixty-nine cotton-manufacturing mills. Within the next two decades there were eighty-two mills in the city, which employed an average of 106,710 millhands daily.³⁴

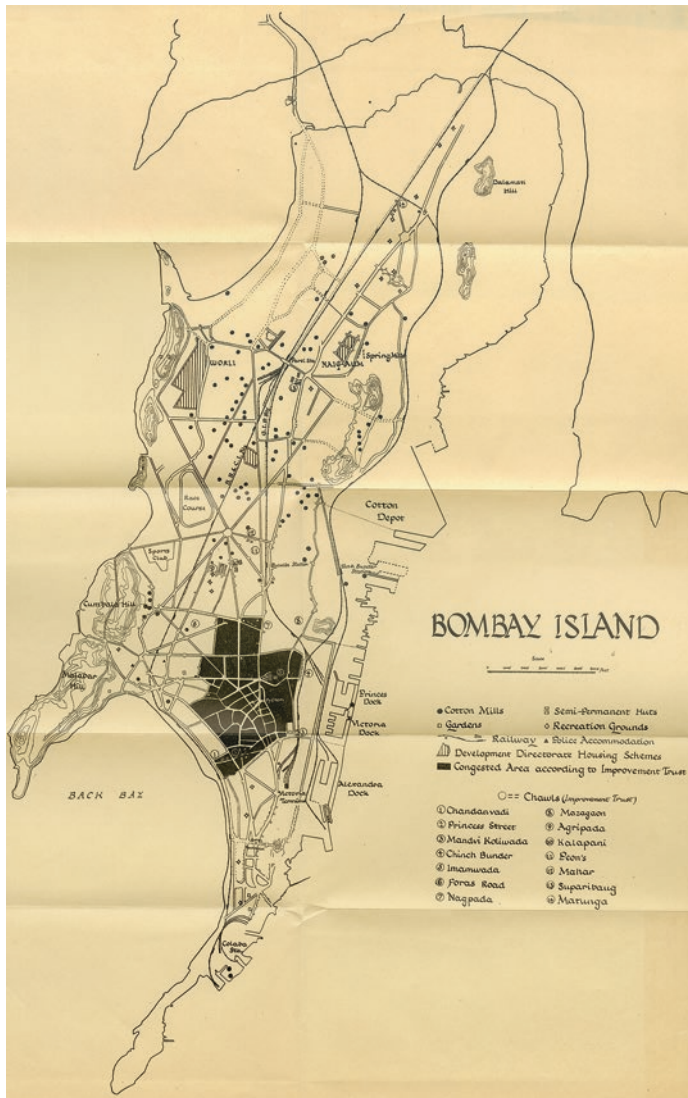
Although the earliest mills in Bombay both spun yarn and wove cloth, until the early 1900s the industry primarily focused on the production of yarn for its East Asian markets.³⁵ Bombay had become the chief exporter of factory-produced cotton yarn to China. Its export of cotton yarn to China grew from 2.4 million pounds in 1873–1874 to 45 million pounds in 1882–1883.³⁶ However, by the 1890s, Japan's entry into the Chinese yarn trade had challenged Bombay's predominant position and stimulated its industrialists to shift to weaving.³⁷ In the early twentieth century, the nationalist promotion of Indian goods gradually opened local markets for the finished textile goods of Bombay mills. Together, these factors contributed to the growth of production. Between 1875 and 1905, the number of spindles increased fivefold, while the looms expanded about sevenfold.³⁸ Despite fluctuations, in

the early twentieth century the industry remained one of the biggest employers of laborers and was the mainstay of Bombay's economic, social, and political life (Map 2.1).

The development of cotton mills in Bombay was significant in several ways. Although the cotton textile industry grew in other cities, such as in Cawnpore in the north, Calcutta in the east, and Madura in South India, Bombay remained the hub of the industry because it had several advantages. The Bombay Presidency produced most of the raw cotton, so transport was quicker and cheaper. Moreover, the moist climate of Bombay City was well-suited to spinning and weaving the Indian variety of short-fiber raw cotton.³⁹ The geographical location of Bombay as a port city made the export of produced yarn to China and Africa easier and cheaper. Therefore, despite the expansion of the industry elsewhere, Bombay continued to dominate this industry, because even in the early 1900s, more than half the looms and spindles in the country were still located there.⁴⁰ Moreover, the pioneering role of Indian entrepreneurs underscored the political significance of this industry. The city and its commerce might have owed its origins and its initial development to the EIC and the British. However, its subsequent commercial and industrial growth was not simply a result of Western modernization. Financed and administered by Indians, this industry reflected the enterprise and diligence of local entrepreneurs and served as an example of Indian capital's progress in a colonial situation.

LABOR AND LABORING CONDITIONS IN TEXTILE MILLS

Like its entrepreneurs, the labor force of the cotton mills migrated from other parts of western India. In 1668, when Bombay became an EIC possession, its local population of about 10,000 residents consisted of fishermen, cultivators, a few artisan communities, and petty officials.⁴¹ Its rise as a commercial and industrial center resulted in rapid demographic changes. By 1872, its population was 644,405, while the census of 1891 recorded over 821,764 inhabitants.⁴² The migration of impoverished peasants, agricultural laborers, and artisans from the adjoining rural areas and towns was decisive in this demographic growth. Agricultural scarcity, and the recurrent famines of the late nineteenth century in western India, accelerated the migration of impoverished peasants to Bombay, who sought to obtain employment in the mills. These migrants, who were primarily Hindu Marathi, came from the neighboring regions



Map 2.1 Map of Bombay displaying the location of mills, 1925. *Source:* A. R. Burnett-Hurst, *Labour and Housing in Bombay: A Study of the Economic Conditions of the Wage-Earning Classes in Bombay*, 1925

of the Deccan and Konkan, especially the Ratnagiri district in Konkan, a densely populated impoverished area on the coast to the south of Bombay.⁴³ Thus, although the population fluctuated because of epidemics such as the bubonic plague during the late 1890s and early 1900s, population growth continued in the early twentieth century, especially in the mill localities of Parel, Tarwadi, Sion, Sewari, Byculia, and Mahim.⁴⁴

A consistent influx of rural migrants to Bombay created a steady supply of labor. The great famines of 1876 to 1878 had resulted in the desperate migration of whole families—including married, single, and widowed women, as well as men—to the city. The first decennial census of Bombay, in 1881, observed that the availability of steamboats and railways encouraged “the women of the Deccan, Konkan and Gujarat to come [to Bombay] and share their masters’ fortunes in the factories and the docks.”⁴⁵ Between 1884 and 1899, the number of women employed in the mills increased, from 8,816 in 1884 to about 19,000 in 1899. The proportion of women in the workforce grew consistently. In the early twentieth century, women constituted between 20 to 25 percent of total persons employed in Bombay mills.⁴⁶ In the formal industrial sector of colonial India, the cotton mills of Bombay, like the jute factories of Bengal, became one of the biggest employers of women.

Most migrant workers maintained their rural links and periodically went back to their villages.⁴⁷ Maintaining rural ties didn’t necessarily imply pre-industrial tendencies, as historians have argued in recent years.⁴⁸ Rather, workers’ visits to their rural bases highlighted structural problems inherent in the textile industry of Bombay. The millowners’ strategy of adjusting production according to fluctuations in demand created undulating demands for labor. The oscillating production patterns resulted in greater casual hiring of labor, making workers’ employment dependent on the market. Thus the workers’ return to their rural base was their safety net.⁴⁹ In the absence of a welfare infrastructure in Bombay, millworkers relied on rural and familial networks. Because of inadequate medical aid, women workers in the mills and the wives of male laborers had to return to their villages for childbirth.⁵⁰ In times of sickness and old age, most workers took refuge in their rural homes. This dependence on their rural base was only one aspect of the precarious situation that workers faced in the early industrial economy of Bombay.

In the late nineteenth and early twentieth centuries, the textile mills of Bombay were notorious for their unregulated and unhealthy working routines. This exploitative labor situation was directly linked to the

organization of production in the industry. Migration created a surplus pool of labor that enabled employers to pay low wages.⁵¹ The abundance of available labor enabled millowners to avoid the extensive use of high-cost machinery, instead making production a labor-intensive process. The Sassoon group, considered one of the most efficient in Bombay, used machines that were more than forty years old, and in some cases, the employers had not upgraded machines for over sixty years.⁵² In the absence of sufficient and sophisticated machines, the extension of the working day became one of the primary methods of ensuring rapid production and generating greater surplus value or profits. According to Morris D. Morris, in his 1965 study of Bombay textile mills:

The critical object was to guarantee the continued operation of the machines. This pressure was increased, during the first half century [the late nineteenth century] particularly, by the fact that the managing agents, the decision makers in each mill, were paid a commission per pound of output. Thus the relative price of factors and the specific incentives for the entrepreneurs were both strongly on the side of having the mills operate long hours, producing as much product as possible.⁵³

The long working day demanded of millhands was one of the worst features of early factory life in Bombay. No limit on working hours was mandated until the 1890s. In 1875, Philip Edmond Wodehouse, the governor of Bombay, appointed a commission to inquire into the need for labor legislation. The commission reported that “the hours of work are stated to be from sunrise to sunset, with half an hour rest time in the middle of the day. In the longest days of the year this would give about thirteen hours of work a day, including the half-hour rest. In the shortest days of the year, it would give about eleven hours.”⁵⁴ The Bombay Factory Labour Commission of 1884 observed a similar working day of eleven to fourteen hours.⁵⁵ With the introduction of electric light in 1887, the working “day” began to claim laborers’ night time also. In 1899, the Bombay Millowners’ Association (BMOA) reluctantly passed a resolution that “it is undesirable, under any circumstances to work the mills with the same set of hands more than 13 hours per day.”⁵⁶ This resolution proved to be totally ineffectual and the mills continued to operate longer hours with the assistance of artificial light. By 1905, electric lights were installed in sixty out of the existing eighty-five mills and the hours “as a rule were from 5 a.m. to 8 p.m.”⁵⁷ Because markets in India

and China were buoyant, the emphasis was on production regardless of human cost.

In Bombay, women worked the same hours as men until 1891, when the provincial government of Bombay limited their maximum hours to eleven. However, millowners frequently evaded this law.⁵⁸ Although factory regulations of the early twentieth century gradually reduced the number of children employed in the mills, during the late nineteenth century they were treated no better than the adult workers.⁵⁹ In the absence of regulations on the minimum age of employment, millowners freely employed underage children, sometimes as young as six years old.⁶⁰ The Factories Act of 1881 reduced children's working hours to nine per day, and the Act of 1891 further reduced them to seven hours a day. In practice, these provisions were often violated, and in many cases children worked as long as the adult workers.⁶¹ Despite some efforts at regulation in the first half-century of industrialization, working hours were harsh for all classes of laborers—men, women, and children. Moreover, workers often reached the mill early as they had no way of knowing the time. Watches and clocks were luxuries; there were no public clocks in their districts, and the Bombay Municipality prohibited the use of the steam whistles. The fear of losing their jobs made many of them sleep outside the mill gate until it was opened, or start walking from their homes as early as four o'clock in the morning.⁶²

In addition to the long working day, the mills had limited provisions for rest periods. Most mills claimed that they stopped work for an interval of thirty minutes for lunch.⁶³ However, in their evidence before the Factory Commission of 1884, millworkers unanimously stated that their recess lasted no more than ten to fifteen minutes.⁶⁴ The Factory Commission of 1890 recorded that though most mills claimed that they implemented the thirty-minute rule, "either from selfish motives or for the purpose of getting the operatives up to their work in time, the gong or whistle for recommencing work is sounded ten or fifteen minutes before the full half-hour has expired."⁶⁵ Similarly, no holidays were fixed: "[O]ne [mill] closes every Sunday in the year, one every other Sunday, and others one Sunday in the month."⁶⁶ The Bombay Factory Labour Commission of 1884 observed that, in comparison to British millworkers, who had ten annual English holidays, fifty-two Sundays, and fifty-two half Saturdays, the millhands of Bombay had only fifteen holidays a year.⁶⁷ According to James Jones, the inspector of factories in Bombay, although Sundays were holidays in a few mills, the hands were required to attend work on these

holidays for four to five hours to clean the machinery and production equipment.⁶⁸ Even when the millowners agreed to give a holiday for festivals, they required workers to come to the mill on the following Sunday.⁶⁹

The long working hours, inadequate rest periods, and lack of holidays fatigued workers. Sometimes, they became so exhausted that “they fell fast asleep on the mill floor directly [after] they had thrown the strap off their machines and before some of their fellow hands were able to get out of the mill doors.”⁷⁰ The regulation of rest periods and holidays continued to be difficult to enact and implement. In their evidence to the Factory Commission of 1884, millowners such as Dinshaw Maneckji Petit trivialized the absence and partial implementation of workday regulations, claiming that workers themselves desired to have long working hours so that they could earn more wages per day.⁷¹ Another witness, J. H. Mody, the manager of the National Mill, reaffirmed that laborers had no wish for a weekly holiday. He suspected that “if the mills stopped every Sunday I am afraid the [mill] hands would spend their time in indulgences.”⁷² Other owners and mill managers supported such views.

Unlike their employers, the few workers interviewed during the proceedings of the Factory Commission of 1884 complained about their unregulated, exhausting job schedules.⁷³ In September 1884, workers held meetings under the leadership of Narayan M. Lokhande, the chairman of the BMOA, one of the earliest organizations of mill laborers in Bombay. Lokhande presented a memorandum to the Commission signed by 5,500 millhands. They demanded that:

All millhands be allowed one complete day of rest every Sunday.
That half an hour's recess be allowed them at noon every working day.
That work in mills should commence at 6:30 A.M. and cease at sunset.⁷⁴

The Factory Commission of 1890 and subsequent enquiries observed that workers were consistent in their demand for a weekly holiday on Sunday and regularization of the working day.⁷⁵ In his testimony to the Textile Factory Labour Commission of Bombay in 1906, Yasoo Succaram stated that he worked from five in the morning to seven in the evening with only a brief fifteen-minute midday break. He had no recess to eat during the day and managed on his morning meal, which he consumed before leaving for work. He complained that this exhausting work schedule affected his digestive system and joints; he did not want longer working hours even if it meant higher pay.⁷⁶

Worker protests moved beyond their testimonies before enquiry commissions. In spontaneous and planned agitations, workers demanded uniform and better work schedules. After a massive meeting held on 24 September 1905, millworkers submitted a memorandum to the government of Bombay requesting restricted and fixed hours.⁷⁷ Sometimes their resistance took a more militant form. The wide variation among Bombay mills in working hours per day stimulated a tense confrontation in October 1905, when groups of operatives attacked the late-working mills, disrupting work and destroying the records of attendance.⁷⁸ In response, the BMOA proposed shorter hours—a scheme that its own members disregarded.⁷⁹ No statutory limits were placed on the working hours of adult male laborers until the Factory Act of 1911, which limited adult male working hours to twelve a day, with a half-hour break after six hours of work.⁸⁰

In addition to unregulated work, the lack of standardization in wage rates, and a variety of payment methods, forfeiture and fines characterized the industry. The early factory commissions categorically dismissed this subject as “matters which must be left for settlement by the operatives with their employers, and any interference on the part of the Government would be alike impracticable and undesirable.”⁸¹ Available sources suggest that in the late nineteenth century, most mills paid piece rates, allowing owners to adjust wages according to their varying production needs.⁸² In the absence of standardized wage rules, management attempted to reduce wages when the demand for yarn went down.⁸³ Income varied since it was based on skills, age, and gender. In 1875, in one mill, men earned ten to twelve rupees, women seven rupees, and children two to three and a half rupees.⁸⁴ Workers received no compensation if the management decided to stop the day’s work for any reason.⁸⁵ Laborers complained that fines for leave of absence and the withholding of wages were widespread.⁸⁶ Employers used wage deductions to discipline labor, with few exceptions for absence due to sickness. Typically, a worker lost two days’ wages for missing one working day.⁸⁷ Employers also withheld wages to avoid desertion or to restrict the mobility of labor.⁸⁸ The late payment of wages compelled workers to take credit from their local moneylenders. The unhealthy working conditions in the mills and the dismal housing underlined the implications of unregulated and unequal economic growth for the industrial working class.

HEALTH AND HOUSING OF MILLWORKERS

The late nineteenth-century factory commissions concentrated on the feasibility of workday regulations; their discussions about health were sporadic. They recommended no mandatory safeguards against the ill-ventilated, fiber-laden atmosphere that prevailed in the mills. Similarly, the commissions suggested no mandatory provisions for sanitary industrial housing. Although health and housing were marginal topics in earlier factory documents, the ill effects of spending long hours in the hot and humid mills were discussed more frequently. The Factory Commission of 1875 observed that “ventilation [in the mills] has not received the attention it deserves from the owners.”⁸⁹ Since the windows throughout the mills remained closed, cotton particles permeated the air, making the atmosphere extremely “fluffy.”⁹⁰ Drs. Joseph Anderson and Thomas Weir, the two medical witnesses to the Commission of 1875, argued that considering the injury to workers’ health that cotton fibers and high temperatures might cause, mills should provide for adequate ventilation.⁹¹ The employers promptly retorted that poor ventilation and the consequent high temperatures were necessary evils. They shut the ventilators and maintained a temperature of at least 95 degrees Fahrenheit to retain moisture and to prevent fiber breakage.⁹²

Elaborating on these hazardous work conditions, Dr. Joseph Anderson who served as house surgeon at the Jamsetjee Jejeebhoy (J. J.) Hospital of Bombay, testified:

There are cases now and then among mill people of chest diseases, inflammation of the lungs and air passages, and derangement of the stomach, all of which are believed to be due to continual employment in mills. Free ventilation is necessary to prevent the prevalence of these diseases. . . . I think the atmosphere of these mills is injurious to all and the temperature is too high.⁹³

Dr. Weir, another medical witness, cautioned that working in ill-ventilated rooms with temperatures as high as 98 degrees Fahrenheit “would slowly undermine the health [of workers and] engender diseases, that might in time prove fatal.”⁹⁴ Although the report of the subsequent Commission of 1884 recorded the fiber-laden, hot, and humid atmosphere of mills, it did not analyze the impact of these conditions on workers’ health.

The Factory Commission of 1884 documented that fresh air and light “so essential for the health of the operatives is to a great extent shut out.”⁹⁵ Before spinning and weaving, different varieties of raw cotton were mixed together. Blowing or cleaning the cotton off foreign materials and carding or twisting cotton into rough yarn followed this process.⁹⁶ All these processes produced a considerable amount of dust and cotton particles. Since most mills conducted these preparatory jobs in the same building where winding, reeling, spinning, and weaving was done, all workers were forced to inhale the air saturated with cotton fluff.⁹⁷ The use of improved machinery, fitted with exhausts, in preparatory processes could have prevented the spread of cotton dust and particles in work rooms, but this was an investment that mill-owners were unwilling to make.⁹⁸ Since ventilation was lacking, the inside air remained unchanged and heavy with dust and fibers.

Based on its inspection of twenty-five spinning and weaving mills in Bombay, a sanitary report that formed a part of the Factory Commission of 1884 declared this environment injurious to workers’ health.⁹⁹ It recommended special “inlets for the admission of fresh air and outlets for the removal of foul air.”¹⁰⁰ This report insisted that mills should arrange air propellers that allowed fresh air inside the workrooms at regular intervals. However, the final recommendations of the Commission of 1884 included no provisions for regulating ventilation.¹⁰¹ Although the subsequent Indian Factory Labour Commission of 1908 recommended that mills should provide adequate ventilation and reduce their high humidity level of about 75 percent, it did not specify any standards.¹⁰² Consequently, excessive humidity inside the mills persisted.¹⁰³ As later reports documented, the lack of ventilation and floating cotton particles in production areas persisted in the mills into the late 1920s.¹⁰⁴ A factory report aptly remarked that millowners treated this subject with minimum interest, as it did not directly affect their productivity.¹⁰⁵

Millowners neglected the creation and maintenance of basic facilities such as latrines and washrooms. The latrines were found to be “indescribably filthy,” while “offensive matters” from the ill-managed cesspools fouled the mills’ atmosphere during rainy seasons.¹⁰⁶ The inadequate construction of latrines and sewers resulted in the accumulation of water, which freely bred mosquitoes. The prevalence of “malarious and intermittent fevers among mill-hands” was a direct result of these conditions.¹⁰⁷ Completing this grim picture of sanitation were the mill water tanks that were reportedly cleaned infrequently and consequently

gave off an obnoxious “stench of sulphuretted hydrogen.”¹⁰⁸ Although a few mills employed sweepers to clean the “privies” and production areas, most latrines were cleaned infrequently and dust and discarded material accumulated inside the work rooms.

The living environment of workers was equally dismal. Late nineteenth-century industrialization accentuated the class- and race-based spatial organization in Bombay.¹⁰⁹ While the colonial government offices, business centers, and residential quarters were situated in the Fort area in the southeast, the Indian elite mostly resided in the southwest wards of the city. By the late 1860s, these southern areas of Bombay were dotted with magnificent, sprawling official and residential buildings that displayed the wealth of the city.¹¹⁰ The high property rates in southern Bombay excluded mills and their labor. Consequently, mills and their workers were concentrated in the marshy, underdeveloped northern parts of the city that constituted the E, F, and G wards of the municipality.

The expansion of mill industries and consequent demand for labor resulted in a massive influx of immigrants to the city. The Census of 1881 observed that between 1872 and 1881, the population of Bombay grew from 644,405 to 773,196, an increase of roughly 20 percent.¹¹¹ T. S. Weir, the census commissioner, attributed this increase to the continuous arrival of migrant laborers. By the 1880s, the northern localities such as Tardeo attracted “so many people that a properly laid out village for mill-employees appeared desirable.”¹¹² Since neither millowners nor the government arranged for sanitary and subsidized housing, mill laborers, like other workers in the city, lived in privately owned *chawl* tenements with shared bathing and washing spaces. Constructed to make quick profits, these buildings lacked adequate provisions for sanitation, ventilation, and lighting. Consequently, chawls resembled “dark, unwholesome dens, into which the light of day never penetrates.”¹¹³ Congested and overcrowded, a typical millworker chawl room measured “12' × 8' × 8'. . . . No *nahahi* or sink was attached to these rooms.”¹¹⁴ Since most of these buildings lacked well-constructed sewage systems connected to a drainage network,¹¹⁵ “undrained and stagnant sullage dotted the place and bred mosquitoes”¹¹⁶ (Table 2.1).

Because of the insufficiency of housing, overcrowding was rampant. The influx of migrant labor and consequent high demand for accommodation contributed to high rents. The average monthly rent varied from three to seven rupees, which one person or family found difficult

Table 2.1 Population of Bombay City

<i>Year</i>	<i>Population</i>
1864	8,16,562
1872	6,44,405
1881	7,73,196
1891	8,21,764
1901	7,76,006
1906	9,77,822
1911	9,79,445
1921	11,75,914
1931	11,61,383
1941	14,89,883

Source: Edwardes, *City Gazetteer*, Vol. I, 161, 163, 205; *Census of India, 1931, Vol. VIII: Bombay*, 4, *Annual Report of the Municipal Commissioner of Bombay*, 1943, 2

to pay. In this situation, sharing rooms was one available option.¹¹⁷ In the mill neighborhood of Parel, 90 percent of the inhabitants lived in one-room tenements, and the average occupancy per room was four.¹¹⁸ Single-room housing was the dominant trend in Byculla, Tarwadi, and Sewari mill localities, where in extreme instances some dwellers shared one room with ten to twenty other people.¹¹⁹ The subsequent chapter describes how inadequate industrial housing, overcrowding, and uneven development of sanitary infrastructure remained characteristic features of colonial Bombay, rendering the mill working population susceptible to death and disease.

The links among harsh factory life, dismal living conditions, and sickness received relatively greater attention in the early 1900s. In a paper published in 1907, Bhalchandra Krishna, a physician in Bombay since 1885 and a member of the Municipal Corporation, attributed the high rates of phthisis, or tuberculosis, among millworkers to their work.¹²⁰ He claimed:

The reason mill-hands suffer most is that they have to spend more than 12 hours a day in close, stuffy, and often stinking rooms. The atmosphere of the rooms is moist and warm. There are particles of fermenting starch and cotton floating in the air which may be constantly inhaled by the inmates. . . . The particles of starch and cotton floating in the air, get into the lungs and tend to produce irritation of the tissue. There is a distinct class of consumption to which mill-operatives are subject, and which is called cotton-phthisis.¹²¹

Dr. Krishna added that the “dirty home surroundings of millworkers aggravated their susceptibility [to phthisis].”¹²²

In his testimony to the Factory Commission of 1907, Dr. J. A. Turner, the executive health officer of Bombay Municipality, conjectured that phthisis and respiratory diseases were more frequent among millworkers because of the “atmosphere and general conditions” under which they worked.¹²³ Another medical witness, Dr. V. P. Chavan, who, as a private medical practitioner, had treated mill workers for over a decade, related that “as a class they [mill laborers] were deteriorating.”¹²⁴ He claimed that the most common diseases among millworkers were pulmonary. The air of the mills, charged with “impurities and fluff,” affected the lungs and “produced a state of anemia and general impairment of health.”¹²⁵ In his note of dissent, Dr. T. M. Nair, a member of the 1908 Commission, supported these views.¹²⁶ Citing medical professionals from the J. J. Hospital of Bombay, he argued that high humidity and atmospheric impurities in the poorly ventilated mills rendered workers susceptible to lung infections. Based on his inspection of mills, he conjectured that because the harsh working and living conditions depleted workers’ stamina rapidly, they were often compelled to stop working at forty and forty-five years old.¹²⁷

Both Nair and Turner pointed out that because illnesses had not been tracked alongside occupation, they were unable to conclusively establish the links between the harsh conditions and workers’ poor health. Still, they asserted, the opinions of experienced medical men such as Dr. Chavan, and their own observations, convincingly indicated that long hours in poorly lit mills, lack of fresh air, and a diet deficient in fats and nutrients all adversely affected workers’ health.¹²⁸ Moreover, high rents and consequent overcrowding in their unsanitary living spaces meant that “each room was occupied by two families, instead of one. In these overcrowded places they pass their rest time, inhaling foul carbonic-acid laden air.”¹²⁹ These later accounts substantiate an earlier observation made by the municipal health officer in 1887, that only three decades of unregulated industrialization had created a distinctly listless urban working class, “which can be distinguished from their own race engaged in other work, and from every other class by pallid look, which may be called a ‘factory countenance.’”¹³⁰ The colonizers and the colonized responded differently to such unregulated factory life and dismal living conditions.

EARLY RESPONSES TO LABOR CONDITIONS AND FACTORY REFORMS

In the late nineteenth century, nationalist opinion in Bombay was largely unresponsive to the conditions of mill labor. The first demands to regulate labor came from Britain. It was hardly surprising considering the intensifying competition between the cotton mills of Bombay and Britain. By the early nineteenth century, British cotton manufacturers sent one-quarter of their total exports to India.¹³¹ The growth of the cotton industry in India gradually made inroads into this market, stimulating the anxiety of British manufacturers. From the 1850s, the supply of yarn from Bombay mills had eroded the share of British factory yarns in the East Asian markets. In the 1890s, when Bombay mills began to produce cloth, they challenged the English cloth market in India. Although the total yardage imported from England to India continued to increase, Indian mills were gradually decreasing the British share of the market.¹³² In response, the British began to undermine the productive capacities of their rivals.

Since the cheap, unregulated labor of Bombay mills could substantially lower the cost of production, British manufacturing interests targeted this relative advantage of their Indian rivals and demanded restrictive labor legislation. Significantly, labor regulations had played a similar role in Britain. Discussing the growth of capitalism in Britain, Karl Marx emphasized that labor legislation or standardization of laboring conditions was crucial for modern industrial development.¹³³ The regulation of the length of the working day, rest periods, and holidays sought to create a rejuvenated, contented, and more efficient workforce. More importantly, the passage and extension of factory acts in industrializing Britain restricted the unregulated exploitation of human capital and thus sought to create uniform conditions of competition between capitalist entrepreneurs. In this model of capitalist growth, the comparative advantage of Indian capitalists—their ability to exploit labor unchecked—was unsettling. Thus, in 1875, the Earl of Shaftesbury urged the British Parliament to consider factory legislation for India.¹³⁴ He cautioned the House of Lords that:

We must bear in mind that India has the raw material and cheap labour; and if we allow the manufacturers there to work their operatives 16 or 17 hours and put them under no restrictions, we are giving them a very unfair

advantage over the manufacturers of our own country, and we might be undersold, even in Manchester itself, by manufactured goods imported from the East.¹³⁵

In the same year, responding to the questions in the British Parliament and to the demands of bodies such as the Manchester Chamber of Commerce, Lord Salisbury, the secretary of state to India, directed the government of Bombay to enquire into the working conditions of mills.¹³⁶ The first Bombay Factory Commission was established in 1875. Based on its recommendations, the first Indian Factories Act was formulated in 1881. This act did not attempt to regulate adult male or female factory labor. It only regulated the minimum age at which children could be employed (seven years old) and laid down that children between the ages of seven and twelve could not work for more than nine hours a day.¹³⁷ These meager restrictions provoked British capitalist interests to apply pressure on the government of India to create more stringent factory laws.¹³⁸ Consequently, in 1882, the Marquess of Hartington, the secretary of state for India, appointed Meade King, a factory inspector in England, to investigate the workings of factories in Bombay. King found the existing act inadequate and cited problems such as poor enforcement of existing rules, long working hours, and a lack of sanitary facilities in the factories.¹³⁹ Subsequently, the government of Bombay appointed another commission, in 1884, to explore the possibility of amendments to the 1881 act. This commission suggested further reductions in the working hours of women and children. However, these recommendations were not translated into immediate action.¹⁴⁰

The champions of the British cotton industry continued arguing for stringent regulations. In 1889, J. M. MacLean, a member of Parliament representing Lancashire, drew attention to the “remarkable growth in India in the manufacture of cotton twists and yarn” that threatened British cotton interests.¹⁴¹ He insisted that, “with the extraordinary hours of labour in Indian mills, the competition is not fair.”¹⁴² A year later, Samuel Smith of Flintshire, another member of Parliament, reiterated that the competition between Lancashire and Bombay was uneven. The men millhands worked about eighty hours per week, whereas British factory regulations allowed a workweek of only fifty-six and a half hours.¹⁴³ He demanded immediate restrictions on this “uninhibited” use of mill labor in Bombay.¹⁴⁴ Meanwhile, the International Labour Conference, held at Berlin in March 1890, accelerated the demand for

labor legislation in India.¹⁴⁵ In response to these external pressures, the Indian Factory Act of 1891 recommended a weekly holiday and a reduction in the hours of female and child laborers.¹⁴⁶

Rivalry with foreign mills informed the resistance of Indian millowners to labor regulations. An effective technique of competing against British and Japanese rivals was to limit the cost of production. Together with low wages, unregulated running of factories ensured the generation of surplus value. The millowners' strong economic and political positions in the city, combined with a superior organizational efficiency, enabled them to foster pro-employer labor regulations. Established in 1875, the Bombay Millowners' Association (BMOA) was instrumental in countering the campaigns of Lancashire and Manchester industrialists and Indian philanthropists for more stringent regulation of Bombay factories. The proclaimed goal of the BMOA was "to strenuously resist, whenever occasion demands, all undue interference in the cotton industry of this Presidency, and at the same time to make it a body potential in voice and formidable in resources for the general benefit of millowners."¹⁴⁷

The millowners' economic and organizational power enabled them to attain significant representation on various factory enquiry commissions and protect their interests in any proposed labor legislation. Out of eight members of the Bombay Factory Labour Commission of 1875, six represented the industrialists.¹⁴⁸ Sir Mungaldass Nathoonbhoy, a member of the Commission, professed that proposed labor regulations were "calculated to check an important and new industry while it is yet in its infancy—a state in which it needs delicate handling and of all such influences and encouragements as may lead to promote its steady and healthy growth."¹⁴⁹ He demanded that the colonial state should not intervene in the labor management of the mills. Nathoonbhoy reiterated that since mills in Bombay paid piece rates, workers themselves were against any restrictions on their labor time, for it would jeopardize their capacity to earn more.¹⁵⁰ Dinshaw Maneckji Petit and Morarji Goculdas, other leading Bombay millowners and members of the Commission of 1875, reinforced these views.¹⁵¹ Because of their strong representation, millowners were successful in avoiding any restrictions on male factory labor in the Factory Acts of 1881 and 1891.¹⁵² The provincial government of Bombay supported the millowners' views.

During colonial rule in India, the relationship between the colonizer and the colonized did not represent a simple binary. Rather, it was a complex web of relationships that involved disparate indigenous and

metropolitan political and economic interests. Similarly, colonial government was not merely a representative of British interests. The consolidation and perpetuation of colonial authority depended on its social engineering abilities and consequent support from its indigenous landed and commercial elites. In Bombay, the Indian business magnates had shared power with the British since the city's emergence as a commercial center in the late eighteenth and early nineteenth centuries. Recognizing the businessmen's superior status in the city's economy, the government of Bombay assigned them key roles in administrative bodies. From 1834, Indian businessmen were selected as justices of peace.¹⁵³ By the 1870s, millowners were appointed to the Legislative Council of the Governor of Bombay.¹⁵⁴ In these roles, millowners exerted considerable influence in shaping government policies in Bombay. In the late nineteenth century, the industrialists mitigated the nascent anti-colonial sentiments in Bombay. Although many industrialists participated in various Indian reformist and early nationalist associations, they did not engaged in open criticism of the government.¹⁵⁵ The economic and political influence of millowners and the colonial policy of cultivating allies among Indians were decisive in shaping the pro-capitalist attitude of the colonial government.

The government was careful not to portray itself as an agent of British textile manufacturing interests. In 1875, Lord Salisbury, the secretary of state for India, cautioned the British supporters of Indian factory legislation that any strict rules might raise the suspicion of Indian industrialists and turn them hostile. He reasoned that "there might be some persons who see the thing in the light we see it; but generally this proposal to limit the hours of factory labour is looked upon as a great conspiracy for the purpose of promoting the interests of Manchester manufacturers."¹⁵⁶ Following this logic, the Commission of 1875 declared that "any Imperial Act that may be passed should not interfere more than is absolutely necessary with the working of factories for these must be considered as highly important, both politically and financially, and of great benefit to the country generally, and they require encouragement of every description."¹⁵⁷ The subsequent Commission of 1884 discouraged the singling out of Bombay mills for labor regulations, as it might give "rise to jealousy and dissatisfaction."¹⁵⁸ Thus, the hesitant, limited early Factory Acts evinced the pro-employer perspective of the government. Although government in India appointed factory commissions in response to the demands in Britain, it refrained from enacting strict

measures that might severely endanger the economic interests of Indian employers.

As mentioned previously, by the late 1880s, workers themselves were gradually beginning to resist the oppressive, unregulated working conditions. In 1884, laborers of Coorla Mill struck work to protest against the late payment of wages and the demand to clean machines during holidays.¹⁵⁹ There were scattered reports of sporadic strikes in the 1890s, suggesting a shift from simple petitioning to strikes.¹⁶⁰ The most common cause for stopping work was wages. In 1893, workers protested the attempt of several mills to reduce wages to compensate for a lower demand for yarn and a consequent fall in prices.¹⁶¹ A year later, workers of one mill briefly struck work to protest against forfeiture and the non-payment of wages.¹⁶² These few oppositional gestures remained limited because of the lack of leadership and labor unions.

Founded in 1884, the Bombay Millhands' Association is often regarded as the first effort to organize workers. Despite its role in organizing millworkers' meetings in 1884 and 1890, the limited organizational abilities and resources of this association kept it from challenging the dominant, pro-employer perspectives on labor. The factory inspector's report of 1892 documented that the association lacked a roll of membership, funding, and clear organizational guidelines.¹⁶³ The report characterized N. M. Lokhande, the self-proclaimed president of the association, as a "voluntary adviser and a philanthropic promoter of labour legislation."¹⁶⁴ Apparently, he was not seen as a union leader who sought to organize labor into a formidable counterforce.

In the absence of organized unions with articulate leaders, workers resorted to everyday forms of resistance to circumvent their grueling work schedule. No documentation of workers' everyday subversive behavior exists. Such actions can be glimpsed in the complaints made to the early factory commissions about the "natural" tendency of laborers to loiter and "waste away time in smoking and resting."¹⁶⁵ The employers often used workers' habit of taking short breaks as an excuse to avoid implementing mandatory rest time and shorter working hours.¹⁶⁶ In his evidence to the Factory Commission of 1884, N. N. Wadia, the manager of Petit Mills, insisted that, unlike the disciplined workers of the mills in England, "operatives in Bombay take full liberty to go out, to take their meals, to smoke, to do anything." He asserted that millworkers' habit of procrastinating while working rendered long hours necessary. This claim became more pronounced when the Factory Labour Commission

of 1908 proposed a restriction on the hours of adult male laborers. Mill employers lamented how workers' tendency to take "intervals without permission, smoking, idling reduce the actual working hours to a great extent."¹⁶⁷

These employer complaints were possibly exaggerated to counter mandatory restrictions on working days. Simultaneously, such references indicated that in the absence of legislative restrictions, the alleged "idling" was one of the available ways to evade an excruciating work schedule. A late nineteenth-century document related that "sometimes seeing that the manager or over-looker is away, he [the worker] skulks off to his friend for a chat. When the manager returns to the department, the arrival is immediately made known among the men by certain signs or gestures."¹⁶⁸ Another report insisted that workers took short breaks to avoid the possible physical injuries and fatigue resulting from continuous work.¹⁶⁹ In his note of dissent to the Indian Factory Labour Commission (IFLC) of 1908, Dr. Nair reaffirmed that when the mill laborer is put to work "for a longer period than he can endure, he has to adapt himself to the work in such a way that he can get through the work with the least possible injury to himself."¹⁷⁰ Thus, the short breaks or much lamented "idleness" reduced the intensity of work and acted as a safeguard against back-breaking labor. However, these covert safeguards against an oppressive work schedule were insufficient to ensure workers' well-being.

Unfortunately, only a few Indian reformers and philanthropists in Bombay supported the initiatives to regulate work schedules in the mills. Born in Bombay in 1831, Sorabji Shapoorji Bengali, a Parsi journalist and philanthropist and a member of the Legislative Council of Bombay, was among the few who sought improved conditions for workers. In 1878, he drafted a bill for the Bombay Legislative Council that proposed to limit the working hours of men, women, and children in Bombay's textile mills to eleven, ten, and nine, respectively. Although he was unable to generate sufficient support to introduce his bill, Bengali continued to argue for pro-labor legislation.¹⁷¹ As a member of the Factory Commissions of 1884 and 1890, he argued for a weekly holiday and for reduced working hours.¹⁷² Through his newspaper *Rast Goftar*, he publicized the abject working conditions of millhands.¹⁷³

Another notable Indian supporter of welfare measures was N. M. Lokhande, a former supervisor and assistant manager in a cotton mill.¹⁷⁴ From 1880, Lokhande published an Anglo-Marathi weekly, *Din Bandhu*,

which consistently argued for ameliorating millworkers' conditions.¹⁷⁵ This weekly severely criticized the violations of Factory Acts in Bombay, characterizing the existing laws as "simply a sham" and claiming that the proprietors of factories openly violated its provisions.¹⁷⁶ As a witness to the Factory Commission of 1884, Lokhande argued for a scrupulous implementation of existing factory regulations and for the introduction of uniform working hours with adequate rest.¹⁷⁷ Significant among his later achievements was the formation of the Bombay Millhands' Association in 1884. This association organized public meetings of textile workers to demand labor regulations. As its president, Lokhande submitted resolutions passed in the public meetings of millworkers to the Factory Commission of 1891.¹⁷⁸ It is unclear why these two men were supportive of labor regulations. Humanitarian concerns and, in Lokhande's case, firsthand knowledge of millworkers' conditions might have motivated them to champion legislative reforms. Unfortunately their efforts had little impact because of the hostile attitudes of nationalists and the local press to factory reforms.

During the late nineteenth century, nationalist leaders largely ignored the hardships of workers, and prominent local nationalist newspapers actively opposed any attempts to regulate factory work. As mentioned at the beginning of this chapter, some late nineteenth-century Indian nationalists were deeply concerned with the adverse impact of colonization on India's economy. The industrial revolution in England had significantly impacted the colonial economy of India, transforming India into a market for finished British goods and a producer of raw materials.¹⁷⁹ The British Raj used the revenues generated in India to finance Home Charges (the cost of maintaining the India Office in London) and colonial administrative and military structures in India. Also, the Raj spent revenues to purchase Indian items meant for export to Britain. Like other parts of the empire, British capital investments in India in sectors such as railways went back to Britain as profits. This unilateral transfer of resources to Britain stimulated severe criticism among Indian nationalists.

The nationalists were anxious that the imperial economic policies would impoverish India, making it a "backward" agricultural economy. After a meticulous analysis of colonial trade and commerce in the nineteenth century, Dadabhai Naoroji of Bombay, a founder member of the Indian National Congress (INC) and a member of the British House of Commons from 1895 to 1898, argued that the consistent "drain of

colonial trade surpluses to Britain and the exigencies of the state expenditure made India the drudge for the benefit of England.”¹⁸⁰ Emphasizing the negative aspects of colonial rule, Romesh Chunder Dutt, another prominent INC member and an economic historian, argued that the drain of potential capital to Britain hampered India’s industrial growth.¹⁸¹ Dutt lamented that “the loss of indigenous industries was not replaced by any new industry; and millions of weavers sank to the level of agricultural labourers, and increased the pressure on soil.”¹⁸²

M. G. Ranade, the foremost moderate INC leader in the Bombay Presidency, echoed these views. He insisted that the poverty of India emanated from its colonized status that turned it “into a plantation, growing raw produce to be shipped by British agents in British ships to be worked into fabric by British skill and capital and to be re-exported to the Dependency [India] by British merchants.”¹⁸³ Ranade criticized this predominantly agricultural economy that generated “no employment for local skill and capital.”¹⁸⁴ Others agreed with his assertions that “the phenomenal poverty [of India] came from our growing dependence on the single and precarious resources of agriculture.”¹⁸⁵ Bal Gangadhar Tilak, a prominent nationalist leader from the Bombay Presidency who represented the extremist group within the INC, asserted that overdependence on agriculture contributes to situations where “one bad harvest is sufficient to cause millions to die of starvation.”¹⁸⁶ Dutt declared that “agriculture, the only industry in India should be relieved,”¹⁸⁷ while Naoroji insisted that industries must expand and the “produce of the country *must* increase.”¹⁸⁸

The economic nationalists of this period were not specifically interested in reviving the traditional, artisanal industries of India. Rather, they idealized large-scale industrialization, modeled after the industrial development in Western Europe and America, as a panacea for India’s chronic poverty.¹⁸⁹ Ranade was convinced that no artisanal industries could match modern factory-based production. The remedy to poverty lay in “the organization of Industry and Capital on the Joint Stock principle for collective and large undertakings.”¹⁹⁰ He deemed the cotton mills of Bombay to be a primary example of modern industrial enterprise that provided employment to hundreds of thousands of Indians.¹⁹¹ Discussing “textile self sufficiency,” Gopal Krishna Gokhale, a leading nationalist moderate of Bombay and the political guru of Mahatma Gandhi, declared that handlooms were inadequate since “the main part of the work will have to be done by machinery.”¹⁹² Even Tilak,

Gokhale's more extreme colleague, urged that "we must become capitalist and enterprisers . . . a nation of traders, machine-makers, and shop keepers."¹⁹³

This emphasis on modern industrial growth seemingly reflected the acceptance of Western supremacy in the material domain. Examining the strategies of the late nineteenth-century anti-colonial nationalists, Partha Chatterjee has proposed that the early leadership fiercely resisted colonial interventions into the private sphere of family, home, and religious culture, the markers of cultural identity.¹⁹⁴ Simultaneously, in the material or public domain, the nationalists acknowledged the superiority of their Western rulers. They promoted careful study and replication of Western material progress. The idealization of the Western model of industrial progress was one example of a derivative discourse that impelled colonial nationalism to "choose its forms from the gallery of 'models' offered by European and American nation-states."¹⁹⁵ While Chatterjee's framework convincingly explains the insistence on the Western model of industrial growth, it underwrites the opposition to imperial policies inherent in the nationalist promotion of Western economic modernity. Bombay, with its expanding cotton mills, exemplified industrial progress. Nationalists commended these developments. Yet this emulation of the Western model of growth stimulated jealous protective gestures and criticisms against unfair colonial economic policies of the British; the material domain did not simply represent subordination, imitation, and admiration.

Nationalists were vociferous in their opposition to the discriminatory excise duties, and they lamented the lack of state protection for the growing Indian textile industry. Naoroji pointed out that the colonial government's decision to lower excise duties on cotton goods imported from Britain to India was an attempt to "nip in the bud" the textile factories of Bombay.¹⁹⁶ Dutt claimed that the decision to abolish import duties on British cotton goods in 1882 indicated that "the growth of looms and factories in Bombay aroused jealousy [in Britain]."¹⁹⁷ Since the colonial state continued to tax cotton goods produced in Indian mills, entrepreneurs in India encountered unfair competition from Lancashire within Indian markets. Dutt deplored that "the infant mill industry of Bombay, instead of receiving help and encouragement was repressed by an excise duty unknown in any other part of the civilized world."¹⁹⁸ Later nationalist leaders of the Bombay Presidency, such as Tilak and Gokhale, rebuked the colonial government for not protecting

the infant textile industry of India and for not creating a “protective wall” of import duties on competing foreign goods.¹⁹⁹ Not surprisingly, these leaders maintained silence about the exploitative working conditions and harsh living atmosphere of textile laborers in Bombay. They remained indifferent to the attempts to restrict the excruciating work schedule in the mills and disregarded the millowners’ abuse of human capital.

While many prominent nationalist figures were silent on these issues, local leaders, most prominently Dr. K. N. Bahadurji, boldly undermined any restrictions on Indian mill labor. In 1891, Bahadurji engaged in a heated discussion with Holt S. Hallett, an engineer with the GOI in the late nineteenth century and an ardent proponent of British economic interests. In a paper read at the International Congress of Hygiene and Demography held in London in 1891, Hallett described the situation of mill labor in Bombay.²⁰⁰ Citing the findings of previous factory commissions, he related: “to work mill hands 14 hours a day during the hottest time of the year with only one or two necessary intervals is a disgrace for Indian manufacturers, and calls loudly for redress by government legislation.”²⁰¹ Hallett went on to deplore the “enervating atmosphere in the mills laden with cotton dust, fluff and disease” and the “inhuman extraction of labour” prevalent in the mills of Bombay. The Bombay Millowners’ Association had deputed Bahadurji to represent the perspective of millowners at the Congress. Bahadurji vehemently contradicted Hallett’s grim depiction of mill labor in Bombay and claimed that:

There are no very strict restrictions. The Indian operative, who is paid by piece work, is allowed to come in half-an-hour after time of starting work. . . . There is no rule or way of seeing him constantly at his post during the working hours of the mill. He is a perfectly free agent in that regard. He feels himself at liberty to take his meals between the hours of seven and twelve, to stretch his legs occasionally, to loiter in the compound, or perhaps have his shave and shampoo under little sheds in the mill compound wherever he pleases.²⁰²

He insisted that circumstances were not abusive in Bombay mills, where workers were informally allowed to take short breaks. The application of English factory laws in India would reduce this flexibility of work schedule for both Indian millowners and operatives.²⁰³

The flourishing Indian press mirrored the attitudes of nationalist leaders about regulation of labor. It downplayed the misery of workers and ridiculed any proposed legislation that would restrict the unimpeded use of labor in the mills. The rivalry between British and Indian cotton manufacturers influenced newspaper journalists. The *Jam-e-Jamshed*, an Anglo-Gujarati daily, viewed the Factory Commission of 1875 as a Manchester plot. It asserted that millworkers of Bombay were better placed than those in any other country, and that their hours were not longer than those of an average agricultural laborer.²⁰⁴ Commenting on the later Factory Commission of 1884, the *Indian Spectator*, a leading English-language and Marathi-owned newspaper, argued that “in the present condition of the various growing industries in the city it is essential that no needless official interference should be encouraged by further legislative enactment.”²⁰⁵

Local press consistently interpreted factory enquiries as conspiratorial tools to undermine Indian mills. Linking the earlier campaigns to abolish import duties on cotton with the advocacy of labor regulation, the *Bombay Samachar*, a Marathi newspaper, elaborated:

Through a selfish desire to crush the Indian cotton industry the cotton manufacturers of Lancashire put pressure upon the authorities in England to abolish the cotton import duties. Failing to secure their selfish object by this measure [not being able to totally crush the Indian industry merely by imposing discriminatory cotton duties], a fanciful complaint was brought by the Manchester cotton dealers that the Indian mill-hands had been overworked, and pressure was brought to bear upon the Indian government to appoint a Factory Commission to enquire into the condition of these workmen.²⁰⁶

The paper reemphasized that the efforts to curtail working hours in Bombay mills were a direct outcome of the “jealousy of the selfish British cotton manufacturers who command such powerful influence that the English Ministry trembles before them.”²⁰⁷

The *Bombay Samachar* also claimed that, contrary to the claims of British cotton manufacturers, “the mill-hands in Bombay were not overworked.”²⁰⁸ Extending this view, *Mahratta*, an English-language daily edited by Tilak, dismissed Lancashire’s concern for workers’ health and claimed that “the Indian millowners would be the first to detect any decline in the working capacity of the labourers they employ.”²⁰⁹ One

paper asserted that legislative restrictions hurt workers' own interests. Ignoring millworkers' petitions to reduce working hours, the papers argued that the "restrictions on working will curtail the income of poor mill labourers. Thus there is all likelihood that the selfish sympathy of Lancashire for Indian mill-hands will make them poorer than before and quite wretched."²¹⁰ The *Indu Prakash*, an Anglo-Marathi daily, insisted that restrictions on female mill labor meant "that bread is taken out of the mouth of so many factory women."²¹¹ One paper even emphasized that, far from being miserable, Indian factory workers were leading a contented life. The *Native Opinion* declared that "there is no doubt that the mill-hands of Bengal and Bombay are better off than those of England, not because they enjoy higher pay, but because their habits are simpler and their wants fewer, and their diet cheap."²¹² These defensive arguments underscored the unwavering commitment of economic nationalism to protect a budding Indian enterprise. Simultaneously, this enthusiasm for economic self-reliance eschewed the exploitation of labor in Bombay's mills.

CONCLUSION

The growth of cotton mills in the late nineteenth century and the consequent creation of an urban working class were the basis for modern industrialism in colonial Bombay. The industry and its labor stimulated conflicting responses from various sections of colonial society. India's subordinate status in the imperial economic system, especially its positioning as a de-industrialized, captive market for British factory goods, dramatically shaped these reactions. Eager to retain their monopoly over the Indian market, cotton manufacturers in Britain relentlessly promoted the enactment of factory regulations in India that might restrict the ability of Indian rivals to exploit human capital. Although the colonial state in India appointed factory enquiry commissions and enacted some regulations, it provided ample space to Indian capitalists, its collaborators in maintaining the Raj, to manipulate the meager legislative restrictions.

The rivalry between the colony and the metropole stimulated defensive positions from the local press and nationalist leaders. As passionate supporters of Western industrial modernity, Indian economic nationalists of the late nineteenth century disregarded the harsh impact of unregulated factory life and dismal living conditions on millworkers. Their voluminous studies and the commentaries of local press failed to mention

the lack of basic facilities such as sanitary housing. Consequently, the discourse about worker well-being remained limited to some rudimentary factory laws, and even these limited legislative actions were constructed as imperialist conspiracies against Indian industries. Thus, in the late nineteenth century, anti-colonial nationalists compromised the well-being of industrial workers in service of their abstract perceptions about an economically strong nation. They aligned with the interests of Indian capital, a feature that would continue to characterize anti-colonial nationalism in the later, mass-based nationalist phase.

NOTES

1. K. N. Bahadurji, "Indian Factory Workers," a paper read at the Congress of Hygiene and Demography, in *IFLC 1908*, Vols. I and II (London: William Hutchinson, 1891), 10–11. In 1884, Bahadurji had become the first Indian to obtain a Doctor of Medicine degree at the University of London. He was later a faculty member at the Grant Medical College of Bombay and a member of the Indian National Congress.
2. *Report of the Commissioner Appointed by the Governor of Bombay in Council to Enquire into The Conditions of the Operatives in the Bombay Factories and the Necessity or otherwise for the Passing of a Factory Act* (henceforth *Factory Commission of 1875*) (Bombay: Government Central Press, 1875), 2.
3. Dadabhai Naoroji, *Poverty and Un-British Rule in India* (London: Swan Sonnenschein, 1901); R. C. Dutt, *The Economic History of India*, Vols. I and II (London: Kegan Paul, 1904).
4. Manu Goswami, *Producing India: From Colonial Economy to Nationalist Space* (Chicago: University of Chicago Press, 2004), 209–41.
5. British cotton mills began to produce textile goods in 1676. To promote the nascent industry, in 1721 the British state prohibited the import of cotton goods from India. At the same time, the export of British cotton goods into India increased as India absorbed more than one-quarter of the total textile imports from Britain. *Imperial Gazetteer of India*, Vol. IV (London: Trubner, 1881), 553–57.
6. Bipan Chandra, *The Rise and Growth of Economic Nationalism in India* (New Delhi: People's Publishing House, 1969), 327–54.
7. D. H. Buchanan, *The Development of Capitalist Enterprise in India* (New York: Macmillan, 1934), 206; Claude Markovits, *Indian Business and Nationalist Politics, 1931–39: The Indigenous Capitalist Class and the Rise of the Congress Party* (Cambridge: Cambridge University Press, 1985), 8.

8. Buchanan, *Capitalist Enterprise*, 206.
9. In colonial documents and travel accounts, Bombay City was frequently described as the *Urbs Prima in Indis*. Lord George Harris, the governor of Bombay from 1890 to 1895, recounted that this title underscored the city's commercial, industrial, and architectural advances, as well as its location on the Arabian Sea, which facilitated Bombay's connection with the world and made it the "front door of India." Lord Harris, "Bombay," in William Sheowring, ed., *The British Empire Series*, Vol. I, *India, Ceylon, Straits Settlement, British North Borneo, Hong-Kong* (London: Kegan Paul, Trunch, Trubner, 1899), 48.
10. S. M. Edwardes, *The Rise of Bombay: A Retrospect* (Bombay: Times of India Press, 1902), 89–90; *The Imperial Gazetteer of India*, Vol. VIII, *Berhampore to Bombay* (Oxford: Clarendon Press, 1908), 404.
11. Edwardes, *Rise of Bombay*, 89; Amar Farooqui, "Urban Development in a Colonial Situation: Early Nineteenth Century Bombay," *Economic and Political Weekly* (henceforth *EPW*), Vol. 31, No. 40 (5 October 1996): 2747; J. C. Masselos, "Changing Definitions of Bombay: City State to Capital City," in Indu Banga, ed., *Ports and Their Hinterlands in India* (New Delhi: Manohar Publications, 1992), 273–316.
12. S. M. Edwardes, *Gazetteer of Bombay City and Island* (henceforth *City Gazetteer*), Vol. III (Bombay: Times of India Press, 1909), 403.
13. W. W. Hunter, ed., *The Imperial Gazetteer of India*, Vol. III (London: Trubner, 1885), 75; Meera Kosambi, "Commerce, Conquest and the Colonial City: Role of Locational Factors in the Rise of Bombay," *EPW*, Vol. 20, No. 1 (5 January 1985): 33–34.
14. *Ibid.*, 34.
15. *Ibid.*, 35.
16. Edwardes, *Rise of Bombay*, 221–22; Amar Farooqui, "Urban Development," 2746–59, Morris D. Morris, *The Emergence of an Industrial Labor Force in India: A Study of Bombay Cotton Mills, 1854–1947* (Berkeley: University of California Press, 1965), 11.
17. Edwardes, *Rise of Bombay*, 243–44; Kosambi, "Commerce, Conquest and the Colonial City," 34.
18. Edwardes, *Rise of Bombay*, 110–19.
19. Hunter, *The Imperial Gazetteer of India*, Vol. VIII, 407.
20. Walter R. Cassels, *Cotton: An Account of Its Culture in the Bombay Presidency* (Bombay: Education Society Press, 1862), 6–8; *General Report on the Administration of the Bombay (Presidency) for the Year 1873–74* (Bombay: Government Central Press, 1875), 279–81.
21. Hunter, *The Imperial Gazetteer of India*, Vol. III, 76.
22. The first railway in India was inaugurated between Bombay and Thana in 1853. By the mid-1860s, one line had been extended eastward over

- Bhor Ghat toward the central India cotton-growing fields, and another line was opened to Ahmedabad and the cotton areas of Gujarat. Cassels, *Cotton: An Account of Its Culture in the Bombay Presidency*, 297–326; Edwardes, *Rise of Bombay*, 262–63.
23. Farooqui, “Urban Development,” 2748–49.
 24. Hunter, *The Imperial Gazetteer of India*, Vol. IV (London: Trubner & Co., 1881), 554; Rajnarayan Chandavarkar, *The Origins of Industrial Capitalism in India: Business Strategies and the Working Classes in Bombay, 1900–1940* (Cambridge: Cambridge University Press, 1994), 23.
 25. For the development of shipbuilding, see Edwardes, *Rise of Bombay*, 153–54. The expansion of trade in the 1830s encouraged the establishment of banks that would pool the trading community’s capital resources. The Bank of Bombay was founded in 1840, followed by Bank of Western India in 1842 and the Commercial Bank of India in 1845. By 1850, there were four such banks in the city. Edwardes, *Rise of Bombay*, 156, 275.
 26. W. W. Hunter, *The Indian Empire: Its People, History and Products* (London: W. H. Allen, 1893), 687; Kosambi, “Commerce, Conquest and the Colonial City,” 35; Morris, *Emergence of an Industrial Labor Force*, 20.
 27. Edwardes, *Rise of Bombay*, 110–19; Christine Dobbin, *Urban Leadership in Western India: Politics and Communities in Bombay City, 1840–1885* (London: Oxford University Press, 1972), 2.
 28. Ibid.
 29. Buchanan, *Capitalist Enterprise in India*, 144–45. For details of these communities, especially the experience, excellence, and dominance of Parsis in shipbuilding, banking, and brokerage prior to the advent of the British in western India, see Jesse S. Palsetia, *The Parsis of India: Preservation of Identity in Bombay City* (Leiden: Brill Academic Publishers, 2001), 37–64.
 30. Hunter, *The Imperial Gazetteer of India*, Vol. II (London: Trubner & Co., 1881), 214; Edwardes, *Rise of Bombay*, 162–64, 236–37. According to a rough estimate, Dadabhai Pestonji Wadia, owner of one of the biggest Parsi trading firms in the 1840s, had bought property worth Rs. 50 lakh in Bombay. He had acquired approximately one-quarter of the island and received about Rs. 2 lakh per annum as rent returns. Other leading Indian traders and bankers made similar investments. Dobbin, *Urban Leadership in Western India*, 12.
 31. Hunter, *The Imperial Gazetteer of India*, Vol. III, *The Indian Empire, Economic* (Oxford: Clarendon Press, 1908), 195; Buchanan, *Capitalist Enterprise in India*, 200.
 32. Hunter, *The Imperial Gazetteer of India*, III:196.

33. *Indian Industrial Commission*, Vol. I, *Report* (Calcutta: Government Central Press, 1918), 72; *Proceedings of the General Department of the Government of Bombay*, Maharashtra State Archives (henceforth MSA), File No. 574, 1920, m58; S. D. Mehta, *The Cotton Mills of India, 1854-1954* (Bombay: The Textile Association of India, 1954), 13.
34. Indian Industrial Commission, *Report*, Vol. I, 72; Buchanan, *Capitalist Enterprise in India*, 200-201.
35. Hunter, *The Indian Empire*, 482-83; Chandavarkar, *Origins of Industrial Capitalism*, 246-47.
36. Mehta, *The Cotton Mills of India*, 47-48.
37. Indian Industrial Commission, *Report*, Vol. I, 73.
38. S. M. Rutnagur, *Bombay Industries: The Cotton Mills, A Review of the Progress of the Textile Industry in Bombay from 1850 to 1926 and the Present Constitution, Management and Financial Position of Spinning and Weaving Factories* (Bombay: The Textile Journal Limited, 1927), 14, 22.
39. Buchanan, *Capitalist Enterprise in India*, 202.
40. Rutnagur, *Bombay Industries: The Cotton Mills*, 152.
41. *Census of India, 1901*, Vol. X, *Bombay (Town and Island)*, Part IV, *History* (Bombay: Times of India Press, 1901), 140; Edwardes, *Rise of Bombay*, 98-100.
42. *Census of India, 1901*, Vol. X, Part IV, 140, 146; *City Gazetteer*, Vol. I, 163-65.
43. *Indian Textile Journal* (henceforth *ITJ*), Vol. XXIV, No. 285, 1914, 317; *City Gazetteer*, 207; Gill Yamin, "The Character and Origins of Labour Migration from Ratnagiri District, 1840-1920," *South Asia Research*, Vol. 9, No. 1 (1989): 33-53.
44. *Census of India, 1901*, Vol. XI, *Bombay Town and Island*, Part V, *Report* (Bombay: Times of India Press, 1901), 17.
45. *Census of India, 1901*, Vol. X, Part IV, 140.
46. *ITJ*, XXIV/285, 1914, 318; Morris, *Emergence of an Industrial Labor Force in India*, 217.
47. *Report of the Indian Factory Labour Commission, 1908* (henceforth *IFLC 1908*), Vol. I, 18; *City Gazetteer*, Vol. I, 209-10.
48. *IFLC 1908*, Vol. I, 18-19. Vol. II, 122; Chandavarkar, *Origins of Industrial Capitalism*, 124-67.
49. Morris, *Emergence of an Industrial Labor Force in India*, 44.
50. *Report and Proceedings of the Commission appointed to Consider the Working of Factories in the Bombay Presidency, 1884* (henceforth *Factory Commission of 1884*) (Bombay: Government Central Press, 1885), 142.
51. Buchanan, *Capitalist Enterprise in India*, 329-30.
52. Chandavarkar, *Origins of Industrial Capitalism*, 278-79; Buchanan, *Capitalist Enterprise in India*, 205.

53. Morris, *Emergence of an Industrial Labor Force*, 117; Buchanan, *Capitalist Enterprise in India*, 423.
54. *Factory Commission of 1875*, 2.
55. *Factory Commission of 1884*, 4–5.
56. *Annual Report of the Bombay Millowners' Association* (henceforth BMOA) (Bombay: Times of India Press, 1899), 11.
57. *IFLC 1908*, Vol. I, 7.
58. Evidence of Mr. James Helm, manager of the Bombay United Mills, *Factory Commission of 1875*, 1; J. C. Kydd, *A History of Factory Legislation in India* (Calcutta: University of Calcutta Press, 1920), 65.
59. Women workers gradually replaced child labor in the mills because the wages paid to the adult female laborers did not exceed those paid to the children. Since there were fewer restrictions on female labor, using women instead of children was much more economical. *Annual Report of the Factory Inspector for the Town and Island of Bombay for the Year 1899* (Bombay: Central Government Press, 1900), 4.
60. *Factory Commission of 1875*, 20.
61. Rajani Kanta Das, *Factory Legislation in India*, 59.
62. *Factory Commission of 1884*, 101, 104. In the early 1870s, only about 5 percent of textile millworkers lived in and around the cotton mill areas located primarily in the northern parts of the city. In the absence of adequate communication systems, most of them had to walk several miles to their workplace. However, with growing population pressure in central Bombay and increasing rents, millworkers gradually moved to the northern area of the city. It was only by the early 1900s that more than 80 percent started living only a few minutes' walking distance from their workplace. *Factory Commission of 1884*, 196; Evidence of Dr. V. P. Chavan, *IFLC 1908*, Vol. II, 123; Buchanan, *Capitalist Enterprise in India*, 312.
63. *Factory Commission of 1884*, 8, 58, 65.
64. *Ibid.*, 105, 144.
65. *Report of the Factory Commission of 1890*, 11.
66. *Factory Commission of 1875*, 2.
67. *Factory Commission of 1884*, 8.
68. Buchanan, *Capitalist Enterprise in India*, 315.
69. Kydd, *Factory Legislation in India*, 51.
70. Buchanan, *Capitalist Enterprise in India*, 310.
71. Evidence of Dinshaw M. Petit, *Factory Commission of 1884*, 107.
72. Evidence of J. H. Mody, *Factory Commission of 1884*, 97.
73. Evidence of Genoo Babaji and Narayan Surkoji, *ibid.*, 100, 104.
74. *Ibid.*, 139; Kydd, *Factory Legislation in India*, 36–37.
75. Kydd, *Factory Legislation in India*, 59.
76. *Evidence Recorded by and Written Statements Submitted to the Textile Factories Labour Committee, 1907* (Bombay: Government Central Press, 1907), 37.

77. *Times Of India*, 25 September 1905, 4; *IFLC*, 1908, Vol. I, 103.
78. *BMOA*, 1905, vii–xv.
79. *Ibid.*, 8.
80. Das, *Factory Legislation in India*, 132–33.
81. *Factory Commission of 1884*, 20.
82. *BMOA*, 1875, 56.
83. *ITJ*, Vol. III, No. 36, 1893, 245.
84. Evidence of Tamooljee Dhunjeebhoy, manager, Alliance Mill, *Factory Commission of 1875*, 8; Evidence of Balloo Atmajee and Ladoo Marthnin, millworkers, *Factory Commission of 1890*, 30–31.
85. Evidence of Balloo Atmajee, laborer in Petit Mill, *Factory Commission of 1890*, 30.
86. “Mill Workers’ Petition,” *Factory Commission of India*, 1890, 91–92.
87. Evidence of James H. Dunkerly, a mill manager, *Factory Commission of 1884*, 55.
88. “Mill Workers’ Petition,” *Factory Commission of 1890*, 92.
89. *Factory Commission of 1875*, 2.
90. Evidence of Dr. Joseph Anderson, *Factory Commission of 1875*, 51.
91. Evidence of Dr. Thomas Weir, *Factory Commission of 1875*, 8.
92. Evidence of Temooljee Dhunjeebhoy, manager of Alliance Spinning and Weaving Mill, *Factory Commission of 1875*, 48.
93. Evidence of Dr. Joseph Anderson, *Factory Commission of 1875*, 55.
94. Evidence of Dr. Thomas Weir, *Factory Commission of 1875*, 11.
95. T. J. Hewlett, “Sanitary Conditions of the Mills, Factories and Workshops in the City of Bombay,” *Factory Commission of 1884*, 196.
96. *Ibid.*, 198.
97. *Ibid.*
98. *Ibid.*
99. *Ibid.*, 201.
100. *Ibid.*, 206.
101. *Ibid.*, 1–5.
102. *Proceedings of the General Department of the Government of Bombay*, MSA, File No. 574, I, 1920, m231.
103. *Annual Factory Report for the Year 1911*, 2; *Annual Factory Report for the Year 1913*, 4; *Annual Factory Report for the Year 1921*, 4.
104. “Note on the Ventilation of Cotton Factories,” *Proceedings of the General Department of the Government of Bombay*, MSA, File No. 574, I, 1920, m307–309; *Proceedings of the Department of Industries and Labour*, MSA File No. 8424, III, 1931, 4.
105. *Annual Factory Report for the Year 1899*, 2.
106. Hewlett, “Sanitary Conditions of the Mills, Factories and Workshops in the City of Bombay,” *Factory Commission of 1884*, 196.

107. Evidence of John Hammett, manager, New Great Eastern Mill, *Factory Commission of 1884*, 62.
108. Ibid., 197.
109. Prashant Kidambi, *The Making of an Indian Metropolis: Colonial Government and Public Culture in Bombay, 1890–1920* (Hampshire, UK: Ashgate, 2007), 32–34; Ira Klein, “Urban Development and Death: Bombay City, 1870–1914,” *Modern Asian Studies*, Vol. 20, No. 4 (1986): 725–54.
110. Hunter, *The Imperial Gazetteer of India*, Vol. III, 77–79.
111. *Census of the City and Island of Bombay, 1881* (Bombay: Times of India Press, 1883), 23.
112. Edwardes, *Rise of Bombay*, 295.
113. *Annual Report of the Municipal Commissioner of Bombay* (henceforth ARMCB) (Bombay: The Government Central Press, 1885), 224.
114. *City Gazetteer*, Vol. III, 210.
115. ARMCB, 1892, 384.
116. *City Gazetteer*, Vol. III, 210.
117. Ibid., 211.
118. *Census of India, 1901*, Vol. XI, *Bombay*, Part V, 111.
119. Ibid., 67, 106–8.
120. Bhalchandra Krishna, *Phthisis in Bombay* (Bombay: Indu Prakash Steam Press, 1907).
121. Ibid., 11.
122. Ibid.
123. Evidence of Dr. J. A. Turner, *IFLC 1908*, Vol. II, 43.
124. Evidence of Dr. V. P. Chavan, *IFLC 1908*, Vol. II, 123.
125. Ibid.
126. *IFLC 1908*, Vol. I, 86–88.
127. Ibid., 89.
128. Ibid., 92.
129. Evidence of Dr. V. P. Chavan, *IFLC 1908*, Vol. II, 143.
130. ARMCB, 1887, 330.
131. Das, *Factory Legislation in India*, 7.
132. Morris D. Morris, “The Growth of Large-Scale Industry in India to 1947,” in Dharma Kumar, ed., *The Cambridge Economic History of India*. Vol. II, c. 1757–1970 (Cambridge: Cambridge University Press, 1983), 578.
133. Karl Marx, *Capital*, Vol. I (London: Penguin Books, 1976), 390–91.
134. *Great Britain: Parliamentary Debates, 1875*, 209–11.
135. Ibid., 211.
136. Ibid., 214.
137. Kydd, *Factory Legislation in India*, 20–21.

138. Das, *Factory Legislation in India*, 28–30.
139. Ibid., 31–33.
140. Ibid., 37.
141. *Great Britain: Parliamentary Debates*, 1889, 666.
142. Ibid.
143. *Great Britain: Parliamentary Debates*, 1890, 1116.
144. Ibid., 1320–21.
145. Kydd, *Factory Legislation in India*, 48–49.
146. Das, *Factory Legislation in India*, 82.
147. *BMOA*, 1881, i.
148. Kydd, *Factory Legislation in India*, 5.
149. *Factory Commission of 1875*, 5.
150. Ibid., 5.
151. Ibid., 5.
152. Kydd, *Factory Legislation in India*, 5–66.
153. D. E. Wacha, *Rise and Growth of the Bombay Municipal Government* (Madras: G. A. Natesan and Company, 1912), 5–7.
154. Dobbin, *Urban Leadership*, 159–61.
155. Ibid., 188–89, 194.
156. *Great Britain: Parliamentary Debates*, 1875, 213.
157. Quoted in Kydd, *Factory Legislation in India*, 9–10.
158. *Factory Commission of 1884*, 3.
159. Appendix B, *Factory Commission of 1884*, 8.
160. *ITJ*, Vol. IV, No. 42, March 1894, 149.
161. *ITJ*, Vol. III, No. 36, October 1893, 245.
162. *ITJ*, Vol. IV, No. 42, March 1894, 149.
163. *Annual Factory Report of 1892*, 15.
164. Ibid.
165. Evidence of K. N. Seervai, former Acting Factory Inspector of Factories, *Factory Commission of 1884*, 44, 48; Evidence of James H. Dunkerly, former manager of various mills, *Factory Commission of 1884*, 54.
166. Evidence of John Hammett, manager, New Great Eastern Mill, *Factory Commission of 1884*, 66.
167. Evidence of Sassoon David of Sassoon Mills; Evidences of Nowrosji Screwalla, manager of Coorla Mill, C. Dorabji, manager of Petit Mills, and J. G. Hammett, manager of Great Eastern Mill, *IFLC 1908*, Vol. II, 76, 78, 95, 99.
168. *ITJ*, Vol. I, No. 4, 1891, 59.
169. *ITJ*, Vol. III, No. 10, October 1893, 5.
170. *IFLC 1908*, Vol. I, 83–84.
171. Das, *Factory Legislation in India*, 16–17.
172. *Factory Commission of 1884*, 3.

173. *Bombay Presidency Native Newspaper Report* (henceforth *BPNNR*), 15 November 1884, 16; *Factory Commission of 1884*, 8–9.
174. B. Siva Rao, *The Industrial Worker in India* (London: George Allen and Unwin, 1939), 17.
175. *Factory Commission of 1884*, 111.
176. *BPNNR*, 13 July 1895, 13.
177. *Factory Commission of 1884*, 111–14.
178. Kydd, *Factory Legislation in India*, 36–37, 59.
179. Rajani Palme Dutt, *India Today* (1940) (London: Victor Gollancz, 1940), 116–24.
180. Naoroji, *Poverty and Un-British Rule in India*, 1093.
181. Dutt, *Economic History of India*, 210–21.
182. *Ibid.*, 345.
183. James Kellock, *Mahadev Govind Ranade: Patriot and Social Servant* (Calcutta: Association Press, 1926), 126.
184. M. G. Ranade, “Present State of Indian Manufactures and Outlook of the Same, Paper Presented at the Industrial Conference, Poona, 1893,” in Bipan Chandra, ed., *Ranade’s Economic Writings* (New Delhi: Gian Publishing House, 1990), 412.
185. Ranade, “Inaugural Address at the First Industrial Conference, Poona 1890,” *Economic Writings*, 277.
186. *BPNNR*, 24 December 1891, 5.
187. Dutt, *Economic History of India*, 612.
188. Naoroji, *Poverty and Un-British Rule in India*, 50.
189. In one of his essays, Ranade advocated the creation of a modern banking and credit system, the essentials of industrialization, by demonstrating its positive impact in various countries of Western Europe. Ranade, “Reorganization of Real Credit in India,” *Economic Writings*, 304–21.
190. Ranade, “Inaugural Address,” *Economic Writings*, 278.
191. Ranade, “Present State of Indian Manufactures,” *Economic Writings*, 416.
192. D. G. Karve and D. V. Ambekar, eds., *Speeches and Writings of Gopal Krishna Gokhale*, Vol. II (Bombay: Asia Publishing House, 1967), 230.
193. Quoted in Chandra, *Economic Nationalism*, 66–67.
194. Partha Chatterjee, *The Nation and Its Fragments: Colonial and Postcolonial Histories* (Princeton, NJ: Princeton University Press, 1993), 6.
195. *Ibid.*, 9.
196. Naoroji, *Poverty and Un-British Rule*, 54. From the 1860s onward, cotton manufacturers in Britain urged the British Parliament and the colonial government of India (GOI) to lower duties on their goods imported into India. The objective of this campaign was to prevent Indian mills from getting any protection against British competition. By 1871, import duties on cotton goods were reduced from 10

- to 5 percent while it was abolished altogether in 1882. Import duties remained suspended between 1882 and 1894. Although the advocates of British cotton manufacturers opposed it, a deficit of over two million pounds sterling forced the GOI to re-impose an import duty of 5 percent on goods imported from Britain into India. As a conciliatory move, from 1896 the GOI increased taxes on Indian cotton products. Dutt, *Economic History of India*, 401–16, 537–44, *Great Britain Parliamentary Debates*, 1871, 888–91.
197. The Cotton Duties Import Act of 1896 imposed an excise duty on all cotton goods, even the coarse Indian cloth, which was no competition for the textile products of Manchester. This decision “threw a burden on Indian mills.” Dutt, *Economic History of India*, viii, 543.
 198. *Ibid.*, ix, 402.
 199. Bal Gangadhar Tilak, *Bal Gangadhar Tilak, His Writings and Speeches*, with an appreciation by Babu Aurobindo Ghose (Madras: The Cambridge Press, 1918), 53; Gokhale, *Speeches and Writings*, 226.
 200. Holt S. Hallett, “Indian Factory Legislation,” *Transactions of the Seventh International Congress of Hygiene and Demography*, Vol. VIII (London: Eyre and Spottiswoode, 1892), 219–31.
 201. *Ibid.*, 224.
 202. Bahadurji, “Indian Factory Workers,” 2.
 203. *Ibid.*, 43–44.
 204. *BPNNR*, 27 March 1875, 3.
 205. *BPNNR*, 9 August 1884, 6.
 206. *BPNNR*, 21 February 1891, 6.
 207. *BPNNR*, 28 February 1891, 5.
 208. *Ibid.*
 209. *BPNNR*, 9 August 1884, 7.
 210. *BPNNR*, 7 March, 1891, 7.
 211. *BPNNR*, 11 April, 1891, 6.
 212. *BPNNR*, 17 May 1890, 23.

Industrial Housing and Sanitation Policies, 1896–1940

The outbreak of a virulent bubonic plague in Bombay in 1896 and the resulting enormous loss of life triggered frenetic responses from the provincial and municipal governments. Officials confirmed plague in Bombay City on 23 September 1896.¹ Three months later, the plague was reportedly causing 1,500 deaths there per week. By early 1897, weekly epidemic mortality rates had reached an alarming figure of around 2,000 deaths per week.² A panicked provincial government (henceforth called the government of Bombay) hastily took action to arrest the spread of the plague. The Bombay Municipal Act of 1888 entrusted the municipality with the power to segregate infected people and to evacuate houses and buildings characterized as unfit for human habitation.³ The establishment of a Special Plague Committee in 1897 intensified these preventive efforts.⁴ This committee organized the compulsory hospitalization of patients; house inspections and searches for plague victims of infected dwellings; and the transfer of the inhabitants of those buildings to camps where they lived under medical supervision.⁵

While these preventive efforts recognized plague as contagious and the human body as the agent of disease transmission, most government sanitary officials and medical professionals also suggested that Bombay's abysmal sanitary conditions, especially in working-class neighborhoods, were equally responsible for the plague's rapid spread. Describing a typical working-class *chawl* in Bombay, Surgeon-Major General Cleghorn, Sanitary Commissioner with the government of India, regretted that:

The whole tenement is built of a congeries of corridors and rooms and contains from 500 to 1,000 individuals. The only space between each tenement is a gully sufficiently wide to admit a sweeper. In most of the corridors and rooms there is absolutely no light admitted and consequently no ventilation. The corridors are repositories of the filth of all kinds. 70 percent of Bombay's population lives in this manner and it is no surprise that the disease [plague] killed so many.⁶

Other plague reports emphasized that the "flimsy construction, leaking pipes and overcrowding" of working-class tenements contributed to the rapid spread of the plague.⁷ Some reports indicated that the plague was not a disease of locality, since it attacked rich and poor alike,⁸ however, the emphasis on the local miasma and its perceived role in triggering and spreading the epidemic prevailed. Observers agreed that the "want of light and ventilation, overcrowding, filth and dampness and defective drainage of poorer class localities formed a suitable rendezvous for rats, fleas and all sorts of vermin."⁹ Despite the gradual development of bacteriological research into the plague bacillus and preventive methods of inoculation, both colonial sanitary and public health officials insisted that appropriate sanitation and conservancy, along with well-ventilated housing, were critical to epidemic prevention.¹⁰ The perceived link between living conditions and disease stimulated sanitation and housing projects in poor areas, signaling a shift in the earlier apathetic attitudes of the government and employers toward workers' abject living conditions. This shift underscored the destabilizing impact of the plague on the routine functioning of trade and commerce in Bombay.

Indeed, the crisis did not result only in unprecedented mortality figures. A report on the plague described its effect on the economic life of the city:

It was during this period [1896–97] that the great exodus from the city took place; that while the city itself wore the aspect of a "City of the Dead", the Railway Stations teemed with masses of fleeing humanity. . . . Business was paralyzed, offices were closed and thoroughfares, ordinarily teeming with life, were characterized by a desolate emptiness. By the end of January 1897, some 400,000 people—about one half of the city's population—had fled.¹¹

Plague deaths and the mass exodus from 1896 to 1897 reduced the abundant supply of labor to the cotton mills of Bombay. A significant

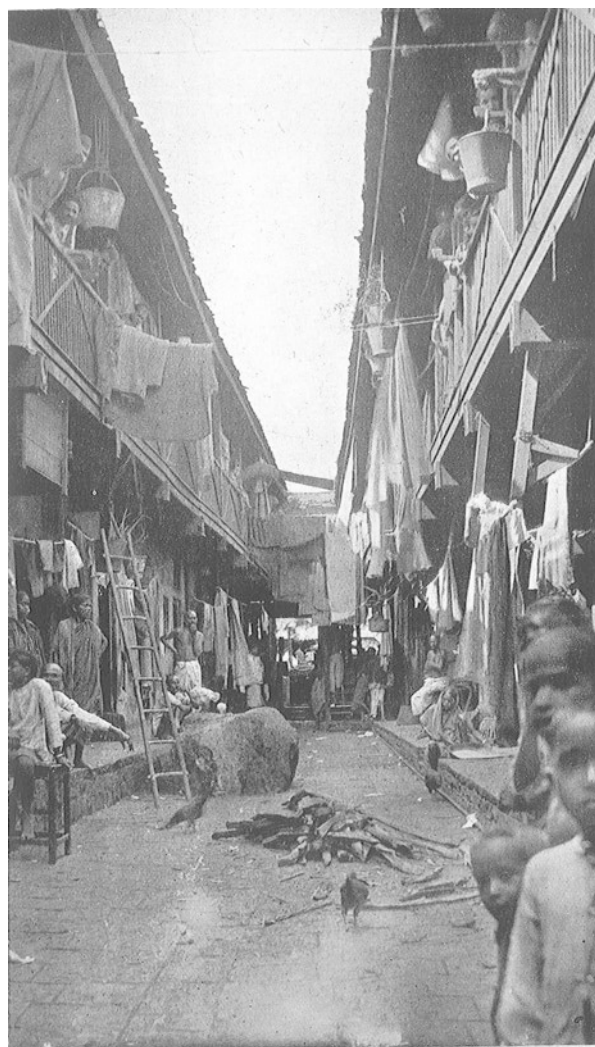
number of plague victims and others who fled the city in panic were millworkers. Although plague death statistics were extraordinary in all localities, they were particularly high in the E, F, and G wards, or the mill district of the city.¹² Despite a temporary increase in wages, “mill hands left practically in a body, necessitating the closing of the factory for an indefinite period.”¹³ During the period from 1896 to 1897, the Bombay Millowners’ Association (BMOA) recorded a sharp fall in its total output and attributed the decline to plague.¹⁴ The BMOA reaffirmed that, during this period, “many of the mills in the city of Bombay had to close their doors, while others had to work short time in consequence of the flight from the city of the mill operatives.”¹⁵ The annual report of the factory inspector for 1899 documented that because of plague deaths and exodus, mill recruiting agents encountered difficulties in procuring enough labor for their factories.¹⁶

The unsettling effects of the plague stimulated sympathetic responses from a few millowners, and they became concerned about their workers’ unhealthy living environment. N. N. Wadia, a prominent cotton industrialist, insisted:

This scarcity of labor must be grappled with in the coming year. This brings me to the important question of the housing of our work-people. . . . It is well-known that with mill-hands, some eight-ten persons occupy the room not larger than 10 feet by 12 feet. . . . What is wanted is a system of cheap and well-ventilated and properly constructed buildings in a suitable situation where land is cheap and under proper supervision as to cleanliness and sanitary requirements.¹⁷

Subsequently, some big mill-owning groups, such as the Petits, Wadias, and Tatas, initiated housing plans for their workers.¹⁸

Acknowledging the growing concerns for workers’ living conditions, the *Indian Spectator*, a local English-language daily, claimed that “if there is one thing the plague has most forcibly impressed upon the public mind, it is the necessity of having the labourers, employed in the great industrial enterprise of the city, housed well and in healthy surroundings.”¹⁹ The paper suggested that by providing sanitary housing for their workers, “they [millowners] would save their trade from receiving such rude shocks as it did during the gloomy period when Bombay became a desert last year.”²⁰ The paper recommended permanent sanitary improvements in the low-lying northern parts of Bombay that housed millworkers “at



A TYPICAL SCENE IN WORKING-CLASS QUARTERS.

[Copyright.]

Fig. 3.1 A typical scene in working-class quarters. *Source:* A. R. Burnett-Hurst, *Labour and Housing in Bombay: A Study of the Economic Conditions of the Wage-Earning Classes in Bombay* (London: P. S. King, 1925)

whatever cost.”²¹ The *Indian Textile Journal*, another English-language periodical, asserted that, to prevent the future occurrence of such devastating epidemics, Bombay required a “thorough overhaul of its sanitary system,” and measures to prevent overcrowding of working-class quarters.²² Thus, by the turn of the century, a consensus emerged that clean industrial housing was crucial for the maintenance of urban public health and the smooth functioning of the economy (Fig. 3.1).

Once plague-induced panic had drawn attention to the hitherto-ignored need for clean industrial housing, the provincial and local governments initiated urban sanitation and housing schemes for the textile millworkers of Bombay. The government of Bombay established a new body—the City of Bombay Improvement Trust (BIT)—to plan urban renewal projects based on modern sanitary principles. The government of Bombay and the millowners themselves initiated some schemes of sanitary industrial housing.

The eventual failure of these experiments exposed the complexities of colonial bureaucracy and conflicts between local real estate interests and the colonial state, as Prashant Kidambi emphasizes in a recent analysis of the BIT’s activities.²³ The incomplete and inadequate execution of sanitary housing projects also reflected the inability of new schemes to transcend dominant patterns of urban development. Urban planning in Bombay was primarily designed to facilitate the city’s commercial and bureaucratic sectors and to provide healthy and comfortable living spaces for its British and Indian elites. These class-based patterns of urban growth were neither accidental nor unique to Bombay.²⁴ By the late nineteenth century, industrial cities across the world developed spatial arrangements similar to the European metropolises such as London and Paris. In industrial metropolises, laboring classes were huddled together in the underdeveloped city outskirts while the business and bureaucratic elites were concentrated in the main urban areas that were well-equipped with sanitation, transportation, and public health facilities.²⁵ This chapter documents that in Bombay, the specter of plague momentarily invalidated this dominant pattern of urban growth, but as the epidemic-induced urgency decreased, procuring funds for industrial housing and sanitation increasingly became more challenging. By the late 1920s, the enthusiasm to house the laboring classes in healthy conditions subsided into desperate attempts to minimally accommodate the consistently expanding working-class population. The pragmatic desire to have a stable working class housed in healthy surroundings could not displace the dominant patterns of urban planning.

THE SPATIAL LAYOUT AND MUNICIPAL ADMINISTRATION OF BOMBAY

Sir Edwin Arnold visited Bombay in 1886 after an absence of more than three decades and found its growth extraordinary. A British author and principal of the Government Sanskrit College of Poona during the 1850s, he commented that “I left Bombay a town of warehouses; I find her a city of parks and palaces.”²⁶ His observation captured the elegance of the elite neighborhoods of Bombay City, where the colonial and indigenous groups with access to resources resided.²⁷ But it ignored the inconvenient fact that in the late nineteenth century, the majority of Bombay’s population—its laboring poor—lived in crowded, unplanned, and unsanitary localities.

The growth of Bombay as an industrial and commercial center in the late nineteenth century significantly shaped its residential patterns and the attendant spatial distribution of disease and mortality. Bombay did not adopt the typical pattern of a colonial city, which created a colonial/indigenous dualism. Instead, its urban spatial arrangements were, like those in other industrial cities throughout the world, marked by class segregation, as Amar Farooqui has argued.²⁸ During its transformation from a port city into a thriving business and industrial center in the late 1800s, the class-based spatial pattern of Bombay became increasingly pronounced. In the late eighteenth century, the harbor-facing south-eastern tip of the island, known as the Fort, became the center of business and administrative activities. Its proximity to the docks and to two prominent bazaars encouraged different European and Indian subgroups to reside in different parts of this area. Spacious living quarters for the European and Indian elites were developed here, and petty indigenous traders and laborers lived in the congested alleys at the fringes of the Fort.²⁹ Until the early nineteenth century, the central and northern parts of the island were used primarily to grow crops: various palms (coconut, date, and “liquor-yielding trees of brab,” or *tad*) and rice.³⁰ Thus, the administrative and business activities of Bombay were mainly confined to the Fort, creating one of the most congested areas of the city.

A devastating fire in February 1803 that destroyed most buildings in the Fort provided an opportunity for colonial authorities to relocate some sections of the Indian population. S. M. Edwardes, a British Indian Civil Service officer in Bombay, pointed out that after the fire of 1803, the government of Bombay sought to obstruct further expansion of native

buildings in the Fort area and thereby to segregate the races by locality.³¹ Citing Calcutta and Madras, the government of Bombay and the town committee appointed to investigate the causes of the fire recommended the creation of a black or native town outside the boundaries of the Fort for the Indian population. However, wealthy Indians, who had been important participants in the commercial development of the city, successfully resisted that project and continued to own property and live in the Fort area.³² Neither could the European business and administrative elite totally exclude wealthy Indians from the newly developed, spacious suburbs to the west of the Fort. By the 1820s, some of these localities, like Cumballa Hill and Malabar Hill, had become elegant, spacious residential areas. In the early decades of the nineteenth century, when the Fort became an overcrowded and bustling center of business and administrative activities, colonial elites gradually moved to these new localities.³³ Although the European presence was dominant, affluent Indians such as Framjee Cowasjee, a Parsi trader, and Hormusjee Cursetjee, another Parsi and a prominent landowner in Bombay, possessed substantial property in these neighborhoods.³⁴ They built blocks of apartments in these sea-facing localities and rented them out to British and Indian professionals and businessmen.³⁵ Therefore, the racialization of urban space in Bombay remained informal and fluid, and what emerged as the native town housed mainly the emerging middle and lower classes.

Meanwhile, expansion of work in the dockyards, along with railroad building and the land-reclamation schemes of the 1840s and 1850s, created a demand for labor that resulted in a substantial demographic development.³⁶ According to the city census of Bombay, the population had risen from 234,032 in 1833 to 566,119 in 1849.³⁷ Since most economic activities were centered on the Fort area and transportation facilities were limited, most of the incoming laboring population settled in the increasingly overcrowded quarters of a haphazardly developed native town. They were concentrated in central and northern localities such as Nagpada, Chakala, Mandvi, Kamathipura, and Kumbharwada.³⁸

The establishment and rapid expansion of cotton textile mills from the early 1850s further worsened sanitary conditions in Bombay. Land prices in the Fort and its neighboring native town had increased considerably. Consequently, textile mill factories were established in the northern outskirts, in the hitherto rural and marshy lands of Parel, Tardeo, Chinchpoochly, Sewari, and Tarwadi.³⁹ Because there were no transportation facilities, the migrant millworkers of Konkan and Deccan gradually

settled near the mills. In the 1860s, commercial activities increased, especially in the cotton trade because of the American Civil War, and this further stimulated the demand for labor, and immigrant laborers from adjoining villages huddled together in the already overcrowded quarters of these localities.⁴⁰ Here, they lived in “dangerously constructed, overcrowded slums or *cadjun* huts built only a few inches above the damp ground in close proximity to the milch-cattle stables.”⁴¹ Defective drains and sewers contaminated drinking water, causing diseases such as cholera, dysentery, and unspecified fevers while overcrowding accelerated the spread of contagious diseases such as cholera and smallpox.⁴² From the 1870s on, the population density of the northern neighborhoods grew consistently.⁴³ The 1901 census of Bombay City documented the increased population density in the northern E, F, and G wards where mills were concentrated.⁴⁴ Consequently, the emergence of the cotton mills not only stimulated the construction of factories in these localities but also resulted in the frenetic building of the working-class dwellings known as chawls.⁴⁵ The construction of these tenements benefited the private owners of these buildings. They built chawls primarily to make profits through rents and paid minimum attention to sanitary provisions for ventilation, drainage, and sewers.⁴⁶ The unpaved roads, the lack of adequate drainage and sewers, the unchecked smoke from the mills, and the overcrowding of workers’ quarters exposed these localities to a range of diseases.⁴⁷ However, despite the city’s large industrial labor population, the government of Bombay and the millowners rarely attempted to provide healthy, habitable surroundings. Similarly, the city’s municipal corporation, the body responsible for maintaining sanitation and health, made negligible efforts to improve the situation.

The municipal administration of Bombay took shape alongside the expansion of the city’s commerce and industry, its growing population, and the consequent demands for a civic infrastructure to support them. Until the late eighteenth century, the governor (or president) of Bombay Presidency and his council conducted the rudimentary urban administration of Bombay through chosen individual officers of the British East India Company (EIC).⁴⁸ These officers’ duties combined judicial administration with the sanitation management of the city.⁴⁹ To improve this preliminary arrangement, the Royal Charter of 1726 authorized the president to appoint a British-style mayor’s court with nine aldermen (seven Europeans and two Indians) to assist the governor in local administration. Two years later, the mayor’s court was established, with

William Henry Draper as the first mayor. Even this body performed a variety of functions—civil, criminal, municipal, and ecclesiastical. A separate body to organize the public health and sanitation matters of Bombay was still lacking.⁵⁰

To resolve the persistent problems of sanitation and conservancy, in 1792, the governor in council appointed the justices of peace. The justices of peace included both Europeans and Indians who were authorized to hire staff for the cleaning and maintenance of streets and to levy urban property taxes to generate funds for these purposes.⁵¹ However, the council did not specify any rules for conservancy and sanitation. The fire of 1803 stimulated more systematic urban governance; subsequently, in 1808, the council created a bench of twelve justices. A series of regulations passed during the next two decades charged this body to supervise sanitation and to assess and collect taxes.⁵² The same regulation also created three magistrates from among the justices to conduct the city's judicial and police matters. In 1815, the governor in council appointed a city collector to levy taxes. The allocation of the responsibilities of civic affairs was still vague, leaving much space for friction between the bench of justices and other local authorities, such as the Court of Petty Sessions that supervised civic administration alongside the bench of justices. Despite creating the bench of justices (a separate body), the governor was unwilling to allow the justices full executive power over local revenues and expenditure. This resulted in tensions between the justices and the governor over issues such as the bills of conservancy and the cleaning and lighting of streets.⁵³ Not surprisingly, these frictions adversely affected the execution of any sanitation and conservancy plans, and "it was felt that a better system must be devised for the sanitation and development of the growing town."⁵⁴

In 1845, an act established the Municipal Conservancy Board, which consisted of one magistrate, the collector of Bombay, and five justices of peace—three Indians and two Europeans. This body was responsible for creating and maintaining drainage, street cleaning and watering routines, conservancy, and law and order. The act also created a separate municipal fund that included all taxes collected in the city and placed it under the control of this new body. The justices of peace were to monitor the collection of taxes and the work of the magistrate and collector.⁵⁵ During the decade of its functioning, the Municipal Conservancy Board faced criticism from both the justices and the Court of Petty Sessions for its inefficiency and its high expenditures, which often exceeded the

collected municipal revenues. These complaints stimulated the replacement of the board with a Triumvirate of Municipal Commissioners in 1858.⁵⁶ The lack of a clear division of power among the three commissioners slowed down their plans to build sanitation and civic infrastructure. The administration of the triumvirate could not match the needs of a consistently expanding city.

The government of Bombay, with the consent of the justices, ended this unsuccessful experiment in 1865 and created the Bombay Municipal Corporation (BMC) to take its place. The justices constituted the body of the BMC, which was led by an executive head (a municipal commissioner who was appointed by the provincial government for a three-year term). This body had the power to impose and collect taxes and control the municipal fund. It was responsible for managing public health and sanitation in the city.⁵⁷ The act also created a municipal health office, staffed by a health officer who was a qualified medical practitioner. This health officer was to supervise the sanitation and health affairs of the city. The governor of Bombay nominated a chairman to preside at the quarterly meetings of the corporation.⁵⁸ A subsequent act, the Municipal Act of 1872, established a town council and introduced the elective principle. Of the sixty-four members of the BMC, thirty-two were directly elected by the propertied taxpayers, sixteen were nominated by the governor, and sixteen were nominated by the justices of peace.⁵⁹ All these changes facilitated the development of Bombay.

Efforts to improve the civic infrastructure, however uneven, began in earnest in the 1850s, when the municipal body was still taking shape. Before this period, not only the native town but also the Fort and even the elite western suburbs lacked adequate drainage and a supply of clean water.⁶⁰ In the 1850s, the municipal body contributed to the construction of the artificial Vihar Lake to ensure a supply of clean water to Bombay. Although the water from this source proved inadequate for the growing laboring population, this project was remarkable for creating a network of cast-iron pipes to supply water.⁶¹ In 1865, Dr. Hewlett, the first health officer of the municipality, advocated building a more hygienic system of conservancy and persuaded the municipality to employ a bigger army of scavengers to clean its roads and sewers.⁶² In 1878, the BMC began a drainage extension project in south Bombay. By 1884, it had completed the expansion of sewers to the southern and southeastern areas of Bombay, including Queen's Road, Marine Lines, the Fort, Ripon Road, and Crawford Market.⁶³

These municipal achievements paralleled urban development projects sponsored by the government and by private organizations. During the 1860s, the provincial government constructed new roads and overbridges, primarily in the Fort areas and the western suburbs and in selected areas of central Bombay, such as Bhulleshwar and Dhobi Talao. At the same time, they repaired and widened old streets.⁶⁴ During the 1860s, Sir Bartle Frere, the governor of Bombay, inaugurated projects to construct office buildings, schools, colleges, and museums in the Fort area and in the sea-facing western parts of the city. These projects were funded by government revenues, generated through the raw cotton and opium trades. Frere employed British architects to design the new structures. The magnificent buildings of the government secretariat, the post office, the telegraph office, the high court, the Victoria Museum, and Elphinstone College were constructed during this period.⁶⁵ These projects, which facilitated the further growth of trade and industry, also improved the quality of life for Bombay's elites.

The wealthy Indian "cotton kings" significantly contributed to these urban developments. Premchand Roychand, a leading Hindu cotton merchant and banker of the 1860s, donated four lakhs of rupees to build the Bombay University library and a tower on the university premises. In the 1860s, the building of institutions such as the J. J. School of Arts and the Parsi hospital at Colaba are examples of the benevolence and resourcefulness of rich Indian traders and owners of cotton mills.⁶⁶ The municipality added to the splendor of Bombay. Apart from constructing roads and a drainage network, it created public gardens and extended streetlights into the southern and southeastern areas of the city.⁶⁷ In the late nineteenth century, Bombay's urban and commercial development symbolized progress under colonial rule and demonstrated how cooperation among the indigenous elites, the local administration, and the provincial colonial government could create wealthy and modern urban enclaves in a sprawling city.

Such impressive urban development, which did not permeate to the working-class areas, further accentuated the city's class-based spatial arrangements.⁶⁸ In 1875, the executive health officer reported that mill chawls were completely undrained and that workers' tenements were unconnected to the sewers.⁶⁹ The lack of adequate housing created desperate overcrowding.⁷⁰ In millworkers' chawls, it was common for seven to eight adults to share one single room and to use every inch of floor space for sleeping.⁷¹ The mill districts' undrained tenements and

streets became breeding grounds for highly contagious diseases.⁷² But the municipal authorities paid little attention to the report of the health officer. They seemed to be satisfied that at least the mills and their laboring population were not in the prime areas of the city. Both the provincial government and the Bombay Municipality were unwilling to create public health and sanitation facilities for the masses. Similarly, affluent Indian cotton merchants and millowners who sought to leave some monument of their financial success in the form of buildings and institutions were reluctant to provide basic amenities and sanitary housing to their laborers.

In 1896, the outbreak and rapid spread of plague to all sections of Bombay revealed that developing civic infrastructure only in particular areas of the city could adversely affect the health of all classes. A year later, Lord Sandhurst, the governor of Bombay, insisted that to prevent future epidemics, "the existing insanitary dwellings must come down or be altered and new dwellings that are constructed to meet sanitary requirements must be made."⁷³ The annual report of the British municipal commissioner endorsed these ideas, asserting that the environment of poverty, filth, and overcrowding induced disease, and demanding immediate actions by the government and millowners.⁷⁴ By the early twentieth century, there emerged in Bombay a new urban planning that claimed to be more attentive to the basic housing and sanitation needs of the city's poor. The City of Bombay Improvement Trust (BIT), the Bombay Municipality (BMC), the Bombay Millowners Association (BMOA), and the Development Department of the Government of Bombay were the four prominent bodies that assumed the responsibility of providing sanitary living for millworkers.

THE CITY OF BOMBAY IMPROVEMENT TRUST AND THE BOMBAY MUNICIPALITY

The concerns about millworkers' housing prompted the creation of the BIT in 1898. Endorsing the move, Lord Sandhurst declared that "the rehousing of the poorer classes is one of the most important and attractive provisions of the Bill. These people deserve our sympathy and assistance and we desire to place them in better houses."⁷⁵ The BIT, which was autonomous from the municipal corporation, was specifically authorized to raze unsanitary working-class dwellings⁷⁶ and to construct sanitary dwellings for the poor.⁷⁷ Its board had thirteen trustees and a

chairman. The BMOA, the Port Trust, the local Chamber of Commerce, and the provincial and municipal government nominated the fourteen BIT trustees, and the government of Bombay named a provincial official as its chairman.⁷⁸ The BIT received a one-time cash grant from the government of Bombay and a share in the municipal revenues through an annual financial contribution from the BMC. To enable the BIT to achieve its mandate, the government and the BMC handed over their vacant land plots to the BIT so that it could construct new buildings and generate revenues for its own expenses.⁷⁹

Some of the BIT's early schemes included razing unsanitary slums and building clean chawls in Nagpada and Agirpada (two working-class localities in E ward) and in the mill district of Parel (in F ward).⁸⁰ The schemes in Nagpada and Agirpada began in November 1899. The *Sanj Vartaman*, a Parsi-owned, Anglo-Gujarati daily Bombay paper, commented enthusiastically that "we are glad that the City Improvement Board have taken the first step to redeem Lord Sandhurst's promise that the condition of the laboring and poor classes shall have the first claim on the attending of the Trustees."⁸¹ But the activities of the BIT were not confined to providing sanitary housing to the working classes. During the first ten years of its existence, it launched ambitious schemes for building thoroughfares in south and central Bombay to improve the communication and the movement of people.⁸² The Trust was also empowered to develop residential localities in suburban areas and to construct connecting roads to encourage migration from the crowded working-class areas.⁸³

Numerous bureaucratic and political complications hampered the BIT's ambitious schemes. Prashant Kidambi argues that in spite of the initial enthusiasm and proclaimed goals, the chairman and the members had little understanding of how the BIT could achieve its enormous mandate of improving lower-class housing and sanitation in such a populous city.⁸⁴ From the outset, the BIT was entangled in bureaucratic and legal problems that adversely impacted its functioning. Its administrative structure was unable to cope with the large volume of paperwork that its schemes generated. In addition, the BIT expended considerable energy in addressing opposition from landlords whose property it planned to demolish to make way for the construction of new accommodations. Under the provisions of the Land Acquisition Act of 1894, if acquisition was necessary for its improvement schemes, the BIT could legally acquire the property of private individuals after due notification.⁸⁵ To resolve the

contentious issues of acquisition and compensation, the Improvement Trust Act provided for the appointment of a tribunal of appeal.⁸⁶ From 1899 onward, property owners of Bombay organized meetings and circulated petitions to resist the acquisition plans of the BIT,⁸⁷ and these controversies significantly derailed the BIT's efforts.

Despite these obstacles, the BIT completed its schemes of widening and constructing the arterial road system.⁸⁸ By 1910, it had improved the road networks of the comparatively well-developed localities of Cumballa Hill, Malabar Hill, and Chowpatty by constructing Princess Street and Sandhurst Road.⁸⁹ It had completed a thoroughfare from Back Bay to Cumballa Hill and Breach Candy that "opened up a large area for the construction of better-class residents."⁹⁰ These projects sapped the resources of the BIT. In 1913, Ibrahim Rahimtoola, a member and former chairman of the BMC and a trustee of the BIT, criticized the BIT for spending more than half of its total resources on constructing new roads and improving communication in south Bombay while paying little attention to its industrial housing projects.⁹¹ The Bombay Development Committee, appointed in 1913 by the provincial government to evaluate urban progress in Bombay City, reiterated that the BIT had invested significantly more resources to build roads than to construct sanitary dwellings for the millworkers and dockworkers.⁹²

Even the limited industrial housing schemes carried out by the BIT reflected poor planning and inadequate execution, and some actually intensified the problems of working-class housing. Although the BIT was building its model chawls in Nagpada, it made no arrangements for the poor inhabitants evicted from the slums.⁹³ In 1902, after declaring thirty-nine chawls in Nagpada, a locality in E ward, as unfit for human habitation, the BIT demolished them and constructed sanitary and well-ventilated dwellings.⁹⁴ However, as J. P. Orr, a government official and appointed chairman of the BIT, accepted, the Trust had demolished more chawls than it could reconstruct.⁹⁵ By 1909, the Trust had evicted about fifty thousand chawl dwellers and had built only 2,800 rooms, which could house approximately ten thousand adults.⁹⁶ The Bombay Development Committee documented that the BIT's policy of acquiring building sites and razing unsanitary dwellings without making alternate arrangements for residents had rendered large numbers of the laboring-class population homeless, forcing them to share rooms in the already crowded neighboring chawls or houses.⁹⁷ Indiscriminate demolition of buildings caused "congestion and insanitation and helped to increase

rents and consequently the value of landed property in Bombay went up.”⁹⁸

The Bombay Improvement Trust Act of 1898 had enabled the BIT to acquire land not only from the BMC and the provincial government but also from private landowners,⁹⁹ and by 1917, the BIT controlled about one-tenth of Bombay’s total area. However, about two-thirds of this land was unused. Large tracts of BIT land in the industrial areas, such as Agirpada, Dadar, and Sion, were left underdeveloped.¹⁰⁰ This situation contributed to rising land values, and house rents increased even more rapidly.¹⁰¹ The demolition of unsanitary chawls by the BIT had actually generated a greater demand for accommodations, leading to an increase in overcrowding.¹⁰² Working-class people shared their living spaces to cope with rising rents and the inadequacy of accommodations. The persistent crunch of resources, as well as the partial deployment of available funds, exacerbated the problem.

Pherozshah Mehta, a prominent leader of the Indian National Congress in Bombay, reiterated that the BIT had “done more to provide housing accommodation for the well-to-do than the poor.”¹⁰³ In 1903, J. A. Turner, the municipal health officer, had suggested that the BIT ought to provide rooms for at least a hundred thousand working-class people. Fifteen years later, he complained:

The suggestion was not taken up because it was stated that the expenditure would be one crore of Rupees; [however] other schemes were developed. 50 lakhs have been provided by the government of India for improvement schemes and 4 lakhs paid by the Government of Bombay while the Corporation during that time has contributed a crore of Rupees to the Improvement Trust but still these filthy areas remain.¹⁰⁴

The municipal health officer blamed the BIT for using most of its resources in building “large and expensive” rental housing, unaffordable for factory workers.¹⁰⁵ Significantly, in 1913, J. P. Orr had admitted that the BIT’s improvement and housing plans in Nagpada, Mandvi, Sandhurst Road, Princess Street, and Gamdevi mainly provided accommodation for the lower- and middle-level police and railway professionals, clerks, and petty traders.¹⁰⁶ The BIT had developed land in certain areas north of the Fort such as Dadar and Matunga as housing for the middle classes.¹⁰⁷ All these plans were geared to reduce congestion in the thickly populated localities of the Fort and its adjacent areas.

In contrast, the projects of creating sanitary dwellings for the working classes were implemented slowly and inadequately. In 1898, the BIT was initially granted Rs. 75 lakh for its industrial housing schemes. By 1909, it had spent approximately Rs. 15 lakh for this purpose.¹⁰⁸ Citing anticipated losses, the trustees lamented that the goal of housing an expanding working-class population was too ambitious and expensive, considering the high cost of land and construction.¹⁰⁹ To avoid the possible financial damages, the BIT slowed down its schemes for sanitary chawls, failing to use even the sum allocated for this purpose. Between 1900 and 1915, the BIT had built a total of 4,234 rooms in chawls for the poorer classes, which could house about 13,936 people.¹¹⁰ Considering that in 1915 the total number of millworkers alone was about 115,000, the available facilities were absolutely insufficient.¹¹¹

In 1913, during the proceedings of the Bombay Development Committee, Orr argued that to make the chawl rooms affordable for factory workers, the BIT had to keep the rents low, which meant low returns on its investments. He insisted that the schemes of working-class housing were highly unprofitable ventures and required serious reconsideration.¹¹² Joseph Baptista, a municipal councilor and an activist of the Social Service League, countered Orr's perspective. He argued that even if such projects were financially unprofitable, they should be continued on humanitarian grounds.¹¹³ Four years later, in his memorandum to the Indian Industrial Commission, Arthur Edward Mirams, consulting surveyor to the government of Bombay, also criticized the profit-oriented attitude of the BIT, a public body:

The Trust are confronted with the question as to how far it would be right for them to incur loss on schemes which provide for better housing of the poorer classes. . . . in spite of the objections raised by economists that this would practically amount to subsidizing employers out of public funds. [But] if this argument was carried to its logical conclusions, then no public authority is justified in spending money which benefits the individual at the expense of the public.¹¹⁴

Not only the reluctance to bear the financial responsibility but also mounting frictions between the two local bodies with overlapping responsibilities, the BIT and the municipality, obstructed the execution of industrial housing and sanitation projects.

From the inception of the BIT in 1898, some prominent Indian BMC members perceived the formation of this separate body as unnecessary.¹¹⁵ Municipal councilors such as Pherozshah Mehta and D. E. Wacha argued that the BIT diverted municipal funds and threatened to undermine the BMC's role in the maintenance of sanitation and public health.¹¹⁶ In response, the BIT claimed that regulations such as the municipal building bylaws condoned the proliferation of unsanitary chawls. In a lecture delivered at the second All India Sanitary Conference in Madras in 1912, J. P. Orr argued:

Our problem of how to prevent more insanitary dwelling rooms from coming into existence can never be solved so long as the Municipal Act and Bye Laws remain as they are. . . . They do not provide for there being outside each room sufficient air space free of buildings and open to the sky for the lighting and ventilation. . . . There is nothing in the Municipal Act or Bye Laws requiring a house owner to limit the height of his house in consideration of the extent to which the height interferes with lighting and ventilation of the house itself or of house adjacent to it. This growing evil is annually adding to the number of insanitary one room tenements in Bombay.¹¹⁷

A year later, in their evidence to the Bombay Development Committee, J. F. Watson, an engineer in the Improvement Trust, and J. P. Orr reiterated that to create sanitary working-class tenements, municipal building bylaws required immediate amendments.¹¹⁸

The municipal bylaws did not prescribe any standards about ventilation, sanitation, or the prevention of overcrowding, and consequently they allowed ample latitude to private builders to save on their building costs.¹¹⁹ In 1905, the Bombay Municipality had amended its building bylaws of 1888, but even this amendment was ineffective in checking the haphazard construction of chawls.¹²⁰ Discussing local politics in colonial Bombay, Jim Masselos has shown that the Indian municipal members were hardly uniform in their political opinions. They articulated the diverse and sometimes conflicting interests of the city's business and propertied classes.¹²¹ However, despite their divergent views, influential Indian municipal members such as Nowrozjee Furdoonjee, Mungaldass Nathoonbhoy, D. E. Wacha, and V. N. Mandlik resisted the provincial government's efforts to raise property taxes.¹²² It is possible that their economic interests kept some municipal members from restricting the private builders of chawls.

The expansion of trade and industry in Bombay and the demands for accommodations created by the growing population had resulted in frenzied private investments in land and housing.¹²³ Prominent Parsi industrialists such as D. M. Petit, of the Petit group of textile mills, and Beramji Jijibhai and Mungaldass Nathoonbhoy, who were prominent businessmen, ventured into real estate and chawl-building projects.¹²⁴ Because of their predominance in finance, industry, and the BMC, businessmen and builders could bend municipal policies regarding building construction to suit their own interests.¹²⁵

However, as the *Sanj Vartaman* remarked, the lack of stringent building bylaws had become convenient grounds for the Trust “to shelve its sanitary chawl construction plans and claim that any new chawls would soon become unsanitary slums if built under the flawed existing by-laws.”¹²⁶ The BIT demanded greater accountability from the private owners of chawls who benefitted from inadequate building bylaws. In his evidence to the Bombay Development Committee, J. P. Orr insisted that the private owners of chawls should share the cost of sanitizing the chawls identified as unsanitary and “Unfit for Human Habitation.”¹²⁷ Since builders accrued profits from rents, they must provide adequate sanitary provisions.¹²⁸ Orr prescribed stringent actions against the “greedy and irresponsible” landlords who had neglected the maintenance of their chawls.¹²⁹

In response, municipal councilors Pherozshah Mehta and Ibrahim Rahimtoola reminded Orr that the BIT was constituted precisely because private landlords had failed to implement sanitary provisions in their chawls, and that the body could not simply transfer its responsibility onto the private builders.¹³⁰ Another Indian councilor, Vasantrao Anandrao Dabholkar, who served as the chairman of the BMC from 1921 to 1922, defended private enterprise and claimed that the northern part of Bombay was making “steady and progressive development independently wrought by private enterprise and private means.”¹³¹ He postulated that the land-acquisition policies of the BIT contributed to overcrowding, as they blocked access to available land in the northern suburbs and frustrated the future chawl construction projects of private builders.¹³² This bickering severely obstructed the sanitation and industrial housing projects while the two groups’ overlapping responsibilities stunted the expansion of sanitary infrastructure.

In 1910, in a letter to the municipal commissioner, J. A. Turner, the health officer, lamented that, because of the inadequate implementation

of sanitary regulations, “the north of the island has become a jumbled mass of badly built houses without any proper system of roads and drainage.”¹³³ Turner claimed that regulations such as Sections 291 and 296 empowered the BMC to provide underdeveloped areas, including mill districts, with sewers and paved streets. However, in response to the health department’s recommendations, the BMC emphasized that since 1898 the BIT had been responsible for developing these areas.¹³⁴ A few years later, in 1918, Turner emphasized that the continued lack of sanitation in the northern parts of Bombay was directly linked to the existence of two local bodies that failed to cooperate with each other:

The Improvement Trust does nothing because it would be a financial loss. The Corporation do nothing because they say it is the duty of the Improvement Trust and they have no power and will not ask for extra powers while the Trust is in operation. . . . These authorities whose duty it is to carry out these obligations accuse the large employers of labour and the owners of property for not providing better accommodation for their employees.¹³⁵

Indeed, the BIT, and most notably its chairman, J. P. Orr, had bluntly told the Bombay Development Committee that the task of providing clean industrial housing was enormous and that millworkers “will ultimately be adequately provided for in chawls erected by millowners.”¹³⁶ However, the anticipated cost kept most millowners from assuming this responsibility.

THE BOMBAY MILLOWNERS AND THE BOMBAY DEVELOPMENT DEPARTMENT

In the aftermath of the plague, a few millowners, most prominently N. N. Wadia and J. N. Tata, had emphasized the responsibility of employers in improving workers’ living conditions.¹³⁷ By 1898, two Parsi millowners, Wadia and M. J. Petit, began providing chawl tenements to their workers.¹³⁸ Such initiatives were limited, and most millowners avoided the financial burden of providing housing facilities to their employees. In his evidence to the Indian Factory Labour Commission of 1908, Vithaldas Thackersey, the chairman of the Bombay Millowners Association, acknowledged that workers’ dwellings were “veritable death traps.”¹³⁹ At the same time, however, he asserted that the responsibility

for clean housing lay with the BIT, a body specifically created for this purpose. Thackersey found it “absurd to suppose that millowners would cooperate in a scheme which would entail upon them a loss of Rs. 6 to Rs. 9 per annum for every room.”¹⁴⁰ Millowners reasoned that since the provincial and municipal governments claimed the profits of the textile industry through various taxations, they must bear the cost of improving workers’ living conditions.¹⁴¹ Although some millowners such as Petit agreed to collaborate with the BIT, they unanimously opposed any mandatory obligations to provide housing for their workers.¹⁴²

In 1913, an amendment to the Bombay Improvement Trust Act of 1898, known as the “Poorer Classes’ Accommodation Scheme,” sought to facilitate the cooperation between the BIT and the millowners.¹⁴³ The legislation enabled the BIT to finance tenement-building schemes for employers. This scheme required the millowners or other employers of labor to deposit 20 percent of the total cost of a planned chawl construction with the BIT. The BIT was responsible for planning and building the chawls, which the employers could eventually rent out to their workers. Millowners were expected to pay the balance of the capital cost, with interest, to the BIT within a period of twenty-eight years.¹⁴⁴ Unfortunately, this “excellent arrangement” generated little enthusiasm among millowners.¹⁴⁵

In 1913, in his testimony to the Bombay Development Committee, Cowasjee Jehangir, a prominent local nationalist leader who financed some mills in Bombay and the Tata steel industry of Jamshedpur, described the scheme as implausible:

Although the Improvement Trust Act has been amended so as to enable millowners to build chawls for their work people with capital borrowed from the Trust, I am afraid it is hopeless to expect much relief in this direction. The majority of the mills in Bombay have a capital debt, and are not in a position to try an experiment. . . . The housing of the poorer classes was and ought to be the main objects of the Trust.¹⁴⁶

The scheme required millowners to adhere to the chawl building plan that the BIT provided. In 1917, C. N. Wadia, the representative of Century Mills, conveyed to the Indian Industrial Commission that the BIT’s building plans required them to follow certain standards of ventilation and sanitation, provisions that inevitably increased the cost of construction.¹⁴⁷ Not surprisingly, only one mill—the Spring Mills of the



Fig. 3.2 Spring mills improvement trust chawl. *Source:* A. R. Burnett-Hurst, *Labour and Housing in Bombay: A Study of the Economic Conditions of the Wage-Earning Classes in Bombay* (London: P. S. King, 1925)

Wadia family—used this scheme to provide rooms for their workers, and even they complained about the high cost of construction.¹⁴⁸ The rising cost of building materials during the First World War further dissuaded millowners from investing in housing schemes (Fig. 3.2).¹⁴⁹

The laments over cost seemed contradictory, especially during the First World War period. Since the war had disrupted British cotton textile production, Indian mills had new opportunities to supply both the domestic and international markets. Increasing military demands further stimulated production.¹⁵⁰ The BMOA itself acknowledged that the year 1917 “had been one of unusual prosperity for the industry.”¹⁵¹ Reluctant to allocate a share of their profits for workers’ welfare, the millowners insisted that “it is no business of the employers to house their workers. It is the duty of the government to do so.” Consequently, the millowners’ provision of industrial housing was very limited.¹⁵²

A survey conducted during the proceedings of the Indian Industrial Commission between 1916 and 1918 found that only seven of the eighty-five mills in Bombay made partial housing arrangements for their workers.¹⁵³ Although they employed about ten thousand workers, the

Petit group of mills had built about 430 tenements—a number adequate to house only a small segment of workers. The Morarji Goculdas Mills employed about 3,262 hands, yet provided only thirty-two tenements that could house barely 264 people.¹⁵⁴ Most millowners and managers who were interviewed during the Industrial Commission's proceedings reiterated that the lack of affordable land in the vicinity of mills and the high costs of building materials discouraged them from investing in building projects.¹⁵⁵

Meanwhile, the problems of overcrowding and insanitation in mill neighborhoods had risen exponentially. Despite the increasing demand for working-class housing during the First World War, the number of Improvement Trust chawls increased only slightly during the late 1910s.¹⁵⁶ In 1917, J. A. Turner recorded how the wartime influx of population had created debilitating pressure on the already overcrowded dwellings and abysmal sanitation of the city's working-class neighborhoods.¹⁵⁷ He asserted that laborers' housing needs demanded immediate attention from the employers as well as public bodies such as the BIT, because the shortage of adequate housing threatened the public health of Bombay.¹⁵⁸ But Turner himself admitted that financial pressures during the war stymied housing and sanitation projects.¹⁵⁹ Because of the war, public bodies and sanitary authorities could not raise sufficient loans to meet the capital expenditure on housing and sanitation schemes.¹⁶⁰

While the construction of working-class dwellings remained limited, the continuous demographic growth in Bombay spawned even greater overcrowding. Between 1911 and 1921, the population increased from 979,445 to 1,175,914.¹⁶¹ As the census reports documented, the E, F, and G wards accounted for the majority of this growth.¹⁶² The Indian Industrial Commission of 1916–1917 reported that in the mill districts, “in every room two or three families are huddled together, generally numbering 10–15 persons excluding children.”¹⁶³ In his widely cited study on labor and housing conditions in Bombay, written based on his observations between 1916 and 1925, A. R. Burnett-Hurst, a professor of economics at Allahabad University, claimed that the cramped chawls of the city “warehoused” workers and their families rather than housed them.¹⁶⁴ He revealed that in Parel, a prominent mill district, 97 percent of inhabitants lived in one-room tenements (chawl rooms were approximately 100 square feet); an average of 3.5 persons per room was common, and in extreme cases, there might be thirteen to fifteen workers

crowded into a single room, sharing their washing and bathing spaces with the other residents of the chawl.¹⁶⁵

A 1922 report by Dr. Florence Barnes documented similar situations. In response to the 1919 Draft Convention meeting in Washington that spawned the establishment of the International Labour Organization, the government of Bombay appointed Dr. Barnes, a member of the Women's Medical Service in India, to survey the living conditions of women millworkers in Bombay. Her short and shocking report, based on surveys conducted in 1922, revealed that "in one room measuring some 15 ft [*sic*] × 12 ft I found six families living. On enquiry, I ascertained that the actual number of adults and children living in this room was 30 . . . This was one of many such rooms I saw."¹⁶⁶ A year later, a study published by Janet Harvey Kelman recorded that in millworkers' chawls, washing and bathing places were practically situated on the open drains, with only one water pipe serving as many as sixty families.¹⁶⁷ Kelman lamented how "hens, chickens, children, and dogs" moved around together amid "heaps of rubbish."¹⁶⁸ Both Kelman and Dr. Barnes argued that the dark, cramped, and unsanitary dwellings particularly affected women and children.

The single-room chawl served as both a sleeping area and a kitchen, and the pungent smoke from the hearth vitiated the atmosphere of the room where the dwellers also ate and slept. Although men could sleep outdoors on the pavements and avoid the stuffy atmosphere of their rooms, the conventions of modesty compelled women "to sleep in the dark, unventilated room along with [other] women lodgers and relations and their children and her own."¹⁶⁹ Dr. Barnes revealed that the majority of mill women gave birth in these same dark, smoke-filled rooms.¹⁷⁰ Kelman reiterated that, considering the living conditions, "it is not to be wondered that infant mortality in Bombay is so high."¹⁷¹ These women investigators and their publications added to the demands for housing the laboring class in clean and healthy surroundings; housing was seen as a key component of the industrial progress of the nation and of the health and well-being of workers.

In his memorandum to the Industrial Commission (1916–1918), A. E. Miram, a surveyor with the government of Bombay, emphasized that "healthy and vigorous workers postulate [*sic*] good housing and the provision of the latter can no longer be indefinitely postponed if this country desires to compete on equal terms with other centers of the

world's commerce."¹⁷² Miram argued that "considering the benefits of good housing, it seems clear that a duty lies at the door of the employers as well as the local authority."¹⁷³ Since the meager efforts of the BIT and the millowners did not keep pace with the growing populations in workers' neighborhoods, the Industrial Commission urged the government of Bombay to adopt a program of industrial housing.¹⁷⁴ A year before, the GOI had made this recommendation to the government of Bombay.¹⁷⁵ Echoing Miram, Barnes emphasized that clean, well-planned housing facilities would ensure the "physical efficiency of the operative."¹⁷⁶ Since workers' vitality was directly linked to the production and profits of textile mills, she urged the concerned authorities "to notice the very pressing necessity of housing of their operatives in mill chawls."¹⁷⁷ Deploing the existing housing conditions for the textile millworkers of Bombay, Kelman indicated that only an increased cooperation between the local bodies and millowners and the initiatives of provincial government could resolve the problem.¹⁷⁸

In response, the government of Bombay agreed that, considering the increase in population in Bombay, there was a shortage of roughly 64,000 one-room tenements for the working classes.¹⁷⁹ (This figure was based on the assumption that an average single room was sufficient to house four to five people, and that the provision of 64,000 rooms would provide adequate housing for the working classes.)¹⁸⁰ Based on this estimate, in 1920, the government of Bombay hesitantly introduced an ambitious scheme of industrial housing that aimed to construct fifty thousand chawl rooms, at an estimated cost of Rs. 5.5 crores.¹⁸¹ During this same year, the government of Bombay established a Development Department (DD) to supervise these chawl-building schemes.¹⁸² The DD was expected to construct 625 chawls for working-class families over a period of eight years.

By 1925, the DD constructed 207 chawls containing a total of 16,524 rooms in the E ward localities of Naigaum, Worli, Sewari, and DeLisle Road.¹⁸³ However, these chawls were unpopular because of their high rents. The high cost of land and construction materials meant that the government would have to bear a financial loss in order to reduce the rents. Since the government was unwilling to subsidize the rent, these chawl rooms rented for Rs. 9 to Rs. 11.80 a month.¹⁸⁴ In the 1920s, rents in privately owned chawls were between Rs. 3 and Rs. 4 per room per month; the rates for Development Department (DD) chawls were unaffordable in comparison.¹⁸⁵ In 1925, workers rented only about a

third of the available DD chawl rooms, and the remainder were vacant. Consequently, the scheme suffered a major financial loss.¹⁸⁶ A special advisory committee to consider the issue of industrial housing was appointed in 1924, and it submitted its report in 1926; Joseph Baptista, a member of the committee, recommended that, rather than leaving the rooms vacant, the rents should be reduced to make them affordable for workers. He argued that this would also enable the DD to earn at least some return on their investment.¹⁸⁷ Disregarding this suggestion, the advisory committee interpreted the non-occupancy of DD chawls as indicating a decline in demand for industrial housing and decided that the government should cease the building of more chawls.¹⁸⁸

The claims about diminishing demand contradicted the data on industrial housing provided by government agencies and individual observers. Appointed to examine the conditions of Indian factory, mine, dock, and railway workers, the Royal Commission of Labour in India (RCLI), which was extant from 1929 to 1930, reported significant crowding and unsanitary conditions in millworkers' chawls.¹⁸⁹ Lecturing on the "evils which afflict millworkers of Bombay," Dr. Harold Mann, a member of the RCLI in Bombay, graphically reported:

I never felt the meaning of the term "warehousing labour" as I did when I saw the chawls in Bombay. I found workers living 14 in a single room. The only thing in the past 20 years which has prevented Bombay operatives from dying out had been the fact that they slept generally in the open air.¹⁹⁰

In his testimony to the RCLI, R. R. Bakhale, the general secretary of the Bombay Textile Labour Union, insisted that workers were compelled to share their rooms because they could not afford available options such as the DD chawls.¹⁹¹

Reinforcing the earlier reports of A. R. Burnett-Hurst on industrial housing, the 1931 census documented that between 30 and 40 percent of the population in the mill districts shared their single-room tenements with six or more people.¹⁹² The decennial census figures of 1931 recorded that, barring a few areas inhabited by the elites, overcrowding affected almost every part of Bombay.¹⁹³ However, the most severely affected wards were E, F, and G, which were largely populated by millworkers.¹⁹⁴

Still, for the employers and the public bodies, the non-occupancy of DD chawls became a convenient excuse to renege on their commitment

to provide workers with adequate housing. When the Whitley Commission suggested that the provincial government should consider making working-class housing a statutory obligation for their respective improvement trusts, the BIT flatly rejected the suggestion. H. B. Shivdasani, the chief officer of the BIT, told the government of Bombay to disregard this recommendation because “a large number of chawls constructed by the Development Department are lying vacant, there is no need for any more accommodation for the poorer and working classes and as far as can be foreseen there is no likelihood of there being any need for such an accommodation for many years to come.”¹⁹⁵ By the 1930s, government programs to house workers in healthy, clean dwellings gave way to overt neglect and apathy. This indifference was reflected in the ownership of the chawls: private builders owned 54 percent of working-class dwellings, the BIT owned about 18 percent, the DD controlled 16 percent, and the millowners held only 4 percent.¹⁹⁶ The Textile Enquiry Committee of 1937–1938 noted that housing accommodation for millworkers had not kept pace with the demand and that the minimum amenities provided were still deplorably inadequate.¹⁹⁷

“WAREHOUSING” LABORERS IN “VERITABLE DEATH TRAPS”

The post-plague projects to improve the living conditions of workers were inadequate on several grounds. Significantly, all the schemes visualized working-class housing as a one-room tenement with shared lavatory and bathing spaces. The municipal bylaws required a minimum of 10 feet by 10 feet of floor space for any room used as a house.¹⁹⁸ The private owners of chawls provided rooms of this minimum measurement, where workers and their families lived, occasionally sharing the space with their relatives and friends. The BIT’s “model” chawls followed this same style of creating one-room tenements of 100 square feet per room.¹⁹⁹ Although the DD chawl rooms were slightly bigger at 16 feet × 10 feet, they aimed to house a family of four to five in each room,²⁰⁰ thereby ignoring the established standards of overcrowding that prescribed not more than two adult persons per room.²⁰¹

Even the chawls built with the stated intent of combating the problems of overcrowding and insanitation largely replicated the hastily constructed, dingy chawls of the private landlords. In 1923, discussing the housing projects of the DD, Sir George Lloyd, the governor of Bombay, had claimed that “the Development Department is not seeking to

provide palaces, but only clean and airy dwellings of the simplest and cheapest type possible in which plenty of light and air will be admitted.”²⁰² Ironically, the DD chawls faced severe criticism precisely for creating barrack-like structures and neglecting basic ventilation and sanitary provisions in their chawls. In 1923, Sherwood Eddy, a prominent member of the Young Men’s Christian Association (YMCA) of the United States, visited Bombay, where the YMCA had recently started its industrial welfare programs. Upon inspecting one of the DD chawls, he commented:

With great interest I visited the new model chawls for workmen. Viewed from a distance, they appeared at first sight pleasing to the eye but on closer examination, they proved not only a disappointment but unscientific, uneconomical and inhuman. They are mere boxes for the herding of hands. They are monstrous, sunless prisons for the dreary existence of the toilers.²⁰³

In 1926, in his minute of dissent to the advisory committee on industrial housing, A. N. Surve bitterly recorded how the earlier proposals to provide healthy living to the poor were now reduced to a calculation of the number of one-room chawls that were required. He further reminded the committee that the “housing project was undertaken not to supply a particular number of tenements but to provide *improved dwellings* to the working classes.”²⁰⁴ The government of Bombay’s advisory committee on industrial housing admitted that the DD chawls had open drains and a lack of adequate lighting and ventilation, which made them uncomfortable. Even so, the committee concluded that the chawls “afford exceedingly good accommodation for the class for which they are intended.”²⁰⁵

Moreover, regardless of who owned them, the sanitary conditions of chawls continued to be dismal, making workers susceptible to diseases. In 1919, J. A. Turner had reported that the insufficient water supply, defective drainage, overcrowding, and lack of ventilation in privately owned chawls created a fertile ground for diseases.²⁰⁶ The high rate of tuberculosis among millworkers was closely linked to their living conditions. In addition to the cotton fluff ingested inside the humid atmosphere of the mills, the workers’ filthy surroundings, the overcrowding of rooms, the housing’s sanitary defects, and the lack of light and ventilation all increased the incidence of tuberculosis among mill operatives.²⁰⁷ Turner lamented that any effort to improve the sanitary condition of

chawls encountered another set of problems; the chawls were in such bad shape that they could not take the weight of a water tank or a sewage pipe.²⁰⁸

Burnett-Hurst graphically recorded gross insanitation in privately owned tenements:

The privies were placed one above the other connected by a common shaft. It is through this shaft that the excreta of the scores of occupants are discharged and collected in the small basket receptacles on the ground floor. The sides of the shafts get fouled and the stench which is created is abominable. . . . Conditions are aggravated owing to the insufficient supply of conveniences. The municipal rules require one w.c. for every five tenements but this by-law is by no means universally observed.²⁰⁹

He insisted that the lack of sewers, the overflowing human excreta from the infrequently cleaned “basket privies” and the absence of lighting and ventilation provisions made workers’ neighborhoods “pestilential plague spots” and “excellent breeding grounds for malaria-carrying mosquitoes.”²¹⁰

In 1928, a report on malaria by Major G. Covell, an Indian Medical Service officer, revealed that cases of malarial fever in the mill districts were increasing. Acting upon the recommendations of a previous investigation of 1909–1910, the BMC had covered the wells in south Bombay, the primary cause of malaria in that area. Yet the mill tanks and cisterns, a cheap source of water to the mills, remained uncovered. In addition, the accumulation of water in the low-lying, undrained dwellings of the millworkers created fertile breeding places for mosquitoes, making the inhabitants more vulnerable to malaria.²¹¹ In his memorandum to the RCLI, Dr. Nusserwanjee Hormusjee Vakeel, a Parsi physician who had been associated with the Bombay mill industry since the 1910s, related that during the malaria season, between the months of May and December, the disease affected about 25 percent of the millworking population.²¹²

The few BIT chawls for workers had similar sanitation problems. In the 1920s and 1930s, the Social Service League conducted sanitation rounds, or inspections of the millworkers’ neighborhoods, which constituted an important aspect of their ameliorative activities. The subsequent chapter will analyze their sanitation and consciousness-raising programs in greater detail. It is pertinent to mention here, however,

that in 1922, during one such sanitation round, the SSL documented an absolute neglect of sanitation in a BIT chawl. Situated in Pivali Mandi in E ward, the chawl displayed several egregious sanitation violations:

The filth and the mud and the hellish conditions of the latrines with the drains overflowing with night soil create all sorts of worms. In this area, nowhere we found any spot which we could describe as clean. Everywhere we witnessed a state of things mostly injurious to all living beings.²¹³

The report graphically described the “choked-up drains,” the dirty “water closets,” and the extreme shortage of water taps in the chawls.²¹⁴ One participant woefully remarked that before visiting the chawls, “I wondered why mortality rates in Bombay are so high now I wonder why it should be so low?”²¹⁵ In response to the complaints, the BIT reiterated the enormity of the task and assured the SSL that they planned to improve the chawls in the near future.²¹⁶

In 1930, in her memorandum to the RCLI, Mrs. K. Wagh, an officer with the Bombay Labour Office, complained that even the few lavatories in the chawls provided by millowners lacked water and a flushing system, creating extremely unhygienic environments.²¹⁷ A few years later, in 1936, an SSL member on a sanitation round reported similar conditions:

The group of chawls owned by the Tata Mill Company did not appear to have been repaired for a number of years and were left in a most neglected condition, so much so that they appeared to be emerging out of antiquity. Most of the WCs flush were out of order. The whole structure was so weak that a kick on the flooring of the first floor creates a tremor in the whole building. One of the chawls on the western end was three feet high. . . . The sullage water at this end was undrained and was flowing in front of the malaria office of the municipality.²¹⁸

In most cases, the complaints about broken water closets and accumulation of rubbish received tepid responses from the municipality.²¹⁹

In 1936, a report about Kalachowki chawl, located in Parel, where about three thousand millworkers resided, revealed that the owner blatantly ignored even the meager municipal building bylaws. The report noted that

Most of the rooms which are 10'×10' have no windows and not a single closed bathrooms or even a small *nabani* [washing place] in any of the rooms, so people, even women and children have to bathe in the open. . . . Water taps are scanty and the flush are not working in most of the lavatories. The plot is on low level and there is no drainage, we leave it to the citizens to imagine what the plight of these poor people must be during the monsoon. All household sullage water and that from the improvised *nahanis* is being collected in the open breeding mosquitoes.²²⁰

This complaint, submitted in 1936 to the Bombay Municipality, was not considered until 1941. Even then, though the BMC only agreed to take small measures, such as putting waste bins in the chawl premises, it expressed its inability to persuade the private builders of chawls to make any structural changes.²²¹ Similarly, the BMC regretted that their limited resources did not allow them to improve the basic sanitary infrastructure of this chawl and of other such chawls. Their response concluded by saying that “there are worse slums in the city than Ambewadi, which require earlier attention. It would not be desirable therefore, to give precedence to this area for clearance.”²²²

CONCLUSION

The plague-induced anxiety of the last years of the nineteenth century created an opportunity for urban reconstruction in Bombay. Despite their claims of sanitizing and rebuilding the working-class areas of the city, the Bombay Improvement Trust failed to deliver a healthy living environment to the millworkers and other groups of laborers. The friction between the Bombay Municipal Corporation and the Improvement Trust postponed sanitation and chawl-building projects by both bodies. As the epidemic-induced urgency subsided, government bodies and millowners began trying to transfer responsibility for sanitary housing onto each other. The limited execution of industrial housing schemes and the uncritical acceptance of existing, single-room patterns of housing merely exacerbated the housing and sanitation problems of mill neighborhoods. The continued existence of haphazardly built unsanitary chawls made the *Urbs Prima in Indis* another example of unequal urban growth.

NOTES

1. J. A. Turner, *History of Plague in India: From 1897–1907* (Bombay: Times of India Press, 1907), 4.
2. W. F. Gatacre, *Report on the Bubonic Plague in Bombay, 1896–97* (Bombay: Times of India Press, 1897), 4; J. K. Condon, *The Bombay Plague: Being a History of the Progress of Plague in the Bombay Presidency from September 1896 to June 1899* (Bombay: The Education Society Steam Press, 1900), 130; S. M. Edwardes, *The Gazetteer of the City and Island of Bombay* (henceforth *City Gazetteer*), Vol. III (Bombay: Times of India Press, 1909), 175.
3. R. Nathan, *Plague in India, 1896–97*, Vol. I (Simla: Government Central Press, 1898), 133–38; M. E. Couchman, *Account of Plague Administration in the Bombay Presidency from September 1896 till May 1897* (Simla: Government Central Press, 1897), 72.
4. Condon, *The Bombay Plague*, 126.
5. Ibid., 125–32.
6. Quoted in R. Nathan, *Plague in India*, 107.
7. Condon, *The Bombay Plague*, 130.
8. *Report of the Municipal Commissioner on the Plague in Bombay for the Year Ending 31st May 1899*, Part I (Bombay: Times of India Press, 1899), 20.
9. Turner, *History of Plague*, 2.
10. *Proceedings of the General Department of the Government of Bombay*, Maharashtra State Archives (henceforth MSA), Vol. XIII, 1903, 88. Details of scientific research on plague prevention are documented in Nathan, *Plague in India*, 3–4.
11. Condon, *The Bombay Plague*, 130.
12. *Report of the Municipal Commissioner on the Plague in Bombay, 1899*, 17–19, 43.
13. *Indian Textile Journal* (henceforth ITJ), January 1897, 81.
14. *Annual Report of the Bombay Millowners' Association* (henceforth BMOA) 1897, 55.
15. Ibid.
16. *Annual Report of the Factory Inspector for the Town and Island of Bombay for the year 1899*, 8.
17. BMOA, 1897, 81.
18. *The Indian Spectator*, 2 January 1898, 11.
19. Ibid.
20. Ibid.
21. *The Indian Spectator*, 23 January 1898, 67.
22. ITJ, January 1897, 82.

23. Prashant Kidambi, *The Making of an Indian Metropolis: Colonial Governance and Public Culture in Bombay* (Hampshire, UK: Ashgate, 2007), 71–115.
24. Teresa Meade makes this point in “‘Civilizing Rio De Janerio’: The Public Health Campaigns and the Riot of 1904,” *Journal of Social History*, Vol. XX, No. 2 (Winter 1986): 301–22.
25. Some discussions on class-based urban social geography include: Gareth Stedman Jones, *Outcast London: A Study in the Relationship between Classes in Victorian London* (New York: Oxford University Press, 1971); and Judith Walkowitz, *Prostitution and Victorian Society: Women, Class and the State* (Cambridge: Cambridge University Press, 1980).
26. Quoted in S. M. Edwardes, *The Rise of Bombay: A Retrospect* (Bombay: Times of India Press, 1902), 327.
27. In colonial documents and contemporary accounts, the terms “Town and Island of Bombay” and “City of Bombay” appear interchangeably. I use the term “Bombay City” because “Town and Island” implies a primary focus on the eighteenth-century fortified town where administrative and commercial activities were centered. The term “city” is inclusive of the late nineteenth-century suburban expansion and the development of a municipal administration.
28. Amar Farooqui, “Urban Development in a Colonial Situation: Early Nineteenth Century Bombay,” *Economic and Political Weekly* (henceforth *EPW*), Vol. XXXI, No. 40 (5 October 1996): 2750.
29. Edwardes, *Rise of Bombay*, 191–92.
30. Edwardes, *City Gazetteer*, Vol. I, No. 117, 120–21; also see Mariam Dossal, “Signature in Space: Land Use in Colonial Bombay,” in Sujata Patel and Alice Thorner, eds., *Bombay the Metaphor for Modern India* (Bombay: Oxford University Press, 1995), 91.
31. Edwardes, *Rise of Bombay*, 229–30.
32. R. P. Masani, *Evolution of Local Self Government in Bombay* (London: Oxford University Press, 1929), 88–89; Farooqui, “Urban Development,” 2752.
33. Sidney Low, a special correspondent of the London-based daily the *Standard*, accompanied the Prince and Princess of Wales through the empire of India in 1905. In Bombay, he noticed with bitterness the wealth and power of Indian business elites and how the affluent “natives” had acquired bungalows in Malabar Hill and Cumballa Hill, where “they lived in great style.” Sidney Low, *A Vision of India: As Seen During the Tour of the Prince and Princess of Wales* (London: Smith, Elder & Co., 1906), 34.
34. Edwardes, *Rise of Bombay*, 256; Farooqui, “Urban Development,” 2753.
35. Low, *A Vision of India*, 34.

36. *Census of India, 1901*, Vol. IX, Part V (Bombay: The Times of India Press, 1901), 133.
37. *Census of the City of Bombay Taken in 1872* (Bombay: Education Society Press, 1873), 7.
38. *Census of India, 1901*, Vol. IX, Part V, “The Town and Island of Bombay,” 133.
39. Edwardes, *Rise of Bombay*, 256.
40. *Census of the City of Bombay taken in 1872*, 1.
41. Edwardes, *Rise of Bombay*, 294–95.
42. Edwardes, *City Gazetteer*, Vol. III, 170–71.
43. *Census of India, 1901*, Vol. XI, Part V, 17.
44. *Ibid.*, 101–16.
45. A local term for multistorey dwellings with one- or two-room tenements and shared latrines and bathing spaces.
46. Edwardes, *Rise of Bombay*, 325.
47. Edwardes, *City Gazetteer*, Vol. III, 169–73.
48. *Ibid.*, 1.
49. The first colonial city to create a municipal body was Madras, where a Royal Charter of 1687 had established a municipality with a mayor’s court and twelve aldermen. Masani, *Local Self Government in Bombay*, 43.
50. *Ibid.*, 47.
51. D. E. Wacha, *Rise and Growth of the Bombay Municipal Government* (Madras: G. A. Natesan & Company, 1912), 5.
52. Wacha, *Rise and Growth*, 5–7; Masani, *Local Self Government in Bombay*, 91–123.
53. Masani, *Local Self Government in Bombay*, 132–34.
54. *City Gazetteer*, Vol. III, 2.
55. Wacha, *Bombay Municipal Government*, 8.
56. Edwardes, *Rise of Bombay*, 267–68; Masani, *Local Self Government in Bombay*, 147–48.
57. Edwardes, *Rise of Bombay*, 285; Masani, *Local Self Government in Bombay*, 163–64.
58. Wacha, *Bombay Municipal Government*, 19.
59. Edwardes, *Rise of Bombay*, 284–85.
60. *Ibid.*, 41–42.
61. *Ibid.*, 10.
62. *Ibid.*, 44.
63. *Census of India, 1901*, Vol. X, Part IV, 14.
64. Edwardes, *Rise of Bombay*, 280.
65. *Ibid.*, 283.
66. *Ibid.*, 281.

67. *Census of India, 1901*, Vol. IX, Part V, 143.
68. Edwardes, *Rise of Bombay*, 195–97.
69. *Annual Report of the Municipal Commissioner of Bombay 1875* (henceforth *ARMCB*), 127.
70. *Ibid.*, 323–25.
71. *ITJ*, July 1897, 247.
72. *ARMCB*, 1889, 319.
73. Couchman, *Account of Plague*, 73.
74. *ARMCB*, 1901, 45.
75. *Proceedings of the Bombay Legislative Council, 1898*, 17.
76. *Annual Administrative Report of the Bombay Improvement Trust* (henceforth *AARBIT*), 1899 (Bombay: Times of India Press, 1899), 2–3.
77. *City Gazetteer*, Vol. III, 81.
78. *Ibid.*, 82.
79. *AARBIT*, 1899, 4.
80. *Ibid.*, 1902, 14.
81. *Bombay Presidency Native Newspaper Report* (henceforth *BPNNR*), 18 November 1899, 33.
82. Edwardes, *City Gazetteer*, Vol. III, 83–85.
83. A. R. Burnett-Hurst, *Labour and Housing in Bombay: A Study in the Economic Conditions of the Wage Earning Classes in Bombay* (London: P. S. King, 1925), 31.
84. Kidambi, *Making of an Indian Metropolis*, 78.
85. Edwardes, *City Gazetteer*, Vol. III, 82.
86. *Ibid.*, 83.
87. Kidambi, *Making of an Indian Metropolis*, 81–83.
88. Burnett-Hurst, *Labour and Housing*, 32.
89. Edwardes, *City Gazetteer*, Vol. III, 85.
90. *Ibid.*, 84.
91. *Report of the Bombay Development Committee, 1913–14* (henceforth *Bombay Development Committee*) (Bombay: Government Central Press, 1914), xvii.
92. *Ibid.*, x.
93. *BPNNR*, August 1902, 6.
94. *ARMCB*, 1906, 204.
95. *Bombay Development Committee, 1914*, 296.
96. *Ibid.*, 110.
97. *Ibid.*, 87, 107–8.
98. *Ibid.*, 87.
99. Edwardes, *City Gazetteer*, Vol. III, 82.
100. *Bombay Development Committee, 1914*, 106.
101. *Ibid.*, 107–8.

102. Ibid., 87, 108.
103. *Bombay Chronicle*, 9 December 1913, 5; another newspaper, the *Bombay Samachar*, condemned the BIT for only improving the lives of the well-to-do and not doing enough to provide sanitary housing to the labourers. *BPNNR*, May 1913, 29.
104. *ARMCB*, 1919, 66.
105. Ibid.
106. *Bombay Development Committee*, 1914, 288; Janet Harvey Kelman, *Labour in India: A Study of the Conditions of Indian Women in Modern Industry* (London: George Allen and Unwin, 1923), 144.
107. Ibid., 285.
108. *Proceedings of the General Department of the Government of Bombay*, MSA, Compilation No. 218, Part II, 1909.
109. *Bombay Development Committee*, 1914, 295.
110. *Proceedings of the General Department of the Government of Bombay*, MSA, File No. 1142, 1918, m13.
111. Ibid., m19.
112. *Bombay Development Committee*, 1914, 295.
113. Ibid., 149.
114. *Minutes of Evidence Taken Before the IIC 1916–18*, Vol. IV, 5.
115. Municipal members who disapproved the formation of the BIT included Pherozshah Mehta, one of the most prominent members of the INC from Bombay, D. E. Wacha, a founder member of the INC and an economist, and Dr. Bhalchandra Krishna Bhatwadekar, a Marathi physician and member of the provincial legislative council.
116. *Proceedings of the Bombay Legislative Council*, 1898, 19–20, 88–90, 94; Homy Modi, *Sir Pherozshah Mehta: A Political Biography* (Bombay: Asia Publishing House, 1921), 223.
117. *Proceedings of the Second All India Sanitary Conference*, 1912, MSA, 21.
118. *Bombay Development Committee*, 1914, 92–93, 286–87.
119. *ARMCB*, 1919, 67–69.
120. *Bombay Development Committee*, 1914, 92.
121. Jim Masselos, *The City in Action: Bombay Struggles for Power* (Delhi: Oxford University Press, 2007), 44–80.
122. Wacha, *Bombay Municipal Government*, 76–77, 97–98, 229–375.
123. Samuel T. Sheppard, *Bombay* (Bombay: Times of India Press, 1932), 110–11; Edwardes, *Rise of Bombay*, 295–96.
124. Christine Dobbin, *Urban Leadership in Western India: Politics and Communities in Bombay City, 1840–1885* (Bombay: Oxford University Press, 1972), 158.
125. Masselos, *The City in Action*, 57.
126. *BPNNR*, 22 April 1916, 24.

127. Oral Evidence of J. P. Orr, *Bombay Development Committee*, 1914, 292–95.
128. *Ibid.*, 294.
129. Memorandum from J. P. Orr to the *Bombay Development Committee*, 1914, 36–61.
130. *Ibid.*, 292, 297.
131. Written Statement of Vasantao Anandrao Dabholkar to the *Bombay Development Committee*, 1914, 106.
132. *Ibid.*, 106–8.
133. Letter from J. A. Turner to the Municipal Commissioner, dated 2 April 1910, published in the *Bombay Development Committee*, 1914, 35–36.
134. *Ibid.*
135. *ARMCB*, 1919, 67.
136. *Bombay Development Committee*, 1914, 38.
137. *BMOA*, 1898, 81; *Proceedings of the Special General Meeting of the Members of the BMOA*, 1897, 160.
138. *Indian Spectator*, 2 January 1898, 11.
139. *BMOA*, 1907, x.
140. *Ibid.*, xi.
141. Speech of Fazulbhoy Currimbhoy, a prominent millowner, at the annual meeting of the association, *BMOA*, 1910, v.
142. The Bombay Development Committee urged the government of Bombay to pass such legislation, but millowners and their defenders, who appeared before the committee, successfully opposed it. *Bombay Development Committee*, 1914, xi, 76, 94, 130, 257.
143. *Proceedings of the General Department of the Government of Bombay*, MSA, File No. 1662, 1918, 22.
144. *Proceedings of the General Department of the Government of Bombay*, MSA, File No. 1142, 1918, m19.
145. In his memorandum to the Indian Industrial Commission, A. E. Miram, surveyor with the government of Bombay, characterized the amendment as an “excellent and a rare opportunity for millowners,” Statement of A. E. Miram, in *Minutes of Evidence*, 1916–18, Vol. IV, IIC, 1918, 365.
146. Written Evidence of Cowasjee Jehangir, *Bombay Development Committee*, 1914, 94.
147. Statement of C. N. Wadia in *Minutes of Evidence*, Vol. IV, IIC, 1918, 13.
148. *Proceedings of the General Department of the Government of Bombay*, MSA, File No. 1662, 1918, 23.
149. Written Statement of J. B. Petit in *Bombay Development Committee*, 1914, 130.
150. *BMOA*, 1917, x.
151. *Ibid.*, x.

152. *BMOA*, 1919, xiii.
153. Appendix C in the *Minutes of Evidence*, Vol. IV, IIC, 1918, 33–35.
154. *Ibid.*, 33.
155. *Ibid.*, 34–35.
156. The wartime rise in the production of cotton textiles led to an increase in the millworker population. The average daily employment in Bombay textile mills in 1914 was 109,860. This number grew to 140,208 in 1920. See Morris D. Morris, *The Emergence of an Industrial Labour Force in India* (Berkeley: University of California Press, 1965), 217–18.
157. *ARMCB*, 1919, 3.
158. *Ibid.*, 4.
159. *Ibid.*
160. *Ibid.*, 3–5.
161. *Census of India*, 1931, Vol. IX, Part I, 88.
162. The population increase in Bombay was extraordinary during the war years. However, it grew consistently (barring the acute plague years of 1896–1900) between 1881 and 1931. Between these periods, while the population of the city as a whole grew by 388,187, the population of E, F, and G wards increased by 371,652. *Census of India 1931*, Vol. IX, Part II, 158–59.
163. *Report of the IIC*, 1918, 155.
164. Burnett-Hurst, *Labour and Housing*, 20.
165. “Appendix I: A Study of the Working Class Households in the Parel Ward of Bombay,” Burnett-Hurst, *Labour and Housing*, 128.
166. F. D. Barnes, “Final Report of the Lady Doctor,” *Bombay Labour Gazette*, September 1922, 31.
167. Kelman, *Labour in India*, 144.
168. *Ibid.*
169. *Ibid.*, 145–46.
170. Barnes, “Maternity Benefits to Industrial Workers,” 31.
171. Kelman, *Labour in India*, 146.
172. Miram in the *Minutes of Evidence*, Vol. IV, IIC, 1918, 356.
173. *Ibid.*, 355.
174. *Report of the IIC*, 1918, 186.
175. In a dispatch dated 11 December 1917, the government of India insisted that considering the millowners’ apathy toward the issue, the provincial government itself must make arrangements for housing millworkers. *Proceedings of the General Department of the Government of Bombay*, MSA, File No. 1142, 1918, m19.
176. Barnes, “Maternity Benefits and Industrial Workers,” 31.
177. *Ibid.*
178. Kelman, *Labour in India*, 146–47, 257.

179. *Proceedings of the General Department of the Government of Bombay*, MSA, File No. 1142, 1918, m24.
180. Ibid.
181. "Final Report of the Special Advisory Committee on the Industrial Housing Scheme," published in *Bombay Legislative Council Debates*, 1927, 1.
182. Burnett-Hurst, *Labour and Housing*, 33.
183. Note of Dissent by Joseph Baptista in "Final Report of the Advisory Committee," 2.
184. Ibid., 2.
185. Burnett-Hurst, *Labour and Housing*, 28.
186. "Final Report of the Advisory Committee," 3.
187. Ibid., 10.
188. Ibid., 5.
189. *Report of the Royal Commission on Labour in India* (henceforth *RCLI*) (London: His Majesty's Stationary Office, 1931), 273.
190. *Times of India*, Bombay, 22 March 1932, 8.
191. Evidence of R. R. Bakhle in *RCLI*, Vol. I, Part II, *Oral Evidence*, *Bombay Presidency*, 1931, 256–57.
192. *Census of India, 1931*, Vol. IX, Part I, 85–88.
193. Ibid., 87–88.
194. Ibid., 88–91.
195. *Proceedings of the Political Department of the Government of Bombay*, MSA, File No. 8424 II-D, 1932, 213.
196. *Report on an Enquiry into Working Class Family Budgets in Bombay* (Bombay: Government Central Press, 1935), 43.
197. *Report of the Textile Enquiry Committee 1937–38*, Vol. I, *Interim Report* (Bombay: Government Central Press, 1938), 268.
198. Memorandum of A. E. Miram in *Minutes of Evidence*, Vol. IV, IIC, 1918, 354.
199. Ibid., 154.
200. *Proceedings of the General Department of the Government of Bombay*, MSA, File No. 1142, 1918, m24.
201. According to the provincial government's own definition (based on the British standard of overcrowding), more than two adults to one room was overcrowding. Burnett-Hurst, *Labour and Housing*, 127–28.
202. Governor's speech at the Municipal Banquet on 12 March 1923, quoted in "Final Report of the Advisory Committee," 14.
203. Quoted in the *Bombay Legislative Council Debates*, 12 March 1923, 1033.
204. "Final Report of the Advisory Committee," 14.
205. Ibid., 4.

206. *ARMCB, 1919*, 59.
207. *Proceedings of the Municipal Corporation and the Standing Committee, 1918–19*, Office of the Brihann Mumbai Municipal Corporation (henceforth BMC), Part I, Vol. XII, 1309.
208. *ARMCB, 1919*, 59.
209. Burnett-Hurst, *Labour and Housing*, 28.
210. *Ibid.*, 21–24.
211. *Proceedings of the Municipal Corporation, 1929–30*, BMC, 1328–29, 24 June 1927, 8.
212. *Report of the RCLI*, Vol. I, Part I, *Written Evidence: Bombay Presidency*, 1931, 556.
213. “The Second Sanitation Round: ‘A Visit to the Den of Death and Disease,’” in *Bombay Pamphlets*, Vol. III, Royal Asiatic Society Library, Bombay (Bombay: Social Service League, 1922), 24–25.
214. *Ibid.*, 1–4, 33–39.
215. *Ibid.*, 38.
216. *Ibid.*, 30.
217. Written statement of Mrs. K. Wagh, Senior Lady Investigator, Labour Office Bombay to the *RCLI*, Vol. I, Part I, 1931, 198.
218. *Bombay Chronicle*, 1 February 1936, 8.
219. Even after repeated complaints about the flawed water closets, broken water taps, and choked drains, the residents of some chawls in Parel did not get any response from the Corporation. *Proceedings of the Municipal Corporation*, 1931–32, BMC, 683.
220. *Proceedings of the Municipal Corporation*, 1937–38, 1149.
221. *Proceedings of the Municipal Corporation*, 1941–42, 673–74.
222. *Ibid.*, 678.

Social Service, the Civic Ethic, and Worker Well-Being, 1900–1945

Colonial Bombay in the early twentieth century was a prominent locus of a new spirit of civic activism. In 1911, the Social Service League (SSL) of Bombay grew out of that trend, as a historical account of the league documented:

It is a matter of common observation that for some years past a new spirit has been coming over the people of India, especially over the younger generation. . . . The fact that the poor and the depressed classes were as much a part of the Indian nation as the middle and the higher classes had begun to be increasingly recognized. Their problems were gradually attracting a due share of interest in public mind. The spirit of real sacrifice which disregarded all considerations of class-pride, position and wealth was being slowly imbibed by the youth of the country and their eyes were keenly searching for fresh fields of service. For many years past, however, social work was confined to a few social workers, but now the desire for such work has become more general, and a large number of men of education and means are ready to devote their time and energy to it.¹

The working-class people of Bombay increasingly became prime objects of this emerging civic consciousness. Educated social activists viewed poverty, squalor, and loss of morality as undesirable outcomes of industrial urbanization, problems that required the urgent attention of Bombay's educated public. Three prominent voluntary associations, the SSL, the Bombay Sanitary Association (BSA), and the Young Men's

Christian Association (YMCA) of Bombay, designed specific programs for uplifting the city's industrial workers. These included the promotion of temperance, the creation of greater awareness about sanitation, and the disciplining of the body through physical training and recreational sports. Two broader goals—the creation of a harmonious, ordered national community and the displacement of a perceived culture of poverty—significantly informed the practices of these voluntary associations.

The reform and welfare programs that these groups ran also suggested ways of controlling and molding labor power. They attempted to instill in workers a respect for authority, and values of loyalty, discipline, and sobriety, qualities that arguably enhanced productivity and reduced conflict between capital and labor. Significantly, their goal of creating harmonious social relationships coincided with the growing urgency to restrain labor militancy in Bombay. Jehangir Bomanji Petit, the chairperson of the Bombay Millowners' Association, observed that by the early 1910s, strikes by textile workers had become more frequent and increasingly involved larger numbers of people.² During the First World War, the escalating cost of living and consequent decrease in workers' real wages created objective grounds for heightened labor activism. About eighty strikes between 1917 and 1918 demanded increased wages and war bonuses. The general strikes of 1919 and 1928 in the Bombay textile industry were unprecedented in scale and revealed the increased organizational strength of radical trade unions.³ The combative approach that workers and their unions took contradicted Indian nationalism's ideological construction of a unified, harmonious nation devoid of social frictions. Unsurprisingly, both millowners and nationalist leaders eagerly supported social service groups because of their potential to create an alternative, non-confrontational associational culture among mill laborers.

This chapter explores the wider social and political context that produced voluntary activism. Analyzing the practices of voluntary groups, it also unravels the underlying class biases and paternalistic tendencies of labor well-being programs. Moreover, it examines how the practices of voluntary social activism shaped wider understandings of the urban working classes and their problems and predicaments. Altogether, it investigates the scope and scale of the voluntary sector's involvement in working-class life and the power relations and patterns of association that this involvement fostered.

NATIONALISM AND SOCIAL SERVICE

The rise of ostensibly non-political voluntary organizations was not unique to Bombay. Rather, it was a broader trend within Indian nationalism. Established in 1885, the Indian National Congress (INC) had developed a radical critique of the extractive economic policies of the British in India.⁴ Despite this vehement criticism, the INC's political opposition to colonization was limited to petitions and moderate appeals to the colonial government of India.⁵ Beginning in the 1890s, as a counter to this limited, mendicant politics, some reformers and nationalist leaders visualized a nation-building program that emphasized self-improvement and self-respect.⁶ In a situation of political subjugation, the nationalist quest to appropriate the public sphere and forge a righteous and self-reliant national community reflected the desire for empowerment and respectability.⁷ The proponents of this productive nationalism hoped that the consistent efforts of educated volunteers could ameliorate the social and economic conditions of India's marginalized sections and, hence, bridge social differences within Indian society. Cumulatively, their conscientious role in public life could create a "renovated India, marching onwards to a place among the nations of the world."⁸

This positive ethos influenced the existing indigenous religious revival and social reform movements.⁹ Broadening their activities, revivalist organizations such as the Arya Samaj of northern India and the Ramakrishna Mission of eastern India began philanthropic programs for flood, famine, or epidemic relief and organized medical treatment for the poor. These initiatives attracted young, educated Indians who were eager to serve the underprivileged.¹⁰ In 1903, a similar enthusiasm for social work and nation building contributed to the foundation of the Bombay Presidency Social Reform Association.¹¹ This group routinely organized inter-caste dining and criticized caste-based discrimination in its pamphlets. Three years later, N. G. Chandavarkar, a prominent social reformer and nationalist leader of Bombay, established the Depressed Class Mission Society in Bombay for the benefit of lower castes and "untouchables."¹² Founded in 1904, Gopal Krishna Gokhale's Servants of India Society exemplified this emerging association between social service and nation building.¹³

A moderate, liberal nationalist leader of the Congress, Gokhale established this society "to train national missionaries for the service of India

and to promote by all constitutional means the true interests of the Indian people.”¹⁴ He believed that educated Indians should assume public responsibilities and work for the “elevation of the depressed and backward classes and the cultural and industrial progress of the country.”¹⁵ The *Swadeshi* movement from 1905 to 1908 further accentuated the role of constructive social work in nation building.¹⁶ In North India, nationalist reformers such as Lala Lajpat Rai and Madan Mohan Malaviya established colleges and encouraged young Indians to participate in philanthropic work.¹⁷ Mahatma Gandhi propagated the ideals of self-improvement and mutual help as the bases of self-rule.

Published in 1909, *Hind Swaraj or the Indian Home Rule* emphasized the significance of social harmony and compassion in the pursuit of nation building. Gandhi asserted that for forging a cohesive nation, educated and privileged Indians, the putative leaders of a future independent nation, must bear responsibility for the welfare of the underprivileged masses.¹⁸ The quest for true independence was inextricably linked to the pursuits of self-improvement and self-reliance.¹⁹ Mahatma Gandhi emphasized the importance of these ideals on numerous occasions and called upon educated Indians to combat the flaws that weakened Indian society. In 1917, at the All India Social Service Conference in Calcutta, he insisted that “the *bustees* of Calcutta and the chawls of Bombay badly demand the devoted services of hundreds of social workers. They send our infants to an early grave and promote vice, degradation and filth.”²⁰ This discourse on responsible citizenship aroused devoted nationalist volunteers within the Congress to work for sanitation, education, temperance, and the promotion of *khadi* or homespun clothing in rural as well as urban areas.²¹ In Bombay, the ideals of conscientious citizenship influenced the formation and programs of voluntary groups such as the SSL. An underlying perception about the “degenerate culture of poverty” was equally crucial in shaping the trends of social service in Bombay.

A CULTURE OF POVERTY

Social service groups acquired prominence at the same time that the provincial and local governments of Bombay were undertaking urban renewal schemes for the benefit of industrial workers. As discussed in Chapter 3, the outbreak of bubonic plague in Bombay in 1896 had caused enormous loss of human capital and destabilized the commerce and industry of the city.²² Although Bombay frequently encountered

outbreaks of diseases such as cholera and malaria throughout the nineteenth century, the unprecedented intensity of the plague created an urgency to improve the precarious living conditions of industrial workers. The government reports on sanitation insisted that a complete overhaul of sanitation infrastructure and provisions for clean industrial housing were crucial for preventing the spread of epidemics such as plague.²³ However, in colonial India, sanitation and health did not simply represent a pragmatic desire to protect the economy and polity from all possible threats. Arguably, issues of public health and hygiene also embodied cultural differences between the colonizers and colonized.

In colonial cities, British officials frequently invoked the contrast between European (ordered, sanitized) and native (cluttered, filthy) localities to articulate racial and cultural differences between the colonizers and colonized, as Dipesh Chakrabarty has argued.²⁴ Consequently, in colonial discourse on urban public culture, dirt and disease symbolized the inherent incapability of oriental people to adopt modern sanitary measures.²⁵ Extending this framework to colonial class politics, I argue that in industrial cities such as Bombay, the discourse on sanitation and specific “habits of life” was not merely about forging racial/cultural identities. Sanitation and health also served as key othering sites; that is, they produced class boundaries. Both colonial rulers and Indian elites invoked essentialist notions about the perceived filthy habits of the working classes to characterize them as incapable of being hygienic. This broad consensus between the colonizing and indigenous elites suggests that colonizers and colonized were not absolute, binary categories. Class-based differences significantly complicated such classifications. Moreover, the discursive production of a culture of poverty emphasized the futility of systemic changes in civic infrastructure. Instead, it prescribed informal cultivation of clean living habits as a more effective remedy.

Emphasizing the “natural” aversion of the poor to sanitation, in 1899 T. S. Weir, the municipal health officer, lamented, “Take the most sanitary buildings in Bombay and allow the poor classes to enter it [*sic*], and in a few weeks they will make it as insanitary as the most insanitary chawls in the most insanitary areas.”²⁶ John A. Turner, the subsequent municipal health officer, reiterated that because of the ingrained habits of people “the surroundings of many recently constructed chawls were fouled, and their condition is as bad as many of the oldest chawls.”²⁷ He simultaneously asserted that “it is unreasonable to expect that the occupants of lower class chawls will change their habits until enlightened

by education or force of education.”²⁸ Indian millowners deployed this essentialist attribute of their employees to conceal their own unwillingness to provide clean industrial housing. In his evidence to the Textile Factories Labour Committee of 1907, N. N. Wadia, a Parsi millowner, insisted that the construction of sanitary chawls for millworkers was not merely unprofitable but a futile venture because “the habit [*sic*] of the people themselves are so insanitary and filthy that it will be a matter of the utmost difficulty to keep the dwellings clean.”²⁹ Millowners suggested that more crucial measures were “the diffusion of sanitary knowledge and an acquaintance with the principles of domestic hygiene.”³⁰ Local medical professionals reaffirmed these assumptions.

To these observers, mill districts embodied moral degeneration, poverty, and squalor. In their discussions, they constructed sanitation and health as personal virtues that the “ignorant” and illiterate men and women millworkers lacked. At the Bombay Medical Congress of 1909, two Parsi physicians, Jehangir J. Cursetji and Dinsha Bomanji Master, vociferously argued that:

A large portion of the insanitary conditions prevailing in and outside the dwellings of the working classes is directly due to some peculiar and perverse habits of the people themselves, their ingrained prejudices and stupidity, and their want of personal cleanliness and their ignorance of personal hygiene. The washing of soiled or dirty linen, and the scouring of household utensils, near the very well from which they oftentime [*sic*] drink, the almost ceaseless waste of water from the constantly running taps making the ground-floor damp and unwholesome from constant soakage, the shutting up at night of every door and window, or even closing up the only window if it happens to exist in the bedroom, the nailing up of all spaces for ventilation, and the apathy and indifference to help the authorities in improving their condition, all together constitute a most difficult problem for the anxious consideration of the executive, and complete the painful picture of a stolid and unconscious ignorance associated with great poverty, such as can be scarcely seen in the poorest civilized town of the West.³¹

The physicians portrayed working-class people as victims of their own class-specific habits, which they saw as barriers that obstructed civic progress. The doctors argued that the “perverse” habits of living deteriorated workers’ health and efficiency and caused a “serious pecuniary loss to the industries of the city.”³² They insisted that “all this could be considerably lessened if only the poorer classes could be made to understand

and appreciate the value of hygiene and household sanitation. This can only be done by the constant impression of certain corrective and educational influences on them.”³³

Later accounts of workers’ living conditions in Bombay reiterated such essentialist views. In his widely circulated study of industrial housing in the city, A. R. Burnett-Hurst regretted that:

It is no exaggeration to say that the masses are utterly unacquainted with even elementary ideas of hygiene and sanitation and little improvement can take place until they have been educated to a different standard of living. Living as the working classes do in these terrible slum dwellings, is it surprising that plague, cholera etc., thrive in such breeding grounds? Nor can we wonder at high death-rates and excessive infant mortality, to which the practices of the people contribute in no small measure.³⁴

Thus, there was a broad consensus that improvements in the living conditions of the laboring poor required a basic acquaintance with and acceptance of the principles of sanitation. Since neither millowners nor the provincial or municipal governments wanted to allocate any significant resources to specific educational programs, they welcomed and supported voluntary reformist efforts to “civilize” workers through their informal educational programs.

THE CAMPAIGNS TO SANITIZE WORKING-CLASS NEIGHBORHOODS

Formally inaugurated on 11 January 1904 by Lord Lamington, the governor of Bombay, the Bombay Sanitary Association (BSA) was one of the first organizations to crusade against the alleged filthy living habits of millworkers.³⁵ John A. Turner, the municipal health officer of Bombay, founded the BSA and served as its honorary secretary. While Britons joined this group, elite Indians constituted the majority, and life members included the governor of Bombay. Millowners such as Dorab J. Tata, Currimbhoy Ebrahim, Jehangir Bomanji Petit and professional Indians such as Dr. Jehangir J. Cursetji and Dr. S. S. Batliwalla were prominent members.³⁶ With three patrons, thirty-nine life members, and forty-nine ordinary members by 1920,³⁷ the BSA obtained annual grants from the municipality and the provincial government.³⁸ Bombay millowners and groups such as the Royal Sanitary Association of London

also provided financial aid.³⁹ The stated objectives of the BSA were “to create an educated public opinion with regard to sanitation in general, to diffuse knowledge of sanitation and hygiene generally, and of [*sic*] the prevention of spread of disease by means of leaflets, lectures and practical demonstration.”⁴⁰ It concentrated on the E, F, and G wards, “where the majority of the population are [*sic*] mill-hands who are mostly ignorant of the elementary principles of personal hygiene and sanitation.”⁴¹

To disseminate knowledge of sanitation and methods of disease prevention among millworkers and their families, the BSA employed male and female health visitors.⁴² Trained in the sanitary classes of the BSA, these health visitors were paid between 40 and 50 rupees per month, depending on their experience.⁴³ Posted in different municipal wards, they were assigned a list of unsanitary chawls to visit each morning and evening. The annual reports of the BSA boasted that its health visitors made more than 6,000 chawl visits annually and reported numerous cases of overcrowding and poor sanitation. Similarly, they revealed hundreds of cases of infectious diseases and persuaded the affected chawl dwellers to obtain medical help.⁴⁴ Turner asserted that these health visitors bridged the gap between the municipal body and the “ignorant” working-class people and hence helped the local government to reach out to the masses.⁴⁵ No evidence exists to document how the municipality acted upon these reports, or how this collaboration between the BSA and the municipality improved the scant sanitary infrastructure of mill localities. However, available sources amply indicate that the emerging professional social service was gradually defining sanitation and disease prevention as the responsibility of individual laborers and their family members.

The BSA promoted new forms of personal conduct and models of responsible public behavior through personal instruction and leaflets. During their daily chawl rounds, the health visitors of the BSA advised “poor people to improve the conditions of their rooms by proper ventilation, whitewashing and disposal of refuse, by keeping their room free from accumulation of dust, by maintaining personal cleanliness and hygiene, by taking precaution in the case of infectious disease and seeking medical aid in times of sickness.”⁴⁶ In their “homely talks” the health visitors emphasized the “health problems of shutting the windows with rags and keeping the ground area damp[,] and flies and their dangers.”⁴⁷ They simultaneously taught women the “appropriate” methods of child-care and of nursing sick family members.

To reinforce these oral instructions, health visitors distributed leaflets in Marathi and Hindi on these topics. The leaflets cautioned people against “their unpleasant habits of spitting in public,” “shutting their windows,” or “leaving their food uncovered.” They admonished women workers and the wives of male workers against the “irresponsible habit” of leaving their infants unattended or with their relatives. They also prescribed “correct” methods and duration of breast-feeding and personal cleanliness to prevent the occurrence of diseases.⁴⁸ Emphasizing the low literacy levels of millworkers, instructional methods included the use of “intentionally crude posters” and “magic lantern” or illuminated slide shows that communicated the value of hygiene and health to their audience.⁴⁹ The health visitors also distributed among chawl dwellers small quantities of free soap, the everyday commodity deemed essential for bodily cleanliness.⁵⁰

In 1906, the BSA began an informal training program for chawl caretakers or *bhayas*. For small monetary rewards, these caretakers were asked to monitor the “cleanliness of rooms and latrines, periodic lime washing, ventilation, overcrowding of rooms and wastage of water.”⁵¹ By 1918, the BSA claimed to have imparted sanitary training to more than two hundred *bhayas*.⁵² Such training and propaganda programs emphasized the perceived significance of trained supervision and behavioral changes in ensuring sanitation and health. Encouragement from the government further underscored the importance of these techniques.

Colonial officials commended such voluntary efforts because the state was eager to abdicate its responsibility for providing basic amenities to the colonized masses, as Sudipta Kaviraj has observed.⁵³ Not surprisingly, the BSA campaigns received enthusiastic approval from the provincial and municipal governments of Bombay. In his lecture at the general meeting of the BSA in 1912, Sir John Clarke, the governor of Bombay, complimented the group on the fact that its “classes and lectures have sown seeds in hundreds of minds and stimulated many people to acquire some knowledge of sanitary laws.”⁵⁴ He was especially impressed by the training program for *bhayas* and insisted that through informed supervision “an improvement of the sanitary conditions of the dwellings of the poor would certainly be effected.”⁵⁵ He urged the educated and resourceful inhabitants of Bombay to assist in such voluntary programs.⁵⁶ Similarly, Turner asserted that “creating a hygienic conscience among people” was important for the city’s progress and that the role of “private citizens” was instrumental in creating this awareness.⁵⁷ However,

as the previous chapter delineated, inadequate provisions for sanitation and housing, and not a “natural” resistance to cleanliness compelled millworkers to live in filth and squalor. Yet, the campaigns of the BSA stressed the “ignorance” of millworkers and claimed that “they did not understand the sanitary measures which the crowded life of modern cities demands and therefore trained and educated volunteers should awaken them.”⁵⁸

When Dr. Turner retired in 1919 and departed for England, the BSA’s goals shifted.⁵⁹ The publication of annual reports became irregular.⁶⁰ While it continued its sanitary awareness campaigns, the group increasingly focused on maternal and infant health programs during the 1920s. However, its efforts to familiarize millworkers with modern, sanitized ways of living significantly shaped the culture of social service in Bombay. Other voluntary groups such as the Social Service League (SSL) closely modeled their sanitary education programs after those of the BSA.

Prominent Marathi social reformers established the SSL, an offshoot of Gopal Krishna Gokhale’s Servants of India Society, on 19 March 1911. Narayan Malhar Joshi, the principal figure and secretary of the SSL, had been a life member of the Servants of Indian Society since 1909. Born and brought up in a Marathi Brahman family, by 1899 Joshi graduated from the Deccan College in Pune, in Bombay Presidency. Keenly interested in social issues, he received training under Gokhale before moving to Bombay in 1911 and forming the SSL. By 1921, his interests in labor welfare issues prompted the provincial government to nominate N. M. Joshi to the Central Legislative Assembly as a representative of labor. Joshi was also a founder member of the moderate Bombay Textile Labour Union, which disapproved of the radical, antagonistic approach of communist-led textile unions such as the Lal Batva and the Girni Kamgar Mahamandal.⁶¹ He remained committed to labor welfare through peaceful means.

Narayan Ganesh Chandavarkar, a Marathi Brahman who studied law at the Bombay University, was also associated with the SSL from its inception. After M. G. Ranade’s death in 1901, Chandavarkar became the general secretary of the Indian National Social Conference, the social reform branch of the Indian National Congress. Dr. Bhalchandra Krishna Bhatwadekar, who obtained a Licentiate of Medicine and Surgery degree from the Grant Medical College of Bombay, was another significant founding member of the SSL. An important public figure, he had served

as the president of the Bombay Municipal Corporation in 1898 and as a member of the provincial legislative council from 1897 to 1899. As president of the Indian Temperance Council in the 1890s, Dr. Bhatwadekar consistently promoted anti-liquor programs.⁶² With the active support of these leaders, the SSL rapidly gained prominence. Beginning with 150 members, it achieved a membership of 1,190 by 1918.⁶³ Indian millowners and influential people of the city such as Ness Wadia, Ratan Tata, and Vithaldas Thackersay generously funded its programs.

Echoing the ideas of Gokhale and Gandhi, the League meticulously fostered the notions of responsible citizenship:

Where the municipality stops, the individual citizen must take up and continue the work. It is the citizen, after all, who is the caretaker of the society in which he lives. We want an army of charitable social workers, men and women keenly alive to the duties of citizenship; men and women who will go out to rescue and reform, to prevent and uplift the lower classes.⁶⁴

The mill neighborhoods with their vast population of textile workers and their families constituted obvious sites for testing the techniques of ideal citizenship that Joshi and his colleagues devised.⁶⁵

As documented in Chapter 3, housing and sanitation in mill areas had further deteriorated during the First World War and the inter-war years. An increase in textile production during the First World War resulted in a greater concentration of migrant laborers in the city. This influx intensified the existing problem of overcrowding in mill neighborhoods. Although Bombay City as a whole witnessed a significant population expansion between 1911 and 1931, this growth was most rapid in mill localities.⁶⁶ In 1917–1918, Parel, a crowded mill neighborhood, recorded an average of six persons living in a single room.⁶⁷ Government reports of the 1920s and 1930s reaffirmed that though many parts of Bombay suffered from overcrowding, mill districts were the most severely affected by it.⁶⁸ Overcrowding caused further pressure on the inadequate sanitary infrastructure of workers' chawls.⁶⁹ Even so, the exigencies of the war became a pretext for the provincial and local governments to abandon or decelerate industrial housing and sanitation projects. Although millowners had earned enhanced profits because of the increased production during the war, they were unwilling to invest in industrial housing plans. The burgeoning working-class population was forced to live in the congested mill localities of Bombay.

The League perceived this growing working-class population located amid unsanitary surroundings as a “problem,” a threat to the city’s public health and moral fabric.⁷⁰ Articles published in the *Social Service Quarterly* consistently drew a causal relationship between the poor and urban decay.⁷¹ The authors lamented that the overcrowding of working class localities led to a rapid spread of diseases while “the problem of vice in the form of gambling and drinking lowered the moral tone of the people.”⁷² Deeming unsanitary housing as “evil,” they viewed workers’ quarters as repositories of contagious disease, crime, and alcoholism.⁷³ They attributed public health problems such as the high rates of infant mortality in working-class neighborhoods to “the comparative poverty of the bulk of the population, ignorance and orthodoxy that shirk anything modern.”⁷⁴ Consequently, “rousing the slumbering sanitary conscience of the illiterate workers” was one of its main objectives.⁷⁵ The SSL embarked upon a civilizing campaign that included the distribution of leaflets and organization of lectures on personal hygiene in the night schools that it had opened in mill neighborhoods.⁷⁶ Like the BSA health visitors, the SSL volunteers regularly visited workers’ chawls to demonstrate methods for keeping their surroundings clean.⁷⁷ The SSL also established a separate sanitary department to conduct its campaigns, which occurred mainly in the E, F, and G wards of the municipality where the mills and workers were located.⁷⁸ To create a broader awareness of the lack of basic civic amenities in workers’ localities, this department organized regular sanitary rounds “with a view to inspecting the sanitary—or rather insanitary—conditions of chawls.”⁷⁹

The League publicized this unique experiment through local newspapers and invited “respectable citizens” to volunteer for its sanitary rounds. Educated professionals such as H. L. Kaji, a professor at Sydneyham College, K. J. Dubash, a lawyer, Vaikunthlal Mehta and B. G. Parlekar, municipal councilors, and S. K. Bole, a prominent reformer, labor welfare leader, and a member of the Bombay legislative council, participated in the SSL’s sanitary rounds.⁸⁰ Significantly, the teams making these rounds did not include any inhabitants from the localities that were inspected. Nor did their reports record perceptions of chawl dwellers themselves about the lack of sanitation and inadequate housing. Thus, the accounts of sanitary inspections were limited as they primarily represented the perspectives of educated elites about the living environment of “ignorant” workers.

Moreover, available reports of sanitary rounds during the 1920s and 1930s reveal the ambivalence of the educated public regarding the living conditions of workers. Their disgust for filth and squalor was combined with a sympathy for chawl dwellers who were forced to live in such surroundings. Echoing stereotypes disseminated through the *Social Service Quarterly*, they termed workers' neighborhoods as "dens of death and disease" and "shrines of human degradation."⁸¹ In documenting filth, colonial records revealed a Western civic modernity and what Dipesh Chakrabarty calls "certain ideas of beauty related to the management of public spaces."⁸² Displaying these modernist perceptions, the SSL volunteers characterized the "disgusting, dirty and nauseating state of things" in working-class neighborhoods as a blot on the aesthetics of a premier city.⁸³ Moreover, the graphic details of "filth and refuse," of the open drains, and of the "stench being too powerful for the perfumes in our handkerchiefs" reflected a particular modernist way of seeing and observing.⁸⁴

Simultaneously, the participants expressed their shock at the inadequacy of sanitary facilities in workers' neighborhoods. Their descriptions publicized the dismal sanitary conditions of workers' chawls and their surroundings. One report lamented that "death in disturbances or confinement in jails is infinitely superior to a life in a typical Bombay working class chawl."⁸⁵ Documenting the sanitation round in Chinchpookly, one of the largest mill localities of F ward, another report noted:

The slums of the Urbs Prima in India are really the hells of Bombay. The party was simply horror stricken at the sight of the standing nuisance. All the bylanes and the main lane were full of mud and filthy waters and at various places there were pools of water permanently breeding germs of Malaria and other diseases. The dark, ill ventilated chawls did not appear to have been white washed for at least a decade. The condition of privies is very abominable. . . . These conditions are a disgrace to a premier city in India.⁸⁶

During a subsequent round, P. G. Kanekar, a League member, observed:

No lampposts were visible and the passage to the chawl was an impassable bog. As we turned to the main lane of the chawl, we saw a long and big heap of dirt . . . the place was emitting the foulest smell . . . we wanted to turn to the chawls situated at the corner but seven oceans of mud and filth

lay between us and the chawls. . . . We tried the other way but it was hardly any better. Some places were so muddy and boggy that we had to perform all sorts of acrobatic feats to make any progress in our pilgrimage to the shrines of human degeneration.⁸⁷

Participants recorded that 500–600 chawl dwellers had only three taps that supplied water only for fixed hours. The visitors regretted the lack of ventilation and lighting in the chawls and the infrequent cleaning of surroundings and latrines.⁸⁸

These sanitary rounds were not limited to describing the abominable conditions of mill localities. They reasserted that industrial urbanization and governmental negligence, material causes outside the perceived perverse sanitary consciousness of workers, were equally responsible for the unhealthy living surroundings. One inspection report pointed out that “modern civilization first brought these slums into existence. Every centre of this civilization has a slum land of its own. Bombay has its own slums too.”⁸⁹ Professor H. L. Kaji, a participant in the sanitation rounds of the SSL, blamed the “self-gratifying,” indifferent attitudes of the industrialists for the workers’ predicament. He complained:

The capitalist aristocrat, peregrinating in his luxurious automobile between the lovely environment of Malabar Hill and the stately mansions of the Fort, or the delightful Queen’s Road, knows practically nothing of the other great agent of production, the labourer, whose daily movements are from the factories where he is part of the machinery, to the filthy, nauseating environment of the Bombay slumland.⁹⁰

Simultaneously, the SSL’s sanitation round reports stressed that the appalling living conditions of workers’ chawls displayed the negligence of the landlords, the “callousness of Municipality,” and the “indifference of the City Improvement Trust.”⁹¹ They warned that continued neglect of sanitation could lead to the “outbreak of terrible epidemics like influenza and other diseases, effects of which will not be restricted to the slums of Bombay.”⁹² The participants reminded their readers that through their labor, millworkers significantly contributed to the revenues of Bombay. Therefore, local and provincial governments should create adequate clean housing for workers.⁹³

To ensure accountability, the SSL submitted written complaints to civic authorities about the lack of sanitation in workers’ localities. In

response, the Bombay Improvement Trust and the municipality reiterated that a persistent lack of funds and the “filthy living habits” of chawl dwellers constrained their efforts.⁹⁴ Still, this exercise occasionally yielded results. In November 1922, acting upon a complaint, the municipality sanctioned Rs. 35,000 for the improvement of drains in a neighborhood of F ward.⁹⁵ Similarly in 1926, the municipality appointed a sweeper for the regular removal of garbage from the Tata Mill Chawls.⁹⁶ The municipality repaired wastewater pipes and cleaned choked drains of another mill chawl at Kalachowki.⁹⁷ With the help of the SSL volunteers, the municipality placed tin dustbins on each floor of chawls in Tardeo and Chinkalwadi, two crowded mill neighborhoods.⁹⁸ Considering the report of the sanitation rounds of 1926, the municipality acknowledged that its “Health Department needs to be more vigilant hereafter than at present in attending to the Sanitary condition of the city, particularly in poorer localities.”⁹⁹ These sporadic measures and occasional confessions could not address the endemic problems of an uneven urban development. But the SSL’s sanitation campaigns reflected a more sympathetic attitude toward the laboring-class chawl dwellers than the BSA did. The SSL persuaded civic bodies to be more responsive to the sanitary needs of the poor.

But even as the SSL attempted to generate broader support for the extension of civic facilities to the poorer neighborhoods of Bombay, their sanitary inspections and reports accorded agency to the educated elite. In contrast, the working-class chawl dwellers appeared as passive objects of “upliftment,” unaware of their own conditions. Educated participants such as Professor Kaji bluntly stated that laborers were unable to improve their situations because they were “steeped in ignorance and illiteracy” and were “dumb and passive sufferers, inured to hardships and acclimated to the slums.”¹⁰⁰ Encapsulating these sentiments, the report of the sanitation rounds issued a powerful statement:

This appeal is addressed to the citizens of Bombay to take great interest in these matters from considerations both altruistic and selfish, altruistic because we have to remember that we owe some duty to our less fortunate brothers and sisters, and selfish because these matters, if neglected, will help the outbreak of terrible epidemics like influenza, and other diseases, effect[s] of which will not be restricted to the slums of Bombay. An extensive propaganda to give sanitary education to the workmen, who are steeped in ignorance and illiteracy, should be immediately taken in hand.¹⁰¹

The report repeatedly asserted that “workers themselves were not accustomed to protest against the grievances from which they suffer,”¹⁰² and, therefore, the educated public of Bombay must assume the responsibility of representing them.

Interestingly, this construction of the working classes as passive and ignorant mirrored Gandhi’s ideas about trusteeship, which he articulated as a relationship of benevolence, cooperation, and charity between the privileged and underprivileged.¹⁰³ This altruistic idea reflected the paternalistic attitudes of mainstream nationalism. The privileged and capitalists were deemed the caretakers of the working classes because “it is clear that labour will never attain to *that* [emphasis added] intelligence. If it does, labour will cease to be labour and become itself the master.”¹⁰⁴ Such stereotypical and paternalistic assumptions about the laboring classes significantly informed the initiatives of the SSL, its sanitation campaigns, as well as its temperance programs among millworkers.

TEMPERANCE AND WORKERS’ WELL-BEING

Since its inception in 1911, the SSL consistently targeted the “lax morals” of millworkers, particularly their “evil” habit of consuming alcohol. It emphasized that alcoholism provoked workers to waste their wages and impaired them physically as well as morally. Their subsequent temperance campaigns intensified a discourse that had begun earlier and involved social workers, millowners, the government, and nationalists. In 1905, Bhiwaji Nare, a Marathi, Hindu social worker, and a founder member of the Kamgar Hitwardhak Sabha (Workers’ Welfare Society), declared that “the availability of ready money in the hands of uneducated and thoughtless operatives was the reason behind drunkenness.”¹⁰⁵ In his evidence to the Indian Factory Labour Commission (IFLC) that the government of India (GOI) appointed in 1908 to regulate factory labor, Nare reiterated that physical deterioration of workers was not because of long hours of work or poor ventilation in the factories but “mostly due to their habits of drinking.”¹⁰⁶ Millowners readily agreed that alcohol consumption was the root cause of workers’ miseries.

Eager to avoid labor regulations, employers frequently downplayed the impact of a long working day and unhealthy working and living surroundings on workers’ physiques.¹⁰⁷ Referring to the existence of several grog shops in Parel, Jamshetji N. Wadia, a Parsi owner of several cotton mills in Bombay, insisted that workers’ health and finances suffered

because of their drinking habits and not because of working hours or low wages.¹⁰⁸ Dr. Bhalchandra Krishna, a physician and a municipal councilor, confirmed that “the physique [of workers] is affected more by the bad habits of drinking than the much discussed long hours.”¹⁰⁹ Drawing from these testimonies, the report of the IFLC declared that “a millhand frequently spends a considerable portion of his earnings in drink. The consumption of liquor among factory workers is, we consider, undoubtedly greater than among men of the same rank in life engaged in other occupation [*sic*].”¹¹⁰ Such views obscured the adverse impact of a harsh, inadequately regulated industrial economy on workers’ physiques and their social world.

Ironically, evidence of millworkers’ precarious existence was present in the proceedings of the IFLC itself. Inside the mills, laborers worked in a poorly ventilated, cramped, and artificially humid atmosphere.¹¹¹ Their dingy chawls hardly offered relaxation. The IFLC echoed earlier government reports that to cope with high rents, workers lived in shared, overcrowded rooms that lacked the privacy needed for family life. Consequently, many of them left their families back in the villages.¹¹² Since “the chawls in which these mill-hands live are very crowded they cannot go to bed before 11 P.M.; and even if they manage to go to bed earlier, they cannot get undisturbed sleep.”¹¹³ In addition, their migration from close-knit village communities to an unfamiliar industrial city produced alienation and a limited social network. In this situation, men who boarded in the same chawl or worked in the same mill fraternized on the street corners or in a local *toddy* (country liquor) or tea shop. This informal association at the much demonized grog shops possibly provided male workers one—and probably their only—site of relaxation, an escape from their grueling work schedule and solitary existence in the city. But the IFLC and millowners ignored these social and cultural aspects. A parallel nationalist rhetoric further demonized alcohol consumption and linked it to the degeneration of the nation.

A bourgeois moral disdain toward the supposed tendency of the working classes to indulge in sensuous pleasures informed the temperance discourse in Bombay.¹¹⁴ In fact, the urban educated public across colonial India consistently stigmatized some forms of socialization in their quest to create a nation based on elite notions of respectability.¹¹⁵ Eager to cleanse public culture, righteous reformers constructed colonial cities as centers of moral degradation and launched tenacious campaigns against the alleged deviant practices of prostitution, gambling,

and alcoholism. In colonial port cities such as Bombay, these reformers particularly targeted the laboring classes and their perceived immoral and uncontrolled behavior.¹¹⁶

Apparently, the reforms and moral uplift campaigns in colonial Indian cities were similar to the contemporary reform messages of evangelical missionaries and social workers in Britain. Reformers were attempting to inculcate similar virtues of thrift, temperance, cleanliness, and deferential respectability among the British working classes. However, in colonial India, reform practices also reflected upper-caste, Brahmanical definitions of cleanliness and propriety.¹¹⁷ For instance, the late nineteenth-century temperance associations constructed drinking as an immoral, lower-caste, and lower-class habit.¹¹⁸ The increased visibility of liquor shops in colonial cities generated anxieties among the upper-caste, puritanical elite reformers. In the late nineteenth and early twentieth centuries, they collaborated with Christian temperance associations from the United States and England to wage a campaign against the “immoral,” lower-caste practice of alcohol consumption. Their temperance campaigns were thus attempts to normalize Brahmanical norms and impose them on the lower-caste, urban laboring classes.¹¹⁹

Alcohol consumption was not simply a symbol of personal degradation. Anti-drink movements were also linked to nationalism. By the early 1900s, the local and national temperance campaigns increasingly assumed a broader political significance as nationalist opinion criticized the colonial government and Indian owners of liquor shops for generating revenues through the processing and marketing of liquor, a commodity deemed harmful for people. Since excise duties formed a principal source of revenues, the colonial government tried to systematize and control the distillation and distribution of imported as well as locally produced liquor in every region of India, including Bombay. Boycotting liquor, imported spirits, and toddy was a crucial part of the *Swadeshi* anti-colonial movement of 1905–1908, which sought to undermine British economic hegemony over India. Anticipating a key Gandhian campaign, in 1907–1908, Swadeshi leaders, most prominently B. G. Tilak, organized the mass picketing of liquor shops in Bombay and urged millworkers to abandon drinking liquor.¹²⁰ Although morality continued to be a primary component of temperance, the appeals for prohibition also aimed to reduce the government’s revenues.¹²¹ Echoing these ideas, Gandhi later constructed abstinence as crucial for the moral and material health of the family and the nation.¹²² In early

twentieth-century Bombay, anti-liquor campaigns targeting millworkers evinced these upper-caste, moralist, as well as nationalist ideas. They constructed millworkers as the primary consumers and victims of the “vice.”

The temperance programs of the SSL, for instance, associated alcohol consumption with a supposedly unregulated plebian public that indulged in uncontrolled merrymaking. The SSL was formed with an objective to discipline the perceived excesses of Holi, a Hindu spring carnival of color. This festival provided the laboring classes an opportunity to subvert social conventions. They could enjoy a rare respite from their grueling work schedule, sing and dance, and visit friends and relatives. To them, this festival also brought an occasion to consume intoxicating drinks.¹²³ They could momentarily cross class barriers, defy authority, and ridicule the upper classes.¹²⁴ In Bombay, Holi was especially popular among the Hindu Marathi millworkers. Educated Marathi members of the SSL viewed such unrestrained revelry during the festival as a sign of cultural degeneration.¹²⁵ N. G. Chandavarkar declared that “the drunken orgies, the obscene language, and the bestial festivities which have for centuries gathered around the annual recurring Holi festival, contributed to the degradation of those we call the lower classes and brought with it the degradation of the higher.”¹²⁶

To counter this supposed morally deviant behavior, the SSL devised “Holika Sammelan” (a gathering during Holi) for millworkers. The objective was to provide alternative, “innocent” entertainment in the form of sports and musical parties. Beginning in 1912, Holika Sammelan became a regular event.¹²⁷ It included lectures and musical programs in mill localities with the aim “to occupy the time which millhands would otherwise have spent in the liquor shops.”¹²⁸ Moreover, the SSL used the Holi festival for its temperance campaigns and persuaded millhands to take vows of abstinence. To force prohibition and thrift among workers, the SSL recommended regulatory measures such as the closure of liquor shops on paydays, holidays, and Sundays. It persuaded the government of Bombay to shut down the city’s liquor shops during the three Holi holidays. By 1916, this recommendation was partially accepted and the shops were closed for two days.¹²⁹ League volunteers also recommended that liquor stores should not be allowed in the vicinity of mills, factories, and docks.¹³⁰ Simultaneously, the SSL’s anti-drink campaigns reinforced the notion that alcoholism stimulated wastefulness among workers.

By 1913, millowners had used the supposed pervasiveness of alcohol to resist demands for wage hikes or bonuses. They asserted that

higher wages “enable[d] them [workers] to spend money on drinking and other concomitant vices,” and that festival bonuses “inevitably led workers to the grog shops.”¹³¹ N. M. Joshi, the secretary of the SSL, supported millowners when he declared that “much of the misery of the millhands’ lot can be traced to the widespread habit of drink. . . . A considerably large portion of their income is consumed in liquor and their standard of living is as low as it was before.”¹³² Such stereotypes were widespread. They were shared and reinforced by nationalist leaders such as Gandhi, who insisted that factory workers’ wages should not be increased beyond what was essential for their daily survival. He asserted that workers “would use the increase in wages in the grog shops or gambling dens.”¹³³ Emphasizing that “the laboring classes spend recklessly on liquor when they have money with them,” the SSL activists urged millowners to stop the Holi bonuses of millworkers. Dhanjibhai Dorabji Glider of the Bombay Temperance Council agreed with the views of SSL activists.¹³⁴ Praising the efforts of the SSL, *Jam-e-Jamshed*, a Parsi-owned reformist paper, commented that the closure of liquor shops during Holi could “wean the illiterate, ignorant laborers from indulgence in the objectionable customs associated with the festival” and keep “uneducated workers from wasting away their money on drinking.”¹³⁵ These assertions of the SSL contributed toward the creation of a consensus that millworkers irrationally spent their wages on alcohol and hence were themselves responsible for their wretched material status.

However, available data suggest that perceptions about the pervasiveness of millworkers’ liquor consumption and wastefulness were probably based on anecdotal evidence. The few available sources contradict workers’ alleged tendency to allocate a considerable part of their income to alcohol. A. R. Burnett-Hurst, who studied workers’ conditions in Bombay from 1916 to 1918, found that though a few mill employees regularly visited the “grog shop,” most factory workers spent the largest portion of their income on basic items such as food, housing, and clothing. Millworkers incurred debts not because they wasted their wages on alcohol but on account of their visits to their native villages, sickness, and weddings.¹³⁶

In 1923, the labor office of the provincial government conducted a survey of working-class budgets in Bombay.¹³⁷ The survey also reported that workers spent the largest portion of their wages on such items as food, housing, and clothing. The report could not obtain accurate accounts of workers’ spending on liquor, but estimated it to be no more than 4 percent of their earnings.¹³⁸ It also documented that

between 1914 and 1922, industrial workers' spending on alcohol had not increased in proportion to their income. Although the temperance rhetoric did not necessarily represent reality, it reaffirmed the idea that the "ignorant and irrational" laboring classes were easily susceptible to "immoral" habits such as drinking. Since workers were deemed incapable of countering the "vice" on their own, educated people assumed the responsibility to help them abandon this habit. This perceived pervasiveness of alcoholism also stimulated efforts to educate millworkers and to develop alternate, "healthier" forms of recreation and association among them.

CREATING HEALTHY AND HARMONIOUS ASSOCIATIONAL CULTURE AMONG MILLWORKERS

From the early 1910s onward, voluntary groups, most prominently the SSL and the YMCA, launched programs that sought to ameliorate the lives of millworkers materially and morally. The groups aimed at improving all aspects of workers' lives but their main motive was to shape their leisure time and to create non-combative forms of association among them. To reduce rampant illiteracy among mill laborers, the SSL began informal evening literacy classes in the mill localities of Parel, Tardeo, and Chinkalwadi. It opened reading rooms and traveling libraries to attract nearly literate workers to the healthy habit of reading. For healthy recreation during leisure time, the SSL created gymnasiums, organized football and cricket matches in mill neighborhoods, and arranged sight-seeing tours on holidays.¹³⁹ In 1917, the SSL opened a small homeopathy clinic and the Bai Bachubai Charitable Dispensary for women and children in ward F of the municipality (Fig. 4.1).¹⁴⁰

In creating these multiple facilities for millworkers, the SSL drew inspiration from transnational, institutionalized labor welfare experiments such as Toynbee Hall of London. This institution as well as the YMCAs of Britain and America had emerged in response to the perceived adverse impacts of industrial urbanization on the poor.¹⁴¹ Starting in the late nineteenth century, formation of similar voluntary associations across countries created a transnational public space, as Ian Tyrell suggests.¹⁴² The growth of this new internationalism generated greater awareness about common features of industrialization, and the European and American achievements in the fields of voluntary activism provided examples that could be replicated in other contexts as well.¹⁴³

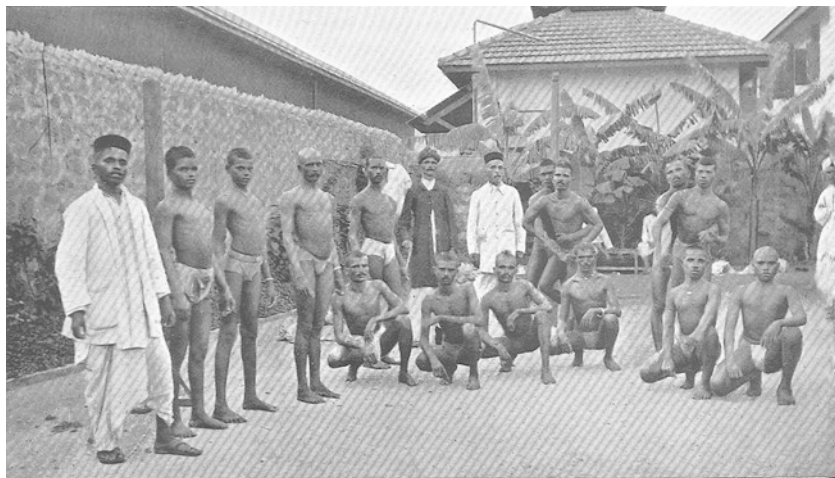


Fig. 4.1 Millhands at gymnastics. Source: A. R. Burnett-Hurst, *Labour and Housing in Bombay: A Study of the Economic Conditions of the Wage-Earning Classes in Bombay* (London: P. S. King, 1925)

In 1918, N. M. Joshi spent two months in Britain, where he observed the functioning of Toynbee Hall and other social service organizations.¹⁴⁴ In 1919, he visited the United States as a labor representative to the Draft Convention meeting of the International Labour Organization in Washington, DC. He used this trip as an opportunity to study the working of labor welfare organizations.¹⁴⁵ Thus, following the examples of British and American groups, the SSL in 1919 built a centralized office, the Working Men's Institute of Parel, to coordinate its activities.¹⁴⁶ This establishment housed the SSL dispensaries, classrooms, and libraries as well as living quarters for its volunteers.

Apart from reflecting transnational trends, the informal educational and leisure programs of the SSL indicated the concerns of nationalist leaders and millowners. They mirrored a nationalist desire to provide leadership to workers in ways that could prevent social frictions and create a disciplined (read docile) working class. To create a broader, mass-based nationalist movement, the Indian National Congress (INC) under Gandhi began its attempts to reach out to peasants and industrial

workers in the 1910s. During the First World War and interwar periods, INC leadership in the peasant movements of Champaran, Kheda, and Bardoli illustrated this policy.¹⁴⁷ Gandhi organized millworkers during his participation in the Ahmedabad mill strike of 1918.¹⁴⁸

In reaction to the rising cost of living during the First World War, the millworkers of Ahmedabad demanded a 50 percent increase in their wages from their Indian millowners. Gandhi's active involvement in this strike underscored the mass-based nature of his politics. Simultaneously, it reflected his goal to discipline the behavior of the strikers and to promote non-confrontational methods of resolving conflicts. As the leader of the strike, he asserted his principles of non-violence and social harmony and persuaded workers to adopt the peaceful methods of the hunger strike and *satyagraha*¹⁴⁹ to press for their demands. Invoking the concept of "pure justice" in which employers and employees sorted their disputes as family members,¹⁵⁰ his speeches and pamphlets on the Ahmedabad strike cautioned workers against violent means or being "angry with his employer or bear[ing] him any grudge."¹⁵¹ Simultaneously, he advised millworkers against supposed immoral and wasteful habits such as gambling and asserted that "many [workers] are in the habit of frequenting tea stalls and idling away their time in gossip and eating and drinking when they don't need to. Workers should keep away from such tea stalls."¹⁵² These expectations underscored the perceived need in a largely elitist nationalist movement to discipline the "habitually" unruly laboring classes and to socialize them in peaceful, righteous, and productive social conduct.¹⁵³

Similarly, the growing interests of millowners in the worker well-being activism of the SSL reflected their own anxieties about the need to control labor. Thousands of millworkers participating in the general textile mill strike of 1919 and the subsequent, prolonged strikes of the 1920s intensified the anxiety of employers. The growing influence of militant textile labor unions the Girni Kamgar Mahamandal and later the communist-led Girni Kamgar Union had alarmed millowners.¹⁵⁴ N. B. Sakalatwala, the manager of the Tata group of mills, emphasized the role of social service in creating a happy and contented workforce.¹⁵⁵ Lady Meherbai Tata, a prominent Parsi philanthropist and wife of Sir Dorab Tata, a highly successful Indian millowner, reiterated the role of humanitarian measures:

We hear too often of late of the labour problem. We have got to prevent labour from becoming a problem. We have got to treat the working man

and the working woman as human beings. It is the duty of the employers to place them in such surroundings and in such conditions of living, as will enable them to give of their best to the industry and in the service of their country. Discipline at best is a poor substitute for good will; and it is good will and contentment alone that will make a good worker.¹⁵⁶

She provided examples from the Tata Group of Textile Mills in Bombay and Nagpur where the owners had employed the SSL to organize labor welfare programs in their mills. Sir Fazalbhoy Currimbhoy, the owner of the Currimbhoy Ebrahim group of mills, reiterated that welfare could neutralize the influence of trade unions among workers.¹⁵⁷ In March 1918, the Currimbhoy Ebrahim mills hired the SSL to operate its Workmen's Institute and to coordinate a comprehensive scheme of educational, economic, and recreational welfare work among their operatives.¹⁵⁸ A year later, the Tata Group of Textile Mills employed the SSL to manage similar activities in the Tata Workmen's Institute.¹⁵⁹

In both the Ebrahim Mills and Tata Mills, the SSL was instrumental in forming work committees.¹⁶⁰ Under the supervision of the SSL's social workers, these committees organized mill laborers in several groups, each of which consisted of fifteen elected representatives, five for workers and ten for labor supervisors. Mill managers and social service workers also participated in the meetings of these committees, where workers were allowed to voice their grievances in a peaceful manner. Although N. B. Saklatwala, the manager of Tata Mills, viewed these committees as an effective counter to trade union activism, he emphasized that "the committees, however, were not allowed to discuss questions of wages or the general topics affecting labour, as the workmen were quite illiterate."¹⁶¹ This injunction reflected the marginal role of the League in economic issues. Still, the SSL enjoyed relative autonomy in charting the activities related to the education and leisure of workers.

The educational work at the workmen's institutes consisted of informal day classes in basic literacy for mill working boys and girls below fourteen years of age, and nightly literacy classes, a reading room, and a library for full-time male workers. There were sewing classes for women workers and female relatives of male laborers.¹⁶² By the early 1920s, more than 200 half-timers (or workers below sixteen years of age) and adults were attending these informal classes.¹⁶³ The popularity of the reading room and library reflected the fact that more workers could read and were interested in reading Marathi or Hindi newspapers and

magazines.¹⁶⁴ Simultaneously, the SSL organized illuminated slide shows that taught its targeted audience the virtues of temperance, sanitation, and thrift.¹⁶⁵

In the workmen's institutes at the Currimbhoy, Ebrahim, and Tata mills, and in its own institute at Parel, the SSL organized social clubs with teashops, gymnasiums, indoor games, and theatrical performances.¹⁶⁶ The reports of these institutes observed the growing popularity of such facilities among millworkers. They enthusiastically participated in theater performances, while sports such as *akhadas* or wrestling matches attracted regular attendance and the participation of male workers.¹⁶⁷ The SSL also organized frequent excursions to nearby places and cinema shows to entertain male workers and their children. During the festival holidays, the SSL organized football and cricket matches and took workers and their children for day trips.¹⁶⁸ Through these multifaceted activities, the SSL institutionalized a culture of leisure among millworkers. Although its underlying aim was to regulate workers' lives outside the mills and to keep them away from the "evil" vice of alcohol, the SSL created new means of recreation and socialization for workers. However, these new leisure initiatives were limited because they mostly excluded women. This tendency indicated a growing masculinization of the subaltern urban public sphere, and the programs of the YMCA reflected similar objectives and trends.

From the early 1920s onward, the YMCA of Bombay started its activities among the millworkers of the municipality's G ward. Founded in 1875, the Bombay branch of the YMCA of India, Burma, and Ceylon organized both Indian Christian and non-Christian men with the aim of inculcating in them the values of Christian social service. Reflecting a transnational leadership, the YMCA of Bombay had members from the British and American YMCAs.¹⁶⁹ Until the early 1920s, it focused on serving military men and students. To improve their spiritual and physical health it organized social clubs, prayer meetings, and various sports events.¹⁷⁰ In 1921, the American YMCA initiated its programs for the industrial workers of Bombay Presidency.

By the late nineteenth century, the YMCA of the United States had emerged as an urban reform institution that targeted social problems arising from rapid industrialization.¹⁷¹ Rapidly expanding its middle-class base, it became active among the working class, particularly railwaymen, teaching them to become responsible, self-reliant, healthy citizens and faithful workers.¹⁷² In its attempts to create means of association and

recreation for workers, the American YMCA sought to provide a counter to industrial unrest. To facilitate its social work, the YMCA gradually professionalized its activities and appointed paid secretaries and workers to systematically implement its schemes.¹⁷³ In order to expand their welfare programs across geographical regions such as China, India, and the Middle East, the international committee of the YMCA generated funds and established branches in different international locations.¹⁷⁴

According to its guiding principles, the YMCA's activities among the working classes reflected Christian values of universal brotherhood and the responsibilities of the privileged toward the weak and poor.¹⁷⁵ In the context of urban industrialization, this message meant channeling elite, educated young men's energies into organizing welfare programs for the working classes.¹⁷⁶

The international committee of the YMCA applied this framework to industrial cities in India. Drawing from their experiences in America, the YMCA of India, Burma, and Ceylon perceived its role as a mediator between employers and employees. In a review of its industrial work, the National Council of the Indian YMCA claimed that in the industrial centers of India:

The thing lacking is some person trusted by both employer and employed, and seeking the best interests of both. Suspicions and misunderstandings, injustice and ignorance precipitate strikes which are often needless. . . . These things arise out of the chasm that divides employers and employed. Very much could be done by a trained man or woman holding a position similar to that of the industrial welfare worker in many English firms.¹⁷⁷

The perceptions of the YMCA echoed the SSL's insistence that "a welfare worker serves as a link between employers and employees and through his instrumentality a human touch is established between them."¹⁷⁸

The first YMCA industrial welfare center was started in 1919 in the Tata Empress Mills of Nagpur, another location of textile mills in Bombay Presidency. Here YMCA workers organized schools for mill children and sewing and singing classes for women millworkers and the wives and daughters of male workers. Sports activities for adult male workers were also organized.¹⁷⁹ In 1924, William Earl Dodge Ward, the YMCA's American secretary, started similar programs in Bombay City. A native of Massachusetts and a graduate of Amherst College, Ward belonged to a

missionary family. Before joining the welfare department of the YMCA in Bombay, he had worked in Turkey, the United States, and Calcutta.¹⁸⁰ His wife, Dora Judd Ward, who was involved with the Young Women's Christian Association (YWCA) of America, accompanied him.¹⁸¹ Before settling in Bombay, the Wards visited Nagpur to study the welfare work of the YMCA in the Empress Mill.¹⁸² Once in Bombay, they met reformers such as N. M. Joshi, K. Natarajan, and Prothan Joseph, editor of the daily *Bombay Chronicle*, to discuss welfare activities among millworkers.¹⁸³

In March 1925, William Ward inaugurated the YMCA industrial welfare programs at Naigaum, a prominent mill neighborhood situated in G ward of the municipality and within a year, he had created a center to coordinate the work of social welfare. D. N. Tilak, an Indian Marathi Christian, joined as the coordinator of the YMCA labor welfare activities.¹⁸⁴ The American YMCA supported Ward while the Bombay branch paid other employees, including Tilak.¹⁸⁵ Donations from millowners and other elite Indians, the Red Triangle Fund of the YMCA, and small, occasional grants from the municipality provided financial support for the YMCA worker well-being programs.¹⁸⁶ The City of Bombay Improvement Trust leased a small plot of land in Naigaum where the Development Department of the provincial government of Bombay financed and supervised the building of a YMCA center that was opened in 1926.¹⁸⁷ General Motors of India donated a Chevrolet car to the social welfare branch, "which made the work of supervision so much easier and more effective."¹⁸⁸

The understandings of the YMCA staff about millworkers and their problems reinforced the stereotypes of other welfare organizations:

In the north end of the city of Bombay a large number of mill workers have been living in one room tenements. . . . Most of them are immigrants to the city. . . . Their housing and surroundings are not ideal, but their abuse of these facilities creates an even greater need for some organized effort for improvement. It is to this work of educating and uplifting these village folk, overwhelmed with the strange demands of their city and mill life that the Young Men's Christian Association of Bombay has recently directed its attention. Its field will be the whole range of human activity during the off hours of the workers. Its desire is to arrange for the utilization of the leisure hours of such people.¹⁸⁹

Like the SSL, they reaffirmed the crucial roles of social activists in saving the workers from their own inadequacies.

The YMCA insisted that workers' alienation in the city affected their work in the mills, led to inefficiency, and made it "exceedingly difficult to produce finished goods that will compare favorably with [those made by] the skilled workmen of Europe."¹⁹⁰ The literacy and physical training programs of the YMCA aimed to counter this alienation and create more efficient and contented workers. These methods would keep workers away from "unscrupulous" agitators.¹⁹¹ Such intentions mirrored the concerns of employers, some of whom had been arguing that "there can be marked improvement in [a worker's] skills if he is well-paid, comfortably housed, and provided with innocent amusements and recreation."¹⁹² In early twentieth-century Bombay, higher wages and comfortable housing remained contentious issues. Nevertheless, the activism of the SSL and the YMCA did foster "innocent amusements."

Ward claimed that the millworkers' enthusiasm for sports programs indicated their desire for leisure activities.¹⁹³ According to him, after their workday, laborers eagerly awaited the arrival of the YMCA volunteers with soccer and cage balls. Both the *chokras* (young boys) and men enthusiastically participated in the games under the supervision of YMCA men while a crowd of chawl dwellers eagerly watched them.¹⁹⁴ Ward asserted that sport not only provided more opportunities for healthy recreation, but that the underlying spirit of togetherness in sports also contained the potential to break down social differences. He described how one day the chawls' rent collector, a much-despised figure for his harsh collecting tactics, could not resist "joining freely with the others in kicking the football about. . . . No one feared him when he was playing with them, for play breaks down such prejudices and makes men very human."¹⁹⁵ The success of the YMCA physical recreation programs stimulated initiatives by millworkers themselves to make provisions for games such as wrestling matches.¹⁹⁶ Besides football games and wrestling matches, the YMCA also held weekly physical training and Boy Scout classes for the younger boys of this neighborhood. The physical education department supervised these classes.¹⁹⁷ The YMCA also introduced workers to music from a gramophone as well as indoor games such as carom (a game played on a wooden board with small discs and strikers) and musical chairs.¹⁹⁸

The recreational and physical training programs had started as soon as the YMCA began its industrial welfare program in March 1925. Within a month, for mental stimulation, Ward announced that "a free night school will be opened from Monday next at 7:30 p.m. Classes in

Marathi, English, First Aid and Boy Scouts will begin. All those interested should hand in their names.”¹⁹⁹ The municipality provided one of the rooms in its day school at Naigaum for the YMCA night classes. The classes were held in the evenings, at least three or four times a week, and in them young boys and men learned basic reading and writing skills in Hindi, Marathi, Gujarati, and English. After the employment of four paid teachers in July 1925, classes were held throughout the week. There were lectures on hygiene and about the problems resulting from drinking alcohol.²⁰⁰

The YMCA designed its night classes, like its recreational programs, to occupy the leisure time of millworkers and to prevent them from involvement in drinking, gambling, and trade union activities. By the end of 1925, the school recorded an average daily attendance of fifty to sixty students.²⁰¹ After the opening of the YMCA center in Naigaum in 1926, a small library and reading room gave night students and other workers a place to read magazines, newspapers, and books. Emphasizing the significance of his night classes in creating new sites of socialization, Ward claimed that “many, of course found the school rooms a pleasant place to spend the evening, even though study was not attractive. The cleanliness, the companionship, the better lights and orderliness, the satisfaction of improving themselves were all factors of attraction.”²⁰² This literacy program also provided an opportunity for middle-class Indian youth to participate in social work. Beginning in 1926, nearly twenty students from the Secondary Training College of Bombay volunteered to teach the night class.

For a broader audience of workers and their families, the YMCA regularly organized educational “magic lantern” lectures. Hundreds of men, women, and children attended them. Emphasizing that illustrated lectures were more effective than printed material among a largely illiterate audience, Ward reported that the magnified visual images roused workers’ interest immediately.²⁰³ One of the most popular of these lectures was a didactic tale titled *Haridasi* that narrated how a Bengali lawyer took to alcohol, started beating his wife and children, but finally at the deathbed of his wife reformed and promised never to drink.²⁰⁴ Ward asserted that this tale had a sobering impact on an audience who frequently consumed alcohol and did so more excessively on their paydays.

The use of lantern slide shows on a screen as a method of educating the “ignorant” masses was popular among many contemporary social service organizations including the BSA, SSL, YMCA, and the Infant

Welfare Centers of Bombay. This technology underscored the increasingly institutionalized and transnational character of voluntary activism. It suggested a universalization of pedagogic methods and subjects that were deemed appropriate for the working classes. In the early twentieth century, the YMCA of America was one of the primary suppliers of prepared slides. To meet the increasing demands for its slides, the National Council of the YMCA of India, Burma, and Ceylon created a separate lecture department. The slides were shipped from the United States to India and were sold to social service groups of various cities.²⁰⁵ The department also rented out its prepared lantern lectures and equipment to other organizations.²⁰⁶

The activism of these groups reflected the limitations of social service culture in Bombay. The fact that the anti-drink campaigns and recreational facilities of both the SSL and the YMCA primarily targeted male workers and boys and the insistence on recreational sports, *akhadas*, and sightseeing tours, underscored the primarily masculine nature of social service programs in Bombay. Although girls sometimes attended night classes in the Naigaum center, literacy classes mostly attracted male workers and boys. This trend reflected the prevalent elite notions that associated women with the private space of home and their domestic duties as wives and mothers. Even the limited efforts of the Mahila Seva Mandal, a sister organization of the SSL, focused on cultivating “feminine” skills such as sewing, first aid, home hygiene, and nursing among women workers and the wives and daughters of male workers.²⁰⁷ The YMCA organized corresponding activities. Dora Judd Ward, the wife of William Ward, collaborated with the YWCA to arrange singing and sewing classes for women at the YMCA Naigaum center.²⁰⁸ However, most welfare programs targeting women millworkers focused on teaching them the “appropriate” methods of child rearing. These programs constitute the subject of Chapter 6.

MODES OF MANAGING THE MILL-WORKING POPULATION

The educational and propaganda methods of the YMCA’s welfare department served as examples for a variety of employers, showing them ways to engage their workers. In 1927, the Bombay, Baroda, and Central Indian Railways invited the YMCA to manage welfare issues among their workers. Simultaneously, the Bombay Municipality hired the YMCA to organize games and literacy classes for municipal workers.²⁰⁹ By the

late 1920s, many mills in Bombay had inaugurated sports and cultural activities to establish contact with their workers. Those who established these programs modeled them after the initiatives of the social service groups. In the years following the long and financially damaging textile labor strike of 1928, many mills organized recreational and welfare programs for their workers. The Bombay Labour Department reported that during the first months of 1930, seven mills held social gatherings, two celebrated religious festivals such as *Ganapati Mahotsva*, while a group of four mills created a common sports club that arranged cricket tournament matches among the teams of workers from various mills.²¹⁰ In 1936, during the *Dussehra* festival holidays, the Manchester Mills of the E. D. Sassoon Group in Bombay took its workers by train to Ahmedabad.²¹¹ The report of this excursion commented that “if employers of labour follow the example of Manchester mills, they will be able to create a bond of sympathy between themselves and their employees.”²¹²

Although welfare measures were neither uniform nor adopted by every mill, by the late 1930s they became a means to promote workers’ well-being, contentment, and discipline. Discussing the welfare policies of millowners, the Textile Labour Enquiry Committee of 1939 recorded that twenty Bombay mills provided recreational facilities of various kinds.²¹³ Many of them had gymnasiums, *akhadas*, and clubs where they arranged for sports events “with a view to the encouragement of sports-manship, discipline and healthy recreation amongst cotton millworkers.”²¹⁴ The government reports on labor regularly recorded how several mills had arranged libraries and reading rooms while others organized *bhajan mandalis* (group singing of devotional songs) and provided space for theatrical performances.²¹⁵

By the 1940s, these employer-sponsored sports and social gatherings of workers increased and became institutionalized. From 1941 onward, the Millowners’ Association organized an annual all-India inter-mill wrestling tournament for millworkers.²¹⁶ Industrial groups such as Sassoon established social clubs to coordinate their annual volleyball and football tournaments.²¹⁷ The employers acknowledged that “games and physical exercise are conducive to good health, and good health makes for greater efficiency and contentment.”²¹⁸ These gatherings and programs also indicated millowners’ intentions to forge amicable, albeit hierarchical, relations between the employers and employees. To symbolize their direct participation in recreational and cultural events, millowners and managers held concluding ceremonies at which they

presented awards to the participants.²¹⁹ The ceremonies also included songs and speeches in Marathi that “eulogized the directors and management.”²²⁰ Although millowners were unwilling to increase wages or provide clean housing, they readily adopted recreation and cultural programs as techniques to control the leisure time of their workers and to portray themselves as their concerned patrons.

CONCLUSION

The programs that educated social activists established to “uplift” the putatively degenerate moral and material lives of the “ignorant” industrial worker in early twentieth-century Bombay created greater awareness about the living conditions of workers. In the post-plague years, as millowners and the provincial government were evading the responsibilities of providing clean industrial housing, social activists highlighted the abominable conditions of working-class localities. They kept reminding the millowners and the colonial state of their duties to provide basic amenities to the city’s working classes. Moreover, the schemes of moral and physical well-being also drew attention to the cultural and recreational needs of workers. These aspects of working-class lives were largely neglected in official or trade union discourses.

However, social service discourse and practices also illustrate contemporary biases and paternalistic tendencies. The practices of voluntary groups were significantly informed by the contemporary nationalist ideals of self-improvement and self-reliance and also global discourses of social service that were based on Christian morals. Most prominently, social service activism embodied Gandhian ideals of trusteeship, and encouraging the privileged to help out the underprivileged. Unfortunately, such noble ideas of service also strengthened essentialist assumptions about the passivity of the working classes. Although participation in voluntary activism implicitly established the elite, educated people as conscious, responsible putative leaders of a future nation, it also constructed the working-class population as undisciplined and as passive recipients of reforms.

Thus social service practices in Bombay reinforced the constructs of “ignorant,” “filthy,” and “irresponsible” working classes that the nationalists and global volunteerism had created. Although the Social Service League members at times emphasized systemic problems outside the control of the individual, structural issues largely remained on the fringes

of social service discourse. Instead, echoing nationalist leaders such as Gandhi, social activists constructed workers' "habits of life" and their self-destructive attraction to the "vice" of drinking as primary reasons for poverty and ill-health. By identifying sobriety, discipline, and awareness as the key to improvement, they consciously or unconsciously obscured the material bases of workers' dismal conditions. The accounts of early twentieth-century textile trade union leaders amply document that insufficient wages, frequent unemployment, and rising food prices, and not a lack of sanitary awareness, constrained workers' well-being.²²¹ Even during the harsh periods of the First World War and the subsequent worldwide economic depression, millowners had tried to cut down bonuses and were reluctant to raise wages.²²² In the context of structural inequalities and material miseries, the spectacles of sports events complete with the exposed, glistening, well-built bodies of millworkers merely created an illusion of well-being.

NOTES

1. *Social Service Quarterly* (henceforth *SSQ*), July 1915, 21.
2. *Annual Report of the Bombay Millowners' Association* (henceforth *BMOA*), 1913, vii.
3. *Bombay Chronicle*, 10 January 1919, 8; *Bombay Labour Gazette*, May 1928, 752.
4. Bipan Chandra, *The Rise and Growth of Economic Nationalism in India: Economic Policies of Indian National Leadership* (New Delhi: People's Publishing House, 1966).
5. John McLane, *Indian Nationalism and the Early Congress* (Princeton, NJ: Princeton University Press, 1977); Stanley Wolpert, "The Indian National Congress in Nationalist Perspective," in Stanley Wolpert and Richard Sisson, eds., *Congress and Indian Nationalism: The Pre-Independence Phase* (Berkeley: University of California Press, 1988), 21–46.
6. Sumit Sarkar, *Modern India* (New Delhi: Macmillan, 1983), 96–100.
7. Sanjay Joshi has argued that since the late nineteenth century, indigenous elites gradually appropriated the public sphere to serve their own interests. In colonial Lucknow, the middle class used the public sphere to carve a distinct identity for itself and for an "ideal" national culture. Their discourse and activism set them apart from their British rulers, the "archaic" and hedonist traditional Indian elite, and the "degenerate" lower classes. *Fractured Modernity: The Making of a Middle Class in Colonial North India* (New Delhi: Oxford University Press, 2001).

8. The Preamble to the Constitution of the Servants of India Society, written by Gopal Krishna Gokhale and quoted in T. V. Parvate, *Gopal Krishna Gokhale: A Narrative and Interpretative Review of His Life, Career and Contemporary Event* (Ahmedabad, India: Navjivan Press, 1959), 192.
9. For the orientation and features of the elite social reform initiatives, see Sumit Sarkar and Tankia Sarkar, eds., *Women and Social Reform in Modern India: A Reader* (Bloomington: Indiana University Press, 2008); Charles Heimsath, *Indian Nationalism and Hindu Social Reform* (Princeton, NJ: Princeton University Press, 1964); Kenneth W. Jones, *Socio-Religious Reform Movements in British India* (Cambridge: Cambridge University Press, 1990); Gail Minault, *Secluded Scholars: Women's Education and Muslim Social Reform in Colonial India* (Delhi: Oxford University Press, 1999).
10. Carey A. Watt, *Serving the Nation: Cultures of Service, Association, and Citizenship in Colonial India* (Delhi: Oxford University Press, 2005), 2–10.
11. *Ibid.*, 99.
12. S. Natrajan, *A Century of Social Reform in India* (New York: Asia Publishing House, 1959), 120–22.
13. B. R. Nanda, *Gokhale: The Indian Moderate and the British Raj* (Princeton, NJ: Princeton University Press, 1977), 169–77.
14. Gokhale quoted in Parvate, *Gopal Krishna Gokhale*, 191.
15. Parvate, *Gopal Krishna Gokhale*, 193.
16. The *Swadeshi* (literally of one's own country) movement of 1905–1908, the first mass-based, anti-colonial nationalist movement, opposed the divisive policies of Lord Curzon, the governor-general of India, in the eastern province of Bengal. It soon spread to other parts of India as nationalists opposed the exploitative economic policies of the Raj. Sumit Sarkar, *Swadeshi Movement in Bengal, 1903–1908* (New Delhi: People's Publishing House, 1973).
17. Carey A. Watt, "Education for National Efficiency: Constructive Nationalism in North India, 1909–1916," *Modern Asian Studies*, Vol. 31, No. 2 (May 1997): 339–74.
18. Mohandas K. Gandhi, *Hind Swaraj or Indian Home Rule* (Ahmedabad, India: Navjivan Trust, 1938).
19. Gandhi, *Hind Swaraj*, 52–57.
20. *The Collected Works of Mahatma Gandhi*, Vol. XIV, October 1917–July 1918 (New Delhi: The Publication Division, 1965), 126.
21. Eleanor Zelliot, "Congress and the Untouchables," Sisson and Wolpert, eds., *Congress and Indian Nationalism*, 182–97.
22. According to official estimates, between 1896 and 1900, the plague killed more than 60,000 people in Bombay City while thousands left the city in search of safer places. This loss of population created a dearth

- of labor in the city's dockyard and textile mills. S. M. Edwardes, *The Gazetteer of Bombay City and Island*, Vol. III (Bombay: Times of India Press, 1909), 175. Similar concerns informed public health and sanitation policies in other regions of colonial India. See Veena Talwar Oldenberg, *The Making of Colonial Lucknow* (Princeton, NJ: Princeton University Press, 1984); David Arnold, "Cholera and Colonialism in British India," *Past and Present*, No. 113 (November 1986): 118–51.
23. "Memorandum by the Army Sanitary Commission on the Administration Report of the Municipal Commissioner for the City of Bombay for the Year 1898–99," *Proceedings of the General Department of the Government of Bombay*, Maharashtra State Archives (henceforth MSA), Vol. 7, 1900, 251–52.
 24. Dipesh Chakrabarty, *Habitations of Modernity: Essays in the Wake of Subaltern Studies* (Delhi: Permanent Black, 2002), 66–79.
 25. Postcolonial scholars such as Chakrabarty and Homi Bhabha have argued otherwise, saying that the narrative of colonial modernity has essentialized India as a place where the transition to modernity would always be incomplete because of firmly rooted archaic traditions and fundamental cultural differences between the colonizers and colonized, between Europe and the Orient. See Dipesh Chakrabarty, "Postcoloniality and the Artifice of History: Who Speaks for 'Indian' Pasts?" *Representations*, Vol. 37 (Winter 1992): 1–26; Homi Bhabha, *The Location of Culture* (London: Routledge, 1994), 85–92.
 26. "Memorandum by the Army Sanitary Commission on the Administration Report of the Municipal Commissioner for the City of Bombay for the Year 1898–99," *Proceedings of the General Department of the Government of Bombay*, MSA, Vol. 7, 1900, 252.
 27. *Executive Health Officer's Report for the 2nd Quarter of 1908*, MSA, 8.
 28. *Ibid.*
 29. *Evidence Recorded by and Written Statements Submitted to the Textile Factories Labour Committee, 1907* (Bombay: Central Government Press, 1907), 36.
 30. *Annual Report of the BMOA*, 1908, x.
 31. Jehangir J. Cursetji and Dinsha Bomanji Master, "Unhygienic Bombay: Its Causes and Its Remedies," in *Transactions of the Bombay Medical Congress, 1909*, MSA (Bombay: Times of India Press, 1910), 371.
 32. *Ibid.*, 380.
 33. *Ibid.*
 34. A. R. Burnett-Hurst, *Labour and Housing in Bombay: A Study in the Economic Conditions of the Wage-Earning Classes in Bombay* (London: P. S. King and Sons, 1925), 27.
 35. *Appendix to the Fourteenth Annual Report of the Bombay Sanitary Association, 1918*, MSA (Bombay: Karnataka Printing Press, 1918), 1.

36. Ibid.
37. *Annual Report of the BSA for the Years 1920 and 1921*, MSA, 2.
38. The BSA received annual grants of Rs. 1500 each from the Municipal Corporation and the Provincial Government. In addition the Royal Sanitary Institute of London sent small contributions occasionally. See *Proceedings of the General Department of the Government of Bombay*, MSA, File No. 938, 1917–1918, 9; *Annual Report of the BSA for the Years 1920 and 1921*, MSA, 4.
39. *Annual Report of the BSA for the Year 1914*, MSA, 9.
40. *Appendix to the Fourteenth Annual Report of the BSA for the Year 1918*, MSA, 1.
41. Ibid., 2.
42. The available documents of the BSA do not provide adequate information about the social background or educational qualifications of its men and women health visitors. However, the fact that they paid a fee to attend the formal sanitary classes conducted by the BSA, appeared for exams, obtained a certificate of training, and then worked as salaried employees of the BSA, suggests that they had access to education and belonged to the section of urban professionals and were not from the ranks of the factory and non-factory working classes.
43. *Annual Report of the BSA for the Year 1913*, MSA, 1–2.
44. *Annual Reports of the BSA for the Years 1914, 1918, 1919, and 1921*, MSA.
45. *Appendix to the Annual Report of the BSA for the Year 1918*, MSA, 14.
46. Ibid., 2.
47. Constructed from various *Annual Reports of the BSA*, MSA.
48. *Annual Report of the BSA for the Year 1913*, MSA, 19–21.
49. *Annual Report of the BSA for the Years 1920 and 1921*, MSA, 1.
50. *Annual Report of the BSA for the Year 1919*, 5. In the context of colonial Zimbabwe, Timothy Burke has delineated how the various campaigns to introduce modern notions of hygiene to colonized Africans categorized certain commodities such as soap as essential for the everyday cleaning routine. *Lifebuoy Men, Lux Women: Commodification, Consumption, and Cleanliness in Modern Zimbabwe* (Durham, NC: Duke University Press, 1996), 167–68.
51. *Annual Report of the BSA for the Year 1919*, MSA, 5.
52. Ibid.
53. Sudipta Kaviraj, “Modernity and Politics in India,” *Dedalus*, Vol. 129, No. 1 (2000): 137–62.
54. *Speeches Delivered by Lord Sydneyham (Sir George Clarke) as Governor of Bombay 1908–1913* (Kolhapur, India: Mission Press, 1913), 44.
55. Ibid.
56. Ibid., 46.

57. *Appendix to the Annual Report of the BSA for the Year 1918*, MSA, 14.
58. Ibid.
59. *SSQ*, April 1924, 207.
60. Ibid.
61. V. B. Karnik, *N. M. Joshi: Servant of India* (Bombay: United Asia Publications, 1972), 21, 63–70.
62. *SSQ*, July 1915, 21.
63. Ibid.
64. N. M. Muzumdar, “The Social Problems of a City,” *SSQ*, July 1916, 34.
65. In the 1910s, the textile mills of Bombay employed about 120,000 workers. Together with their families and dependents their number was more than 200,000, approximately 10 percent of the city’s total population. *Annual Factory Report of Bombay Presidency*, 1916, 2; *SSQ*, July 1916, 34.
66. *Census of India, 1931, Vol. IX, Part I*, 158–59.
67. Burnett Hurst, *Labour and Housing in Bombay*, 29.
68. *Bombay Labour Gazette*, September 1922, 31; *Census of India, 1931, Vol. I*, 87–88.
69. Burnett-Hurst, *Labour and Housing in Bombay*, 25; *Report of the Royal Commission on Labour in India*, 1931, Vol. I, Part I, 196–97, 515–16.
70. Muzumdar, “Social Problems,” 31.
71. Analyzing local policies and their implications for the poor in early twentieth-century North India, Nandini Gooptu claimed that British officials and the colonial middle class shared stereotypical images of the poor and the problems they supposedly posed for urban progress. *The Politics of the Urban Poor in Early Twentieth Century India* (Cambridge: Cambridge University Press, 2001), 66–70.
72. V. K. Kale, “Drinks and Drugs,” *SSQ*, October 1923, 62.
73. D. S. Savardekar, “Industrial Housing,” *SSQ*, April 1921, 194.
74. C. B. Pooviah, “Infant Welfare,” *SSQ*, January 1923, 157.
75. *SSQ*, January 1923, 170.
76. *SSQ*, July 1915, 24.
77. *SSQ*, January 1923, 214; *SSQ*, July 1923, 54–55.
78. *Social Service League Bombay, Sanitation Department, Pamphlet No. 1*, Bombay Pamphlets, etc., Royal Asiatic Society Library, Mumbai (henceforth RASL), Vol. 3, 1, 1922.
79. Vaikunth Lal Mehta, “Foreword,” *Social Service League Pamphlet No. 1*, n.p.
80. *Social Service League Pamphlet No. 1*, 19.
81. “Second Sanitation Round: A Visit to the Den of Death and Disease,” *Social Service League Pamphlet No. 1*, 22.
82. Chakrabarty, *Habitations*, 66.
83. H. L. Kaji, “Impressions of Prof H L Kaji: Fourth Sanitation Round of the Social Service League,” *Social Service League Pamphlet No. 1*, 49.

84. Ibid., 48.
85. "Second Sanitation Round," *Social Service League Pamphlet No. 1*, 22.
86. "First Sanitation Round, Sunday 13 August 1922, F Ward," *Social Service League Pamphlet No. 1*, 19–20.
87. P. G. Kanekar, "Wonders of Slumland," *Social Service League Pamphlet No. 1*, 33.
88. "Second Sanitation Round," *Social Service League Pamphlet No. 1*, 27.
89. *Social Service League Pamphlet No. 1*, 1.
90. Kaji, "Impressions," *Social Service League Pamphlet No. 1*, 44.
91. *Social Service League Pamphlet No. 1*, 2–3.
92. "Appeal to Bombay Citizens," *Social Service League Pamphlet No. 1*, 16.
93. Mehta, "Foreword"; M. A. Dabholkar, "Impressions of 3rd Sanitary Round," *Social Service League Pamphlet No. 1*, 40–41.
94. J. E. Sandilands, "Reply of J E Sandilands, Executive Health Officer of Bombay Municipal Corporation to the SSL," *Social Service League Pamphlet No. 1*, 30; R. H. A. Delves, "Reply from RHA Delves, Chairman Bombay Improvement Trust," *Social Service League Pamphlet No. 1*, 41.
95. "Social Service League Bombay, Report of the Quarter Ending in December 1922," *SSQ*, January 1923, 214.
96. *Proceedings of the Bombay Municipal Corporation*, 1926, Office of the Brihann Mumbai Municipal Corporation, Mumbai (henceforth BMC), 261.
97. Ibid., 262.
98. *SSQ*, October 1923, 26.
99. *Proceedings*, BMC, 1926, 261.
100. Kaji, "Impressions," *Social Service League Pamphlet No. 1*, 42.
101. "Appeal to Bombay Citizens," *Social Service League Pamphlet No. 1*, 16.
102. Ibid.
103. Anthony J. Parel, *Gandhi's Philosophy and the Quest for Harmony* (Cambridge: Cambridge University Press, 2006), 70–75.
104. Gandhi, *Collected Works*, Vol. XVIII, 133–34.
105. *Report of the Indian Newspapers Published in Bombay Presidency* (henceforth *BPNNR*), September 1905, 12.
106. *Report of the Indian Factory Labour Commission 1908* (henceforth *IFLC 1908*), Vol. II, 114.
107. The Factory Act of 1891 had limited the working hours of women to eleven. Until the passage of the Factory Act of 1911 that restricted male workers' hours to twelve, male operatives worked between fourteen and sixteen hours a day. Rajani Kanta Das, *Factory Legislation in India* (Berlin: De Guyre, 1923), 8–84.
108. *IFLC 1908*, Vol. II, 127.
109. Ibid., 103.

110. Ibid., 23.
111. Ibid., 88.
112. *IFLC 1908*, Vol. I, 22.
113. *IFLC 1908*, Vol. II, 87.
114. Pointing to similar tendencies in post-industrial revolution Britain, Hans Medik has argued that in the emerging moral, rational, bourgeois culture there, the perceived excesses of plebeian culture including drinking alcohol, which represented a realm beyond reason and discipline and, therefore, attracted severe middle-class critique. "Plebeian Culture in the Transition to Capitalism: Everyday Life and Popular Culture," in Raphael Samuel and Gareth Stedman Jones, eds., *Culture, Ideology and Politics: Essays for Eric Hobsbawm* (London: Routledge, 1982), 85.
115. Sumanta Banerjee, "Marginalizing Women's Popular Culture in Nineteenth Century Bengal," in Kumkum Sangari and Sudesh Vaid, eds., *Recasting Women: Essays in Indian Colonial History* (New Delhi: Kali for Women, 1989), 127–79; Charu Gupta, *Sexuality, Obscenity and Community: Women, Muslims and the Hindu Public in Colonial India* (New York: Palgrave, 2002), 30–122; Nita Kumar, *The Artisans of Banaras: Popular Culture and Identity, 1880–1986* (Princeton, NJ: Princeton University Press, 1988), 190–95.
116. *BPNNR*, March 1912, 25; Ashwani Tambe, *Codes of Misconduct: Regulating Prostitution in Late Colonial Bombay* (Minneapolis: University of Minnesota Press, 2009), 100–122.
117. Susan Bayly, *Caste Society and Politics in India: From the Eighteenth Century to the Modern Age* (Cambridge: Cambridge University Press, 1999), 182–85.
118. Lucy Carroll, "The Temperance Movement in India: Politics and Social Reform," *Modern Asian Studies*, Vol. 10, No. 3 (1976): 417–47. For the provincial government's excise policy, see *Report of the Excise Committee appointed by the Government of Bombay, 1922–23*, Vol. I (Bombay: Government Central Press, 1924).
119. Harald Fischer-Tine and Jana Tschurennev, eds., *A History of Alcohol and Drugs in Modern South Asia: Intoxicating Affairs* (London: Routledge, 2014), 4–5.
120. Sarkar, *Modern India*, 133.
121. See the reports of *Mahrataa* and *Bombay Samachar* on the opening of new liquor shops in Mandvi-Koliwada locality inhabited by middle-class Muslims, *BPNNR*, January 1912, 30–31. The *Jam-e-Jamshed* and *Indu Prakash* opposed the opening of a liquor shop in the "better-class" Hindu locality of Matunga, *BPNNR*, July 1913, 25.

122. Mohandas K. Gandhi, *An Autobiography or My Experiments with Truth* (Ahmedabad, India: Navjivan Press, 1927).
123. S. M. Rutnagur, *Bombay Industries: The Cotton Mills* (Bombay: The Indian Textile Journal, 1927), 491.
124. Kumar, *Artisans of Banaras*, 173–80.
125. In the early twentieth century, social reformers in North India also criticized the perceived obscenities of this festival. The upper-caste, educated reformers found Holi celebrations a threat to their respectability and a blot on the image of an emerging nation with a disciplined culture. Gupta, *Sexuality, Obscenity and Community*, 85–107.
126. *SSQ*, July 1915, 21; Karnik, *N M Joshi*, 28.
127. *SSQ*, 1915, 21.
128. *Report on the Administration of the Excise Department in the Bombay Presidency, Sind and Aden*, 1912–13 (Bombay: Bombay Government Central Press, 1913), 13.
129. *Report on the Administration of the Excise Department in the Bombay Presidency, Sind and Aden*, 1916–17 (Bombay: Bombay Government Central Press, 1917), 9.
130. Evidence of P. G. Kanekar of the SSL in *The Report of Bombay Excise Committee*, 1922–23, Vol. II (Bombay, Government Central Press), 11.
131. *Annual Report of the BMOA*, 1913, iii.
132. N. M. Joshi, “Welfare Work in Bombay Cotton Mills,” *Journal of Indian Industries and Labour*, Vol. I, No. 1 (February 1921): 22.
133. M. K. Gandhi, *Young India*, 6 October 1921.
134. Evidence of P. G. Kanekar of the SSL in the *Report of the Bombay Excise Committee*, 1922–23, Vol. II, 14, 8.
135. *Jam-e-Jamshet* in *BPNNR*, February 1916, 22; *Times of India*, 6 February 1926, 12.
136. Burnett-Hurst, *Labour and Housing in Bombay*, 136–44.
137. G. Findlay Shirras, *Report on an Enquiry into Working Class Budgets in Bombay* (Bombay: Bombay Government Press, 1923), 31–32.
138. *Ibid.*, 31.
139. “A Brief Record of Four Years’ Work,” *SSQ*, July 1915, 21–25.
140. “Quarterly Report of the Social Service League Bombay for the Quarter Ending February 1921” *SSQ*, April 1921, 234.
141. Sir George Williams established the YMCA of London in 1844 to promote the “moral and mental” well-being of migrant men engaged in various trade and production activities in the city. Founded in 1851, the YMCA of the United States expanded after the American Civil War with branches focused on creating “healthy” associations among the urban working classes. L. L. Doggett, “Jubilee of the Young Men’s Christian Association,” *The North American Review*, Vol. 172, No. 535 (June 1901): 882–94.

142. Ian Tyrrell, *Reforming the World: The Creation of America's Moral Empire* (Princeton, NJ: Princeton University Press, 2010), 23–25.
143. Ibid.
144. *SSQ*, January 1921, 165.
145. Karnik, *N. M. Joshi*, 52.
146. *SSQ*, Vol. II, No. 1, July 1916, 38; Karnik, *N. M. Joshi*, 42.
147. D. A. Low, "Congress and 'Mass Contacts,' 1936–37: Ideology, Interests, and Conflicts over the Basis of Party Representation," Wolpert and Sisson, eds., *Congress and Indian Nationalism*, 134–38.
148. Gandhi, *Collected Works*, Vol. XIV (October 1917–July 1918), 214–69.
149. *Satyagrah* is a key Gandhian term comprising two words; *satya* or truth, and *agrah* or insistence. Hence, in its loose English translation, *satyagrah* means insistence on truth. In practice, however, *satyagrah* transpired into non-violent resistance, passive resistance, or civil resistance as a form of mass protest against the state. Gandhi sometimes also referred to it as truth force or soul force. See David Hardiman, *Gandhi in His Time and Ours: The Global Legacy of His Ideas* (New York: Columbia University Press, 2003), 51–54.
150. Gandhi, *Collected Works*, Vol. XIV, 232–33.
151. Ibid., 219.
152. Ibid., 224.
153. Ranajit Guha has argued that in colonial India, discipline constituted a necessary aspect of mass-based nationalism. The leaders' desire to mobilize masses was combined with deep anxieties to retain elite control over the movement. *A Disciplinary Aspect of Indian Nationalism* (Santa Cruz, CA: Merrill Publication, 1991), 19–39; "Discipline and Mobilize," in Partha Chatterjee and Gyanendra Pandey, eds., *Subaltern Studies VII: Writings on South Asian History and Society* (New Delhi: Oxford University Press, 1994), 69–120.
154. *Bombay Labour Gazette*, 1924, 1925, 1928.
155. *Annual Report of the BMOA*, 1917, xi.
156. *Bombay Labour Gazette*, October 1921, 41.
157. Social Service League, The Currimbhoy Ebrahim Workmen's Institute, Bombay, *Report of the Work Done from April 1918–October 1920*, 1.
158. Ibid.
159. *SSQ*, July 1922, 175.
160. *Bombay Labour Gazette*, December 1921, 16–17.
161. Ibid., 17.
162. Ibid.
163. Ibid.
164. Between 1918 and 1920 more than 26,000 millworkers used the SSL reading room and library, which obtained six dailies, ten weeklies, and

- ten monthly publications and housed several books. The Currimbhoy Ebrahim Workmen's Institute, Bombay, *Report of the Work Done from April 1918–October 1920*, 3.
165. Social Service League, "Report for the Quarter Ending December 1922," *SSQ*, January 1923, 213.
 166. The Currimbhoy Ebrahim Workmen's Institute, Bombay, *Report of the Work Done from April 1918–October 1920*, 2–3.
 167. *Ibid.*, 7–8; Social Service League, "Report for the Quarter ending June 1923," *SSQ*, July 1923, 54.
 168. Social Service League, "Report for the Quarter ending December 1922," *SSQ*, January 1923, 213–15.
 169. Ian Tyrell, *Reforming the World*, 86–89.
 170. Bombay YMCA, *Annual Report for the Year 1926*, Amherst College Archives, Amherst, MA (henceforth ACA), 32.
 171. Thomas Winter, *Making Men, Making Class: The YMCA and the Working Men, 1877–1920* (Chicago: University of Chicago Press, 2002), 2–3.
 172. *Ibid.*, 143–45.
 173. *Ibid.*, 2–3.
 174. *Ibid.*, 3.
 175. Iris Wingate, "Industrial Problems," *Young Men of India, Burma and Ceylon* (henceforth *YMI*), Vol. XL, No. 9, September 1928, 506–7.
 176. Winter, *Making Men, Making Class*, 5.
 177. Wingate, "Industrial Problems," 510. An American YMCA secretary, John L. Mott, who supervised welfare work in a cotton mill of Nagpur, asserted that "through wisely directed efforts much could be done to adjust the relations between capital and labour." "Report Letter of John L. Mott," 23 September 1921, Folder: India May 1920–September 1920, YMCA, Kautz Family YMCA Archives, University of Minnesota, Minneapolis, MN (henceforth KFA), 1.
 178. N. M. Joshi, "Welfare Work in Bombay Cotton Mills," *Journal of Indian Industries and Labour* (1921): 18.
 179. *The Empress Mills*, Folder: India June–September, 1923, YMCA, KFA, 1.
 180. YMCA, *Biographical Notes*, Folder: Biographical Records Warburton to Watkins, KFA.
 181. *Ibid.*
 182. Letter from Dora J. Ward to her Family in USA, 3 December 1924, *Ward Family Papers*, ACA.
 183. Letter from Dora J. Ward to her Family in USA, 30 December 1924, ACA.
 184. The international office of the American YMCA regretted that William Ward could not spare time to learn the local language, a skill they considered crucial for working among lower-class people who did not know English. *YMCA Biographical Notes*, Folder: Biographical Records Warburton to Watkins, KFA, 2.

185. "Social Welfare Work in Bombay," *The Bombay YMCA, Leaflet No. 1*, 1926, ACA.
186. Social Welfare Department, *Annual Report for 1926*, ACA, 32.
187. W. E. D. Ward, "Administrative Report for 1926 to the Foreign Committee, YMCA of USA," Folder: India, Annual and Quarterly Reports 1926, KFA, 2. As mentioned in Chapter 3, in the early 1920s, the Development Department had built workers' chawls in Naigaum. Because of their high rents and defective structure, these chawls were unpopular among workers. It is possible that the department helped create social welfare programs to make its chawls more attractive to millworkers.
188. W. E. D. Ward, "Administrative Report for 1926," 10.
189. W. E. D. Ward, "Among the Mill Hands of Bombay," *YMI*, Vol. 34, No. 5, May 1926, 335. John L. Mott expressed similar sentiments in his Report Letter, Nagpur India, 23 September, 1921, Folder: India, May 1920–September 1920, *YMCA*, KFA, 2.
190. *YMCA International Survey, India, Burma and Ceylon*, Vol. 2, Chapter 2, KFA, 137.
191. Ibid.
192. N. B. Saklatwala quoted in *Annual Report of the BMOA*, 1916, x.
193. Ward, "Among the Millhands of Bombay," 336.
194. Ibid., 336–38.
195. Ibid., 339.
196. Ibid., 340.
197. "Annual Report for the Year 1925 in Bombay YMCA Physical Work," Folder: YMCA, India, Annual and Quarterly Reports, 1925, KFA, 1–2.
198. *YMCA International Survey*, KFA, 138.
199. Ward, "Among the Millhands of Bombay," 341.
200. Ibid., 343; W. E. D. Ward, "Statement of Social Welfare Work in Bombay," September 1925, Folder: Miscellaneous, *YMCA*, KFA, 4–5, Letter of Dora Judd to the Family, 30 July 1925, Bombay, ACA.
201. *Social Welfare Department, Annual Report for 1926*, ACA, 29.
202. Ward, "Among the Millhands of Bombay," 342.
203. "Community Service in Bombay," *YMI*, Vol. LI, No. 5, May 1939, 135.
204. Ward, "Among the Millhands of Bombay," 345.
205. "Report of the National Council, 1921," Folder: Annual and Quarterly Reports, 1921, *YMCA*, KFA, 1.
206. They required a deposit of Rs. 15 and rental of Rs. 2, though for the YMCA branches the rate was 1 rupee. Ibid., 2.
207. *SSQ*, April 1922, 226.
208. Letters of Dora Judd Ward to the Family dated 6 May 1925, 5 August 1926, 5 October 1926, ACA.
209. *YMCA International Survey, India, Burma and Ceylon*, Vol. 2, Chapter II, KFA, 139.

210. *Bombay Labour Gazette*, June 1930, 1051.
211. *SSQ*, October 1936, 124–25.
212. *Ibid.*, 125.
213. *Interim Report of the Textile Labour Enquiry Committee*, 1939, 304.
214. *Bombay Labour Gazette*, June 1941, 807.
215. *Ibid.*, 290.
216. *Indian Textile Journal* (henceforth *ITJ*), Vol. LV, March 1945, 404.
217. *ITJ*, January 1945, 264.
218. *Ibid.*
219. In the *ITJ*, the reports of these events show that mill managers and owners regularly attended the social gatherings and sports events. *ITJ*, Vol. LV, March 1945, 405, and June 1945, 643.
220. *ITJ*, February 1945, 341.
221. S. A. Dange, *Proceedings of the Meerut Conspiracy Case, 1929–1931*, microfilm, Nehru Memorial Museum and Library, 2401–2537.
222. The postwar downfall in the demand for textile goods led to a depression in the industry. To cope with this, some factories partially closed down, causing unemployment for thousands. Beginning in 1923, mills began to cut down workers' earnings by denying due bonuses, and in 1925 the owners came with a proposal of an 11.5 percent wage cut. In 1928, the mills introduced another method of cutting down their labor costs by introducing a new loom, which could double the production without any increase in labor. Transcript of interview with S. V. Ghate, leader of the Girni Kamgar Union, Nehru Memorial Museum and Library Oral History Project, Accession No. 326, 41.

Welfare Rhetoric and Maternal Bodies: Protective Legislation Debates in Colonial Bombay

The question of Indian women's upliftment and their social and legal rights dates back to the early periods of colonial rule, to the late eighteenth and early nineteenth centuries.¹ However, working-class women of colonial India were largely marginal to the women's upliftment programs and women's rights discourses of this era. The interwar period, by contrast, witnessed unprecedented enthusiasm for the welfare of women millworkers, especially in industrial cities such as Bombay and Calcutta. In her widely cited account of women workers in colonial industries, Janet Harvey Kelman, a British researcher, attributed a burgeoning concern about working-class women to the Draft Convention meeting of the International Labour Conference that was held in Washington, DC, in 1919 and that spawned the establishment of the International Labour Organization (ILO) in 1920.² As part of the British Empire, India participated in the postwar Versailles Peace Conference and it was also a participating member of the Draft Convention meeting of 1919, the League of Nations, and the ILO.³ In 1922, colonial India became a permanent member of the ILO's governing body. The 1919 Convention introduced broad guidelines for the monitoring of labor conditions throughout the world while it recommended specific measures for improving women workers' maternity and childcare conditions.⁴

In the industrial cities of colonial India, the Convention stimulated a liberal feminist discourse around working-class women's rights. Focusing specifically on women laborers' maternity conditions, Indian male legislators, local administrators, and middle-class men and women social

activists of Bombay sought protective measures such as paid rest from work for a few weeks before and after childbirth, professional medical assistance for pregnant women, and the provision of crèches for lactating working mothers. All supporters of protective measures concurred that hard wage labor in advanced stages of pregnancy and right after childbirth imperiled the body of the working mother as well as her infant.

Consistently high rates of infant mortality⁵ in Bombay fuelled the campaigns for maternity benefits. A major indicator of public health, Bombay's infant mortality rates had remained steadily high since the late nineteenth century and were much higher than those for India as a whole. For example, in 1911, India recorded an infant mortality rate of 204.98 while Bombay documented 379.8 infant deaths per 1,000 births.⁶ Adopting a defensive posture, Bombay public health officials often claimed that extraordinary situations such as famines, epidemics, and a flawed system of birth and death registration were responsible for such disproportionate statistics.⁷ As some other observers noted, this seemed only a partial explanation because even before the outbreak of Bombay's deadly bubonic plague in 1896, recorded mortality in infants under one year of age had shot up to 515 per 1,000 births and continued to remain high in the post-plague years as well.⁸ By the early 1900s, local medical professionals and municipal health officers were pressing for a deeper understanding of the problem. Their concerns acquired greater prominence after the Draft Convention meeting. Citing the recommendations of the Draft Convention, Indian champions of maternal and infant welfare presented maternity benefits as a crucial piece of legislation for protecting infant life—a valuable national resource. Thus, because of the global labor welfare rhetoric and local conditions of infant mortality, the interwar period witnessed frequent debates both inside and outside the Bombay Legislative Council (BLC) over the issue of maternity benefits.

In assessing the campaigns for maternity benefits, this chapter recognizes the role of prevalent gender norms in constituting laboring bodies, an aspect that remained largely unexplored even in the more sophisticated historical narratives of South Asian labor.⁹ The question of women workers' rights was closely tied to the nationalist ideals of gender roles and motherhood. The contemporary rhetoric of motherhood possibly created a positive environment for working-class women's well-being. But an overwhelming focus on childbearing and infant care accentuated the supposed tensions between women's productive and reproductive labor,

as the few available studies on labor and gender in colonial Bengal have also suggested.¹⁰

Focusing on Bombay,¹¹ this chapter documents the fact that the champions of working-class women's maternal welfare did not necessarily construct motherhood and paid work as two irreconcilable poles. Neither did they suggest the removal of women from the workforce. Their persistent campaigns drew attention to an aspect of women workers' lives that was hitherto neglected by colonial bureaucrats and millowners, as well as the textile trade union movement of Bombay. However, despite their successes in championing a neglected issue, the campaigners failed to espouse an alternate, liberal vocabulary of women's rights. Rather, they constructed wage work as an obstacle, a condition that interfered with women's "primary" duties of childbearing and nurturing. Similarly, the overwhelming focus on maternity and infant care that began in the 1920s overshadowed women's active participation in millworkers' collective struggles for better work conditions. It also obscured other equally important aspects of women workers' lives, especially their lower wages, fluctuations in employment, and harsh working conditions. Consequently, as the proceedings of the Whitley Commission on Labour in India (1929–1930) revealed, by the early 1930s motherhood had emerged as a defining element of women workers' well-being.

In India, the Convention and the subsequent formation of the ILO also inspired a wider sociological interest in labor and laboring conditions. Indeed, the postwar period witnessed a significant increase in governmental and non-governmental studies that meticulously recorded working and living conditions of industrial laborers and their families.¹² From 1923, the government of Bombay began publishing a monthly journal, the *Bombay Labour Gazette*, which documented brief informational pieces about issues such as labor strikes or worker welfare activities. At the same time, municipal reports and legislative council proceedings, as well as the publications of voluntary groups, frequently discussed working-class motherhood. This growing volume of writings about urban subalterns has created an archive, a depository that partially addresses the much-lamented dearth of primary sources in labor and gender history. Indeed, unlettered working-class women of colonial India were unable to record their own experiences. Nonetheless, the elite discourse on family, motherhood, and women's work provides insights into the ways in which the broader colonial society perceived working-class women's

predicaments as well as their well-being. These records also illuminate the accomplishments and limitations of feminist strategies and practices in colonial India, especially the knotty relations of women's rights discourse to the entities of class and nation.

What follows traces women's position in the mills prior to the early 1920s and then maps the concern (or lack of it) during that period for the provision of maternity leaves and crèches. I then examine the broader discursive and political contexts that triggered the emergence of a sustained campaign for maternity benefits in Bombay City and narrate the complexities of implementing social welfare measures in a colonial situation. Subsequently, I analyze the long-term implications of this campaign for women millworkers in particular, and the colonial politics of gender in general.

BALANCING WORK AND CARE IN THE MILLS OF BOMBAY

In the industrial sector of colonial India, the cotton industry of Bombay, like the jute mills of Bengal, was among the largest employers of women. As described in Chapter 2, the cotton textile industry of Bombay was an extraordinary example of Indian enterprise in a colonial situation. In 1851, Cowasji Nanabhai Davar (1814–73), a Parsi businessman, established the first cotton mill in Bombay, and by the early 1900s there were eighty-two cotton manufactories in the city.¹³ By the late 1890s, women constituted approximately 20–25 percent of the total workforce.¹⁴ Their proportion of the total textile labor remained constant in the early twentieth century as well (Fig. 5.1).

From the industry's inception, women were usually employed in the lower paying, unmechanized reeling and winding processes of production.¹⁵ Although these jobs had no direct relation to women's anatomy, reeling and winding were widely referred to as women's work,¹⁶ as marginal jobs qualitatively different from the "actual manufacture of yarn."¹⁷ A comparatively lower pay for these tasks became a widely accepted practice in the industry.¹⁸ These gender-based work and wage differentials were not limited to textile mills; in colonial industries such as tea plantations, indigo factories, and jute mills, women were employed in the labor-intensive "feminine" and "unskilled" jobs.¹⁹ The association of certain jobs with women helped millowners to maintain a skill-based and gender-based wage differential and to economize on production costs.



TYPES OF WOMEN MILLHANDS. I.

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Fig. 5.1 Types of women millhands. *Source:* A. R. Burnett-Hurst, *Labour and Housing in Bombay: A Study of the Economic Conditions of the Wage-Earning Classes in Bombay* (London: P. S. King, 1925)

Although employers frequently complained that because of their maternal responsibilities women were less committed to their work in the mills, they avoided the financial commitment to provide childcare facilities. The meager late nineteenth-century factory regulation efforts mainly considered issues such as working hours, recess time, and child labor. Possible provisions for working mothers were entirely ignored.²⁰ For example, only a few witnesses speaking to the Factory Commission of 1875 pointed to the need for such measures. Joseph Anderson and Thomas Weir, two medical witnesses interviewed during the inquiries of 1875, fleetingly suggested that the employment of pregnant women “after a certain period” was not advisable.²¹ The six women workers examined during the proceedings of the Commission said that they left their infants with a relative or neighbor and took short breaks to rush home and breastfeed them.²² However, the final recommendations of the Commission of 1875 did not mention these issues. This disinterest in maternity leave and infant care continued despite municipal reports, which claimed that when combined with harsh living conditions, factory work and the lack of crèches contributed to the high rates of infant mortality in Bombay.

Even before the outbreak of bubonic plague in 1896, Bombay City had recorded an extraordinary rise in its infant mortality figures. By 1894, they reached 515 deaths per 1,000 births, a trend that did not improve significantly during subsequent years.²³ Public health officers insisted that extraordinary situations such as famines and epidemics caused high infant mortality.²⁴ However, it was not a sporadic phenomenon, and it remained deplorably high throughout the early twentieth century. Between 1901 and 1905, the average mortality in the zero-to-one-year age group was about 530 per 1,000 births.²⁵ This compelled the municipal health department to acknowledge that the continuously high figures manifested the unsatisfactory public health of the city.²⁶ With such admissions, public health officials became the first to lament the lack of maternity leave and childcare facilities and the adverse impact this deficiency had on infants (Table 5.1).

Anxious to identify and address the causes of infant deaths, John A. Turner, the municipal health officer of the city from 1901 to 1919, asserted that other than epidemics and the unhealthy living environment of working-class neighborhoods, the “laborious” tasks and “trying” circumstances of women working in the mills were responsible for the stillborn births and the deaths within one year of birth.²⁷ In a report published in 1900, he reiterated that the “occupation of the mother entailing hard manual labour under very indifferent conditions must have a very deleterious effect on the birth rate.”²⁸ Subsequently,

Table 5.1 Infant Mortality Rate in Bombay City. *Source:* For 1887–1899: D. R. Bardi, “Infant Mortality in Bombay, Its Causes and Prevention,” in *Report of the Proceedings of the Bombay Medical and Physical Society* (1897–1911), 26. For the years 1901–1943: *Annual Reports of the Municipal Commissioner of Bombay*

<i>Year</i>	<i>IMR</i>	<i>Year</i>	<i>IMR</i>	<i>Year</i>	<i>IMR</i>	<i>Year</i>	<i>IMR</i>
1887	386	1904	459	1914	385	1928	311
1889	425	1905	557	1915	329	1929	298
1892	501	1906	535	1916	388	1930	296
1894	514	1907	424	1917	410	1931	272
1896	457	1908	450	1918	590	1932	218
1898	582	1909	405	1919	653	1936	249
1899	786	1910	414	1920	552	1937	245
1901	574	1911	380	1921	667	1938	267
1902	543	1912	448	1922	403	1939	211.7
1903	532	1913	381	1923	411	1943	198

he emphasized that the declining life expectancy of infants also resulted from the fact that women millworkers returned to work following a short period of confinement, leaving their infants without adequate care.²⁹ To provide women with the opportunity to breastfeed their babies at regular intervals, Turner suggested that the mills in Bombay should arrange for a room or nursery where “mothers might leave their infants in the charge of some responsible individual and [have] access to them at reasonable times during the hours of work.”³⁰ This provision had proved useful in some European towns, and so Turner urged the millowners to consider his proposal favorably. Unwilling to accept the financial costs, the Bombay Millowners’ Association (BMOA) promptly dismissed his suggestions and said that even after careful consideration “they could not see their way to do anything in respect of nurseries for infants.”³¹

Until the early 1920s, both millowners and the colonial state also ignored factory reports that documented the hardships that the lack of childcare facilities caused for women workers. Unlike the late nineteenth-century industrial inquiries, the Indian Factory Labour Commission of 1908 (IFLC) amply recorded the problems of infant care. It reported that women either brought their infants to their workplace or left them at home “practically without care.”³² Most millowners and managers claimed that legislation prohibiting the presence of infants in the mills was not needed. The employers asserted that they had worked out an informal arrangement with their women workers. They were not only permitted to bring their babies to the mills but were also allowed to arrive late for work and leave early so that they could fulfill their maternal and domestic duties.³³ Some employers urged that since women were permitted to maintain a flexible schedule, laws such as a compulsory Sunday holiday and the mandatory one-and-a-half-hour recess period for women “should be done away with.”³⁴ They further argued that since no woman was prevented from going home at any time during the day to nurse her infant, their working hours should not be restricted.³⁵ Thus, mill representatives used the issues of infant care and women’s domestic duties as opportunities for justifying an unregulated work schedule.

A few witnesses to the IFLC, such as Dr. Turner and Lt. Colonel Corkery, an Indian Medical Service officer of the Bombay Presidency, emphasized that the environment inside the mills was not safe and healthy for infants.³⁶ Even so, mill managers and representatives strongly defended the practice of bringing infants to the mills.³⁷ They claimed that in the absence of suitable supervision at home, infants were better

off in the mills in front of their mothers' eyes.³⁸ Some mills allowed infants inside the working areas while others permitted mothers to leave them in the mill compounds while they worked.³⁹ Although they endorsed this practice, the employers resisted any attempts to improve the unhealthy environment of their factories.⁴⁰ Like the earlier factory reports, the IFLC documented poor ventilation and a fiber-laden, vitiated atmosphere inside the mills.⁴¹ As discussed in Chapter 2, the heat and humidity levels of the production areas were injuriously high.⁴² But millowners and managers downplayed this unhealthy environment and its probable impact on infant health. Some said that although it was desirable to keep children away from the "unhealthy and dangerous" working areas, any restrictions would only cause "unnecessary annoyance to all concerned."⁴³ The inspector of factories observed that in some mills "it was allowable to sling the babies under the reeling machines."⁴⁴

Contrary to the claims of employers, these "convenient," informal arrangements were burdensome for women. In the complete absence of institutionalized infant care, women were forced to adopt various ways to negotiate the situation. In his note of dissent, Dr. T. M. Nair, a member of the IFLC, pointed out that women often worked through their one-and-a-half-hour recess period to compensate for their late arrival and early departure from the mills.⁴⁵ To make up for time they took to breastfeed at home, they often agreed to work on Sundays, while during the weekdays they worked "for a longer time than was allowed by the law."⁴⁶ Since crèches were nonexistent, in practice legislative restrictions on women's work schedules were largely meaningless. Despite documenting these testimonies, the IFLC did not recommend the compulsory provision of crèches in the mills. Until the early 1920s, the suggestions for maternity leave and nurseries figured only in intermittent municipal and public health reports.

THE POLITICAL-ECONOMIC AND DISCURSIVE CONTEXTS FOR MATERNITY BENEFITS

The debates and the eventual passage of the Maternity Benefit Act in 1929 transpired at a moment of critical social and political changes. All of these contributed to the greater prominence that the well-being of working-class mothers and infants gained. The early decades of the twentieth century witnessed several crucial developments in the strategies

and thinking of Indian nationalism. By the 1910s, the Indian National Congress (INC) was struggling to transform itself from a bastion of the Western-educated, upper-middle classes into a more inclusive, mass-based organization. Acknowledging that subalterns including the industrial working classes were the constituents of a future nation, nationalists articulated new modes of mass mobilization. Moreover, the INC perceived various parallel organizations, such as trade unions, as threats to its hegemonic claims and made attempts to appropriate these rival bodies. By the late 1910s, leading nationalist figures such as Mahatma Gandhi and Lajpat Rai aspired to provide leadership and direction to labor action and incorporate it within the mainstream of the nationalist movement.⁴⁷ This inclusive thrust also generated concerns for the abysmal conditions of the urban working classes.

The new forms and strategies of Indian nationalism informed the labor-oriented activism of Bombay's prominent social activists and labor welfare leaders such as Narayan Malhar Joshi, Sitaram Keshav Bole, and Kanji Dwarkadas. Renowned public figures, these reformers had played multifaceted roles in shaping Bombay's social and political culture. As specified in Chapter 4, N. M. Joshi was a moderate labor leader and one of the pioneers of labor welfare programs in Bombay. As a founder member of the Social Service League, a prominent voluntary group of Bombay, Joshi had introduced innovative methods to inculcate the values of temperance and healthy living among millworkers.⁴⁸

Like Joshi, S. K. Bole was a leader of the moderate Bombay Textile Labour Union. A non-Brahman reformer, Bole was a founder member of the philanthropic reform group, the Kamgar Hitwardhak Sabha, which initiated temperance and literacy campaigns among millworkers. In 1921, the provincial government of Bombay nominated him as a representative of labor to the Bombay Legislative Council.⁴⁹ Bole used this platform not only to advocate for the welfare of industrial workers but also to support Dr. B. R. Ambedkar in his campaigns against the practice of untouchability.⁵⁰ Similarly, Kanji Dwarkadas, a Gujarati Hindu, was a key nationalist and social reformer of Bombay, and a prominent leader of Annie Besant's nationalist group, the Home Rule League. By the early 1920s, Dwarkadas was well known for his campaigns against prostitution in Bombay City.⁵¹ His concern for women millworkers was another reflection of his commitment to social reforms. In the particular context of maternity-benefit campaigns, these reformers assumed the role of male feminists, lobbying for women millworkers' rights. The increase

in Indian representation in governance after the implementation of the Government of India Act of 1919 constituted new spaces for these leaders to propose labor welfare legislations.

Known as the Montagu-Chelmsford reforms, the constitutional reforms of 1919 created elected provincial assemblies and granted limited authority to elected and nominated Indian ministers and members of the legislative councils. The new system of Dyarchy divided authority between the government of India (GOI) in Delhi and the provincial governments, as well as within the provincial governments. While the central government controlled areas such as external affairs, finance, and law and order, responsibilities for health, education, and public works were “transferred” to Indian ministers accountable to provincial legislatures.⁵² This constitutional development strengthened contemporary nationalist concepts of self-civilizing or self-improvement, which encouraged elite Indians to assume responsibilities for the well-being of the nation and its people.⁵³

The transfer of subjects such as health and education rendered middle-class Indians partners in the welfare of the masses. Their formal participation in matters such as health also accentuated the relationship between reproduction and nation building.⁵⁴ Significantly, there were two nominated seats for labor in the provincial legislative council of Bombay. From 1921, along with S. K. Bole, Kanji Dwarkadas was nominated to represent the interests of workers in the Bombay Legislative Council. In the same year, N. M. Joshi became a nominated representative of labor in the Central Legislative Assembly, a position he retained for the next two and half decades.⁵⁵ The leaders used these constitutional forums to press for various labor welfare measures including protective legislation for women workers.

Crucial shifts in local and global labor policies also created greater space for labor welfare initiatives. The contribution of Indian industries during the First World War had forced the colonial state to abandon its earlier apathy toward India’s industrial development.⁵⁶ In 1916, the British government appointed an Indian Industrial Commission (IIC) to “examine and report upon the possibility of further industrial development in India.”⁵⁷ After two years of inquiry, the IIC issued its recommendations. It emphasized that compared to their Western counterparts, laborers in India were less vigorous and their incompetence hampered India’s industrial growth.⁵⁸ The IIC attributed this perceived lower vigor of industrial workers to the prevailing insanitary conditions of chawls

(workers' tenements). It noted that the overcrowded and foul living atmosphere of chawls reduced the life expectancy of infants, the future industrial laborers.⁵⁹ The IIC did not suggest any policy changes or legislation. Neither did it mention maternity leave or crèches. However, its report emphasized that the country's industrial progress decisively depended on the well-being of its current and future labor force.

Chapter 4 outlined how growing labor unrest in the industrial metropolises of India in the late 1910s had generated anxieties among the industrialists as well as nationalists, forcing them to consider ways of mitigating worker militancy. Although Indian industrialists of Bombay resisted any mandatory obligations for workers' well-being, they supported voluntary welfare efforts as plausible ways of weaning workers away from trade unionism. At the international level, the Bolshevik revolution in Russia in 1917 and the desire to prevent the spread of radical politics in industrialized countries provoked a new outlook on labor.⁶⁰ During the Washington Draft Convention of 1919, participants emphasized that improved conditions of labor ensured workers' efficiency and prevented the spread of "new thoughts."⁶¹ At the Convention, N. M. Joshi, B. P. Wadia, A. C. Chatterjee, L. J. Kershaw, and Sir A. R. Murray represented India.⁶² Asserting that labor was not a mere commodity, the Convention advocated a humane, liberal approach to laborers. It considered problems such as unemployment among industrial workers, the minimum age of recruitment for children, the desirability of a forty-eight-hour working week, and the need for restrictions on the employment of women at night and in dangerous production processes.⁶³

The recommendations of the Draft Convention for women workers paid significant attention to maternity and infant care issues. Articles 3 and 4 of the Convention stipulated that in any industrial undertaking, women workers should not be permitted to work for six weeks after giving birth and that they should be allowed to leave work upon producing a certificate stating that their confinement or childbirth is scheduled in six weeks. The Convention proposed the payment of maternity benefits during the leave, free healthcare by a doctor or midwife, and permission to care for their infants after the new mothers returned to work. It declared unlawful the dismissal of women for reasons related to their pregnancy or confinement.⁶⁴ Although India was not expected to ratify and adopt these proposals immediately, the Convention suggested that as an initial step, the GOI must inquire about the conditions of women workers before and after childbirth and explore the possibility

of implementing maternity benefits.⁶⁵ The GOI was to submit its reports to subsequent labor conferences.⁶⁶

INITIAL REACTIONS TO THE DRAFT CONVENTION

In response to the recommendations of the Draft Convention, the GOI commissioned inquiries and sent questionnaires to the provinces. By 1921, provincial governments instituted inquiries into the maternity conditions of women workers. Reports of these investigations spawned a sustained discussion on maternity benefits. In response to the GOI questionnaire, the government of Bombay related that though women millworkers took leave from work about two weeks before and after childbirth, they received no wages for the period. The report reaffirmed that no satisfactory arrangements were made to nurse the infants after the mothers returned to work.⁶⁷

In 1921, Gladys M. Broughton, the adviser appointed by the GOI to collect information about women's employment and maternity conditions, revealed situations similar to Bombay's throughout India.⁶⁸ Her inquiries documented that even in major industrial centers, no formal prohibitions on work before childbirth existed. In the absence of adequate facilities for childbirth in Bombay City, most women returned to their villages for birthing and returned to work within two weeks after delivery. Although women had no difficulty in obtaining employment upon returning to the mill, they did not receive any wages for their absence. Broughton indicated that this informal system might not always be favorable for women. Their ability to procure jobs after childbirth depended on the labor market and production arrangements in the mills. At the time she wrote her report, the comparative scarcity of labor and the gender division of production made women indispensable, but she noted that in a tight labor market, childbirth might reduce opportunities for re-employment.⁶⁹ She suggested that in the long term, legislation to protect women workers was necessary.

Broughton recorded that around the same time, at least two Bombay mill groups, the Tatas and the Currimbhoys, granted a maternity leave of two months with an allowance to their women workers.⁷⁰ However, she reported that, "generally speaking the right to maintenance on the part of the mother is not accepted as a legitimate charge on industry."⁷¹ She maintained that the Draft Convention regulations regarding maternity benefits and adequate medical aid during the birth process required

serious considerations. Even so, Broughton pointed out that provisions regarding maternity leave, medical aid, and monetary assistance probably could not be implemented immediately because of the administrative difficulties attached to such regulations. Inaccurate registration of birth, and lack of sufficient female medical professionals to issue the certificates of pregnancy required to justify maternity benefits, made it extremely difficult to determine when a woman worker would give or had given birth. Despite her sympathetic account, Broughton concluded that under these circumstances, persuading the employers to voluntarily adopt maternity benefit schemes was the best solution.⁷²

Parallel to Broughton's investigations, the GOI organized an informal labor conference of government industry and labour officials in Simla in May 1921, and it expressed similar ambivalence.⁷³ This group considered the possibility of maternity benefits in Indian industries. The conference participants reiterated the lack of administrative machinery to implement such programs and the dearth of female medical practitioners to examine women workers and issue certificates of confinement. Making an essentialist assumption, the conference report claimed that unlike their Western sisters, Indian women factory workers were fit to resume work within a fortnight after their delivery. It argued that women workers would resent being excluded from earning wages either before or after childbirth.⁷⁴ Reiterating Broughton's hesitation, this report concluded that immediate legislative action to make maternity benefits mandatory was unnecessary and that better results could be obtained by enlisting the sympathies of employers for their women workers.⁷⁵

Despite acknowledging the desirability of maternity benefit, Broughton's investigations and the Simla conference justified the apathy of the colonial government and employers. In subsequent debates, representatives of the government and millowners frequently cited these reports to oppose legislation. The GOI and millowners also alluded to the Washington Convention that had granted a "special status" to under-industrialized countries like India and exempted them from immediately adopting its resolutions.⁷⁶ In 1922, India replaced Switzerland to become the eighth most industrialized country among the ILO governing body members, making the "special status" clause redundant. Nonetheless, the government and millowners continued to use India's "special circumstances" as justifications for gradual and voluntary adoption of maternity benefits.

The reluctance of the colonial state in this particular context delineated its general ambivalence toward social and legislative reforms in

India. Since the nineteenth century, the colonial state emphasized its commitment to social change through the powerful concept of “civilizing mission.”⁷⁷ Highlighting their moral superiority, the British claimed that they were reforming the supposedly backward, insular culture of India and bringing Western education, the modern rule of law, progressive social reforms, Western medicine, and technological and infrastructural advancements to the subject people.⁷⁸ However, the pragmatics of colonial rule engendered disconnections between the colonial civilizing rhetoric and actual implementation of social reform measures. Throughout the period of colonial rule, especially after the Revolt of 1857, the British Raj hesitated to introduce controversial social changes that might produce discontent among the orthodox and privileged sections of Indians.⁷⁹ Similarly, despite its verbal commitment to social change and progress, the colonial state was reluctant to assume the financial responsibility of social welfare measures, especially those concerning the masses. Its hesitant, cautious approach to maternity benefits legislation was illustrative of the continuing tensions between civilizing impulses and pragmatic considerations. Although the government proclaimed moral support for the maternity benefits legislation, it was neither prepared to bear the cost of implementing it nor did it want to alienate Indian millowners by pushing them to take the liability of any new, mandatory labor welfare measure. Consequently, the interest aroused by the Washington Draft Convention did not translate into immediate legislative action. The Factory Act of India, 1922 contained no reference to maternity benefits and crèches.⁸⁰ For close to a decade after the Convention, government’s interventions were limited to commissioning a few surveys of women workers’ conditions.

In contrast to these unenthusiastic responses of the state and capitalists, middle-class male labor representatives emphasized the urgent need for maternity benefits and crèches. They cited Bombay’s consistently high infant death rate figures as a powerful justification for their demands. The average infant mortality rate from 1918 to 1922 was 572 per 1,000 recorded births, while in a single year, 1921, it reached 667 per 1,000 recorded births.⁸¹ A. R. Burnett-Hurst, boldly proclaimed that, “Bombay must have the inglorious distinction of possessing probably the highest infant death rate in the world.”⁸² In 1921, Dr. Sandilands, the municipal health officer, accepted that even after discounting factors such as the inaccurate collection of vital statistics or unforeseen situations such as the influenza epidemic of 1919, the infant life expectancy figures

in Bombay were rather grim. One out of two infants died before reaching the age of twelve months. Most deaths occurred in the poor, working-class neighborhoods.⁸³

The emerging discourse of worker well-being lamented this loss of human capital. An industrial welfare conference held in Bombay in April 1922 demanded the universal adoption of maternity benefits and the institution of crèches as essential means of preventing “the wastage that occurs among our children or in other words among our prospective workers.”⁸⁴ Simultaneously, throughout the 1920s, N. M. Joshi, S. K. Bole, and Kanji Dwarkadas steadily campaigned for the adoption of the maternity-benefit clause. They argued in the BLC, published letters and essays in newspapers and journals, and passed resolutions in their meetings supporting maternal and infant welfare schemes. For substantiating their arguments, they relied heavily on government-generated reports—on municipal data, and most frequently on the subsequent study of Dr. Florence Barnes.

In 1922, the GOI appointed Florence Barnes in Bombay and Dagmar Curjel in Bengal, two members of the Women’s Medical Service (WMS), to collect more information and formulate schemes for the provision of maternity benefits and infant care.⁸⁵ Based on personal visits to the mills and laborers’ chawls, Dr. Barnes made broad comments about the extreme overcrowding and smoke-filled atmosphere of workers’ tenements, conditions that could “certainly handicap any woman and infant, both before and after delivery.”⁸⁶ Like Broughton before her, she documented particular details like the absence of maternity leave, the dearth of women doctors, trained *daïs*, and maternity hospitals for women millworkers.⁸⁷ Although, like Broughton, Barnes favored a gradual, voluntary adoption of maternity benefits over legislative action, her rhetoric underscored the urgency of such measures more strongly. Barnes emphasized that maternity leave for women from at least one month before to one month after childbirth was necessary because “textile workers have to stand at their machines for an average of nine hours daily; in addition there is a considerable risk run of the woman slipping on the floors, which owing to the character of the work in these mills are invariably greasy and therefore slippery.”⁸⁸ Asserting that the lack of crèches within the mills endangered infants’ health, she deplored the dearth of this facility and demanded their compulsory provision in all mills employing women. Her report could not alter the attitudes of the provincial government and millowners, but it provided the Indian proponents of

maternity benefits with descriptions of the dire working conditions of women millworkers and the lack of infant care facilities, details that helped them articulate and substantiate their demands.

THE NATION AND ITS MOTHERS: THE CAMPAIGNS FOR MATERNITY BENEFITS

From the outset, the campaigns represented maternity benefits as a crucial measure to protect infants, the future productive citizens of the nation. By making it a question of national importance, the supporters presumably sought greater legitimacy for their demands. Significantly, their rhetoric both borrowed from and expanded existing nationalist ideologies of motherhood and gender roles. Since the late nineteenth century, nationalist discourses about gender roles valorized women's position in the purported separate sphere of family, rendering them responsible for social reproduction or the nurturing of morally and physically strong future citizens of the nation.⁸⁹ Arguably, such gendered notions discursively empowered women because they accorded them a crucial part in the making of the nation. But these masculinist abstractions of the nation also undermined women's social, economic, and political entitlements. Jasodhara Bagchi has argued that nationalist idealization of motherhood "reinforced the traditional notion that the fruition of a woman's life lay in producing heroic sons."⁹⁰ Consequently, even the efforts to reform Indian women's social and political status sought to enhance their reproductive roles rather than expand their social and economic horizons. For instance, colonial social reform movements such as the abolition of child marriage insisted that later marriage and childbirth procured healthy progeny. The campaigns focused less on the biological and social benefits of late marriage to girls who did not marry at a young age.⁹¹

When the nationalist rhetoric of motherhood arose in the nineteenth century, it focused largely on elite women, but the ILO initiatives, the alarming rates of infant mortality in Bombay, and the issue of maternity benefits expanded this discourse to include working-class women. A desire to protect pregnant women and their children drove middle-class champions of women workers' welfare to press for protective legislation. Emphasizing the broader context of their campaigns, they insisted that improvements in working-class women's childbearing and mothering practices would prevent the "waste of infant life."⁹² However,

their rhetoric did not merely reproduce the abstract nationalist ideologies of motherhood. It also highlighted the more mundane, corporeal experience of pregnancy and maternity, experiences that were shaped by working-class women's material realities.

Soon after the Washington Convention, male labor welfare activists in Bombay began making a case for maternity benefits. In 1920, N. M. Joshi presented a petition on behalf of the Social Service League asking the government to ratify the maternity benefit recommendation of the Washington Convention.⁹³ In the same year, S. K. Bole's voluntary welfare organization, Kamgar Hitwardhak Sabha, demanded the immediate grant of paid maternity leave and the creation of crèches in the city's mills.⁹⁴ Two years later, Kanji Dwarkadas introduced a proposal in the BLC for maternity benefits. The government of Bombay rejected his resolution, arguing that only the central government could consider such proposals and that the provincial government lacked funds to implement such a scheme.⁹⁵ The resolution was not even debated. In July 1924, S. K. Bole proposed another resolution in the BLC that urged "legislation at an early date for the provision of adequate maternity benefits to women workers in all organized industries in India and to prohibit the employment of women during the period of such benefit."⁹⁶ This resolution was accepted for a debate in the BLC.

When presenting his Bill to the BLC, S. K. Bole cited from Dr. Barnes's study, and regretted that:

The women workers (almost all of them) have to remain standing at their machines on an average of nearly nine hours a day in mills and factories and this standing position is very dangerous in the case of pregnant women. It is much more dangerous to the child that is to be born. Medical opinion says that almost all the children borne by female workers weigh less than those borne by other women and the unfortunate children have to suffer the evil consequences of unhealthy conditions in which they are brought forth into the world. This is the condition under which women-workers have to work and this is one of the causes of the high infant mortality in the city of Bombay. . . . We must take steps to remedy the conditions under which they find themselves before and after confinement.⁹⁷

S. K. Bole further argued that improvements in women workers' maternity conditions were crucial because:

This question [of maternity benefits] is one of the greatest national importance [*sic*]. It is a question of the future of the race. It affects not only the mothers but it affects the future generation and under these circumstances we must take steps to remedy conditions under which they [women workers] find themselves before and after confinement. At least six weeks before and after confinement they must be given rest.⁹⁸

Another Indian legislator, Dr. K. E. Dadachanji, a qualified Parsi physician and a member of the Bombay Medical Union, endorsed Bole's resolution and reiterated several of his points, saying, "Women and children of India are the precious treasure of the country. . . . Unless [we] support womanhood and childhood [we] will never become a good rising nation."⁹⁹ Dadachanji claimed that he had witnessed cases where women millworkers were allowed to rejoin work soon after delivery. He questioned, "can such a state of things be tolerated in any civilized country?" He further insisted that, "a woman who works soon after delivery suffers a great deal and therefore legislation to offer maternity benefits is the first step we should ask the Government to undertake, and in order to build our nation we should have this step taken at an early period."¹⁰⁰ Supporting the resolution, A. N. Surve, a Hindu Marathi representative of Bombay City North, cited the high infant mortality rates of Bombay and declared that maternity benefits and crèches were essential for the "nation's progress" and for protecting the health of working-class mothers and "our wealth of children." Surve suggested that millowners and the provincial government could share the cost of maternity leave payments and crèches.¹⁰¹ Together, these advocates demanded more accountability from the colonial state and mill employers in such matters of "national importance."

However, demonstrating its continued reluctance, the provincial government abstained from voting on Bole's resolution. G. A. Thomas, the secretary to the governor of Bombay, informed the BLC and the GOI that there was a lack of public opinion on the matter. He did not provide any data to substantiate this rather vague claim. Thomas expressed his deep sympathies for this "cause of humanity" but he reiterated Broughton's doubts about the practicality of introducing maternity benefits when the required infrastructure was lacking.¹⁰² Cowasji Jehangir, a prominent investor in the mill industry, and a nominated BLC councilor, promptly endorsed the government's views and argued that legislation was premature.¹⁰³ G. I. Patel, the representative of the Ahmedabad

Millowners' Association, agreed with Thomas and Jehangir and stated that legislation is unnecessary and impractical; the voluntary, charitable efforts of millowners sufficiently ensured the well-being of women workers and their infants, he insisted.¹⁰⁴

Unwilling to relent, in September 1924, N. M. Joshi introduced a maternity benefit bill in the Central Legislative Assembly. Essentially an expansion of the existing schemes in the Tata and Currimbhoy mills, Joshi's bill proposed maternity leave of six weeks prior to the confinement and six weeks after childbirth. It recommended the payment of wages for the enforced period of absence and the assurance of re-employment after the leave period. The maternity allowances were to be paid by a local government fund created from employers' contributions. The bill proposed that the mills employing a minimum number of women must institute crèches with one or more qualified nurses.¹⁰⁵ This bill failed to generate support in the Central Legislative Council.

It is pertinent to point out here that the demands for crèches constituted an integral part of the maternity benefits campaigns. The reformers' insistence on crèches underscored an underlying anxiety about the consequences for children who did not receive adequate maternal care. Analyzing the prevalent notions of motherhood in early twentieth-century Britain, Anna Davin has delineated that the dominant middle-class conventions constructed undivided maternal attention as central to the health of infants. Despite the acknowledgment that lower-class mothers needed to engage in paid work, middle-class reformers and administrators insisted that caring for children was the foremost responsibility of the mother.¹⁰⁶ Government reports in Bombay reaffirmed these notions. For instance, emphasizing the need for crèches in her report, Dr. Barnes described the "evils" of leaving a child unattended or inadequately cared for:

From necessity, the majority of women operatives have to return to work one or two months after their deliveries. They work for ten hours a day, with an hour's recess at noon, and the infant is brought by an elder child, or an elderly relative to the mill for a feed. I once saw a child of six years bring an infant brother to its mother and this child had walked a whole mile to the mill. . . . Women operatives are given at most of the mills, two-three passes to enable them to go to feed their infants. The majority of these operatives live within a radius of one to two miles from the mills and the disadvantages here can be understood. The woman in addition to

standing at her work for the greater part of ten hours has to walk back to her home and back again to feed the child. . . . Should the infant be brought to the mill by a relative, it runs the risk in inclement weather of acquiring a severe chill, the majority of deaths of infants recorded was due to the diseases of the respiratory system.¹⁰⁷

Combined with the nationalist ideals of women's maternal roles, such reports provided ideological support to the campaigns of Indian reformers and labor welfare leaders. Thus, S. K. Bole's maternity benefit resolution sought compulsory provision of crèches to ensure "proper" care of infants during women's work period.¹⁰⁸ Similarly, when N. M. Joshi demanded crèches, he insisted that among women millworkers "it is almost an invariable practice to drug their babies with opium in order to keep them quiet at home."¹⁰⁹ Such apprehensions, which I will return to in Chapter 6, manifested a deeper anxiety about women's recruitment for wage labor and its possible adverse consequences on their responsibility for social reproduction.¹¹⁰

N. M. Joshi's campaigns for maternity benefits further emphasized the perceived conflicts between women's paid employment and their roles in social reproduction. He argued that in addition to their strenuous work in the mills, women had exhausting domestic duties. Their two-fold responsibilities adversely impacted the vitality of both the mother and her infant:

When they [women] take up an industrial employment, domestic work ceases to be their main duty which is the case otherwise. . . . A woman working in the industry cannot find time and cannot have the patience required to enable her to do her duty properly as wife and mother, and this tends to affect the upbringing of their children.¹¹¹

Thus, the proponents of maternity benefits implicitly constructed economic need as an inevitable "tragedy" that drove women to the industrial labor market, drawing them away from their "primary" roles in social reproduction.¹¹² Since unavoidable circumstances such as insufficient family income rendered women's wage labor necessary, crèches were the only available solution to the problem of infant care.¹¹³ Thus, the reformers promoted crèches as a poor albeit only available substitute for maternal attention.¹¹⁴

A PERSISTENT CAMPAIGN

The Central Legislative Assembly merely referred Joshi's proposals to the provincial governments and employers' associations for their comments.¹¹⁵ In its reply, the government of Bombay reiterated that Bombay was unprepared to pass the bill.¹¹⁶ Reflecting the reluctance of industrialists to assume the role of welfare capitalists of a future nation, the Bombay Chamber of Commerce and the Millowners' Association both dismissed Joshi's bill. Citing the exception that the Washington Convention provided to India, millowners argued that immediate legislation was impractical.¹¹⁷ The BMOA expressed its "fullest sympathy with the humanitarian motives of the Bill."¹¹⁸ However, it regarded the provision of a mandatory allowance payment in the bill as an unprecedented and unfair burden on employers. They simply pushed responsibility for the maternal and infant welfare of their labor force on the government. BMOA further argued that the proposed bill was financially harmful to both employers and employees. It warned the proponents of the maternity benefit bill that a legislative obligation to pay maternity allowance might compel millowners to dismiss women from work and to affect adversely "the earning capacity of the families concerned [which] would eventually be resented by the women themselves."¹¹⁹ The millowners adopted similar attitudes toward the proposal of crèches.

In the early 1920s, only eight out of the eighty-two textile mills in Bombay had instituted crèches on their premises.¹²⁰ The recommendations of its own surveys and mounting public pressure persuaded the government of Bombay to articulate a more systematic plan. In 1925, it submitted a proposal to the BMOA about a collaborative scheme recommending the institution of eleven central crèches for the children of women millworkers.¹²¹ The provincial government and the millowners were to share the construction and recurring cost of these crèches. Reiterating their financial constraints, the BMOA declared the cost of this scheme to be "prohibitive." It insisted that such social welfare measures were responsibilities of the local and provincial governments, hence the governments should collaborate with voluntary bodies to create crèches.¹²² The BMOA further claimed that the need for crèches was exaggerated. The experience of the mills that provided crèches was that women workers were reluctant to leave their children in the nurseries. However, the BMOA failed to mention why crèches were unpopular. Dr. Barnes had documented that the few available crèches were extremely

unsanitary and lacked qualified nurses as supervisors. Children with infectious diseases mixed with healthy infants, creating anxiety among mothers that probably made them reluctant to use the crèches.¹²³

While the government and millowners declined to act, campaigners continued their efforts to influence public opinion on maternity benefits. From the 1920s onward, the *Social Service Quarterly* (SSQ), the quarterly journal of N. M. Joshi's Social Service League, published articles that pressed for crèches and the passage of maternity benefits legislation. In its articles about women millworkers, the SSQ frequently cited the resolutions of the Washington Convention and the report of Dr. Barnes that highlighted the need for such legislation.¹²⁴ The proponents of maternal and infant welfare constantly emphasized the national importance of these issues, as they demanded that the colonial state and millowners make compulsory provisions for paid maternity leave and adequate childcare. One author argued that, "if India desires to secure her proper place among the civilized nations of the world, she must treat her women workers in the ways all civilized nations do. The children of a nation are its most valuable assets and upon their health depends its future growth and strength."¹²⁵ In a letter sent to the *Times of India*, Kanji Dwarkadas defended Joshi's bill. He urged the millowners to stand with the people rather than with the colonial state in such matters of national importance.¹²⁶

Continuing his campaigns, N. M. Joshi contested the frequently cited difficulties related to maternity leave. In 1925, in a lecture delivered at the conference of the International Women Suffrage Alliance of London, he dismissed the government's hypothesis that women might seek paid work elsewhere during their maternity leave.¹²⁷ He argued that compulsory pecuniary assistance for the period of absence would prevent women from taking alternative employment and claimed that the government exaggerated the possible evasion of this law and the difficulties of its supervision. Moreover, "there are many sections of the present Factory Act which are being evaded; but that has not prevented the GOI from enacting them."¹²⁸ He dismissed the necessity of female medical practitioners and pointed out that both Tata and Currimbhoy mills successfully ran maternity benefit schemes even though they had employed male doctors for issuing maternity certificates. Joshi challenged the government to reintroduce this resolution in the BLC to test public opinion on the matter.¹²⁹ In 1927, Dwarkadas reiterated the need for maternity benefits at the Maternity, Infant Welfare, and Public Health Conference

held in Poona.¹³⁰ By the mid 1920s, newly emerged feminist organizations began to express their support for the maternity benefits bill.

The period between 1917 and 1927 witnessed the emergence of three all-India feminist organizations—the Women’s Indian Association (WIA, 1917), the National Council for Women in India (NCWI, 1925), and the All India Women’s Conference (AIWC, 1927). Since their formation, these organizations dominated discussions for reforms affecting Indian women. Largely composed of educated middle-class-elite women, these groups largely focused on subjects relevant to privileged Indian women. Geraldine Forbes has noted that, “women leaders were defining women’s issues as female education, child marriage, the observance of purdah, and women’s status in the family. Many of them believed all women shared the same problems.”¹³¹ Such universalism reflected women activists’ class positions, but specific historical contexts also shaped their objectives and practices. In early twentieth century India, highly contested social norms regarding child marriage, purdah, widow’s remarriage, and female education significantly constituted the lives and experiences of elite women. Consequently, elite-dominated women’s groups identified most closely with these issues and their activism revolved around subjects such as the abolition of child marriage, rights to political representation, and educational reforms.¹³² Their interests in working class women was minimal and it arose only in response to the ILO initiatives and the Royal Commission on Labour in India (RCLI), 1929–1930 that was appointed to assess the conditions of mill, railway, and mine workers. The burgeoning debates on maternity benefits in Bombay stimulated them to join the male feminists and claim the right to represent their marginalized, working-class sisters. In comparison to male labor welfare leaders, the interventions of women activists in maternity benefit debates were sporadic. However, in subsequent years, women’s groups and individual women activists played significant roles in articulating working class women’s welfare.

In 1924, the Bombay Presidency Women’s Council (BPWC), which later became a provincial branch of the NCWI, supported maternity benefits and urged millowners to be more sympathetic to the needs of their women workers.¹³³ Dr. Jerusha J. Jhirad, a gynecologist with a Bachelor of Medicine and Bachelor of Surgery (MBBS) degree and a member of the BPWC, argued that maternity benefits were crucial in order to prevent infant mortality and to keep women millworkers from the temptation of resuming harmful factory work soon after childbirth.¹³⁴ Subsequently, the NCWI identified child welfare and maternity benefits

as among the most pressing issues in India, demanding the attention of social activists, millowners, and the government.¹³⁵ Like the male labor welfare leaders, the elite women activists represented maternity benefits not merely as a protective measure for pregnant workers, but they also related the issue to the nation and its future citizens.

In deploying the trope of “future of the nation,” women supporters of maternity benefits, like their male counterparts, underscored the links between anti-colonial nationalism and the incipient colonial feminism. Concentrating on social and political rights of women, the colonial feminist organizations had ostensibly emerged as independent of the mainstream nationalist movement of India. However, as Deniz Kandiyoti has put it, as an ideology and practice, feminism cannot be separated from its broader political contexts, which shape and produce it in significant ways.¹³⁶ Deeply rooted in their broader nationalist settings, middle-class women activists often incorporated nationalist ideals of gender roles into their campaigns for women’s rights.¹³⁷ The leaders of the AIWC, for instance, emphasized motherhood to demand Indian women’s right to education, stressing that education created better mothers. Similarly, Indian women’s groups supported the renewed efforts to abolish child marriage in the 1920s by emphasizing that late marriages enabled girls to reproduce a healthy nation.¹³⁸ Unsurprisingly, their campaigns for maternity benefits also deployed motherhood as the rationale for a basic labor right of women millworkers.

In 1925, *Stri Dharma*, the Women’s Indian Association (WIA) journal where many articles were anonymous, strongly condemned the opposition to Joshi’s maternity benefits bill.¹³⁹ The intertwined themes of pregnant workers’ well-being and the nation’s future were evident in this criticism. One article insisted:

It seems to us that no reasonable man who has realized what the pains and discomforts of child birth must be could possibly oppose such a humane and beneficial measure. But apparently the majority of members of the Legislative Council are without imagination, and can contemplate a woman working up to her hour of travail and leaving her bed and starting work again as soon as she is able to move. . . . There are not many civilized countries in the world where this inhumanity is practiced toward the poor mothers of the nation and it is most unfortunate that India should have taken her side with the capitalist and oppressors of the poor mothers.¹⁴⁰

Another essay in the *Stri Dharma* reminded that, “even a country like Japan is forging ahead of India in maternity benefit provision and other

industrial legislation affecting women and children.”¹⁴¹ The author reiterated “the supreme need for the provision of adequate maternity benefits for Indian working women.”¹⁴² Echoing male supporters of the bill, such articles constructed the protection of pregnant women workers as symbolic of a greater civilization and a healthy future nation and hence, they advised the government and millowners to help enact the legislation not just in Bombay, but also throughout the country.

Meanwhile, in July 1928, R. S. Asavale, a moderate labor leader and a member of the BLC, reintroduced the maternity benefit bill.¹⁴³ The twin themes of nationalism and protection of pregnant women continued to dominate this round of debate as well. A more detailed version of Joshi’s bill, Asavale’s proposal reiterated the physical effects of childbirth on women workers, he demanded adequate protection from the employers “for whom they [women] work throughout their lives.”¹⁴⁴ He warned the council that, “if you do not support such a measure you will destroy not only the women workers but also their progeny who will be future citizens of this country and this presidency.”¹⁴⁵ K. F. Nariman, a local leader of the Indian National Congress, evoked disgraceful, “scandalous instances” in the city of Bombay where women delivered their babies on the streets, on their way to work.¹⁴⁶ Under these circumstances, he said, a government that delayed the passage of this bill only revealed its alien nature. Although Nariman emphasized the irresponsibility of the colonial government, he failed to mention that Indian millowners were equally hostile to the bill. He claimed that, “on account of the foreign nature of this government, on account of its unsympathetic attitude, this country has had a setback in all sorts of social, humanitarian and economic reforms.”¹⁴⁷ Endorsing the bill, Dr. B. R. Ambedkar, a jurist, economist, and the foremost leader of the “untouchables,” insisted that, “it is in the interest of the nation that the mother ought to get a certain amount of rest during the pre-natal period and also subsequently and the principle of this bill is based entirely on this principle.”¹⁴⁸

Despite fierce opposition from Indian millowners, the council enacted the bill in May 1929.¹⁴⁹ Known as the Bombay Maternity Benefit Act, 1929, it was applicable to women factory workers in Bombay Province who were employed in a factory for six consecutive months. Beneficiaries were required to work until the first week of the ninth month of their pregnancies. Women workers were entitled to a maternity leave of three weeks before, and four weeks after childbirth. Millowners were required to pay them maternity allowances calculated on the basis of their existing

wages for these two months.¹⁵⁰ The act prohibited the dismissal of women during the leave period. Its passage was a major victory for its proponents, and it had immense historical importance because this was the first instance in India when paid maternity leave for the wage-earning women of a province became a legal obligation for employers. Even so, it had several limitations.

Significantly, the act made no provision for crèches, leaving it to the discretion of the employers and to the voluntary efforts of social service and women's organizations. Moreover, the government did not sufficiently provide effective means to facilitate the enforcement of the act. Clauses such as the requirement of a certificate of confinement created problems for women workers who lacked easy access to the relevant authorities.¹⁵¹ Women workers were to receive their benefits only after childbirth, which was a problem because, as Kelman has pointed out, "a lump sum awaiting her return would be of no value for the provision of nourishment during the most important period [of pregnancy]."¹⁵² Another weakness of the legislation was its requirement for six months' consecutive employment, as Radha Kumar has argued.¹⁵³ That provision meant that absence because of sickness, weddings, childcare, or participation in strikes could annul claims to the maternity benefits. A 1933 amendment to the act increased the period of consecutive employment to nine months, making women even more dependent on the discretion of their employers.¹⁵⁴ The lack of safeguards against the dismissal of pregnant women meant that in the early 1930s, when production processes such as reeling were gradually mechanized, millowners used the payment of maternity benefits as a justification to reduce their female labor force.¹⁵⁵ These practical limitations apart, the passage of the act significantly shaped long-term attitudes and discourse about women workers' agency and their welfare.

MOTHERHOOD AND WOMEN MILLWORKERS

The issues of maternal and child welfare subsequently dominated the discourse on women workers' well-being. Moreover, the dominance of elite Indians in maternity benefits debates consolidated their credentials to represent "ignorant" laboring women. This trend reinforced the subalternity of working-class women in the colonial women's and labor rights discourses. The importance accorded to educated women during the proceedings of the RCLI in 1929–1930 exemplified this bias. The factory commission of 1875 had interviewed at least six women

workers about their situation in the factory. In contrast, half a century later, the RCLI failed to include a single woman factory worker in its list of witnesses.¹⁵⁶ Instead, the RCLI assumed that newly formed Indian women's groups could sufficiently represent women workers. Thus, it invited middle-class women members of the BPWC, the Young Women's Christian Association (YWCA), and the WMS to submit memoranda and to present oral evidence regarding women workers' welfare.

The limited vision of the RCLI was also evident from the fact that its investigations concerning women millworkers primarily focused on their maternity conditions and issues of infant welfare. It conducted detailed interviews with Iris Wingate, the industrial secretary of the YWCA of Bombay. Most of the interview questions concerning women workers centered on possible amelioration of women millworkers' maternity conditions and increasing the life expectancy of their infants.¹⁵⁷ Wingate reiterated the need for the universal adoption of maternity benefits, the establishment of crèches in the mills, and a simultaneous extension of voluntary infant welfare work.¹⁵⁸ The RCLI also interviewed Dr. Margaret I. Balfour and Dr. Shakuntala Talpade about the reproductive health of women millworkers and the need for crèches in the mills.¹⁵⁹ Based on their experiences and research into the conditions of women millworkers of Bombay, Balfour and Talpade suggested the implementation of maternal and infant health measures.¹⁶⁰ Although they indicated that poverty and an inadequate diet weakened pregnant women and led to consequences such as anemia in mothers and debility in the infants, they did not advise an increase in women's wages. Rather, these two physicians recommended methods such as light work during pregnancy, arrangement for free meals, provision of maternity homes, and a more effective management of the maternity benefits provisions.¹⁶¹

The BPWC presented a memorandum to the RCLI where it specifically mentioned the "special" needs of women workers and their infants and pressed for the universal application of maternity benefits throughout British India.¹⁶² It asked for a reduction in the working hours of women workers, a condition that would enable women to be more attentive to their own and their families' well-being. The group also emphasized the need for greater involvement of voluntary organizations in matters such as the informal education of women workers in domestic science, especially "appropriate" infant care.¹⁶³ It urged the millowners to open crèches and encourage voluntary efforts for the welfare of their women workers and their children. Established in 1930, the BPWC's sectional committee on labor championed a similar framework

for women workers' well-being. This collaborative group included representatives from the AIWC, BPWC, and the YWCA.¹⁶⁴ It re-emphasized that maternity benefits and crèches constituted the core of women workers' welfare. Its other recommendations included the appointment of more women factory inspectors and women doctors, and the greater involvement of welfare agencies in matters of infant and maternal health.¹⁶⁵ In 1931, the WIA and the AIWC organized an All Asia Women's Conference in Lahore that sought the immediate implementation of similar measures.¹⁶⁶

The crucial roles of men and women social activists cannot be discounted. In a situation where the provincial government and millowners strongly opposed measures such as maternity benefits, these advocates were probably the only voices that raised such issues. Yet, as available primary sources indicate, educated activists did not make any visible efforts to involve women workers in their campaigns. Neither the BPWC's sectional committee on labor, nor the Lahore conference included women workers as speakers or even participating representatives or solicited their opinions about maternity leaves and crèches. Like the male spokespersons of labor in the Bombay Legislative Council, the elite women assumed the rights of representing women workers. They articulated women workers' problems according to their own perspectives regarding women's role in the family and society. Apparently, they viewed working-class women as a vast, untapped constituency, which they must claim in order to accentuate their moral authority and substantiate their claims of representing all Indian women. For example, an article in *Stri-Dharma* pointed out that, "the women workers engaged in organized industries such as the textile, mining, and plantation industries, constitute a fairly large slice of feminine humanity which has got indisputable claims on the attention of the women's movement in India."¹⁶⁷ The piece implored educated women activists to provide leadership to their "humble sisters, the large body of Indian women wage-workers."¹⁶⁸ Ironically, elite women and their groups failed to take into account the ongoing assertions of working-class women for improving their material conditions.

Contrary to their depiction as helpless victims, the women millworkers of Bombay actively participated in collective struggles for improved work conditions. Between the years 1921 and 1923, the labor office of Bombay recorded sixteen strikes in the city's cotton mills that women workers initiated and led. Most of these strikes demanded bonuses and increased wages.¹⁶⁹ Although women lacked leadership positions in the

existing trade unions, they were active participants in the prolonged general textile strike of 1928 against the rationalization or reduction of the mill workforce. In the Jacob Sassoon Mill, women workers of the winding department struck work in reaction to reductions in workforce and wages. Their sporadic struggle culminated in the prolonged general strike of 1928.¹⁷⁰ A later enquiry into that strike revealed the militancy of women workers. In one instance, a woman operative physically confronted a manager of the Kohinoor mills who ridiculed her participation in the strike and beat her. The woman struck back.¹⁷¹ During the six-month strike, women regularly picketed at the factory gates; and in solidarity with the strike, they regularly stopped work in their departments.¹⁷²

In several similar instances, women winders and reelers struck work to register their protest against the dismissal of a fellow worker, against an abusive jobber, as a protest against assault on their leaders, or against the sudden termination of their jobs.¹⁷³ Their activism contradicted the dominant notions that they were victims, and that the lack of adequate maternity benefits and crèches were the only problems they faced. Their participation in collective struggles sufficiently delineated the fact that women workers articulated their problems and rights in much broader terms than their elite sympathizers, and that they were willing to participate in efforts to improve their conditions. Unfortunately, the predominantly male leadership of Bombay's main textile mill unions ignored issues related to the specific needs of women workers and their infants. The labor strike reports and trade union papers have not documented the initiatives of women millworkers for the rights of paid maternity leave and crèches. The negligence of male-dominated trade unions left the field open to elite nationalists and reformers who appropriated the issue of a basic labor right and transformed it into a campaign for saving the future citizens of the nation.

CONCLUSION

The passage of the Maternity Benefit Act in 1929 in Bombay underscored the consolidation of public opinion in favor of protective measures for women workers. Moreover, the consistent campaigns for maternity benefits and crèches that led up to the act presented a striking contrast to the earlier lack of demands for such welfare measures. By the early 1920s, the burgeoning discourse about maternal and infant welfare

accorded prominence to the conditions of women in the mills and their everyday lives outside the mills, information that hitherto remained marginal in official and public discourses. But despite making subaltern women visible, the overemphasis on maternity and infant care accentuated essentialist assumptions about women's roles in society. Deploying the powerful ideology of motherhood, elite proponents of maternity benefits and crèches transformed these basic labor rights into a quest for building a nation peopled with robust children and caring mothers.

Because the prevailing elite discourse around paid maternity leave and crèches associated women workers' basic rights with the social reproduction of the nation, this discourse belittled women's role as productive workers. Instead of countering the patriarchal logic inherent in the arguments of male proponents of maternal and infant welfare, educated, middle-class women activists and professionals reinforced the notion that women workers' "supreme" maternal functions defined their needs. Elite advocates of maternal and infant welfare both denied women workers the agency to articulate schemes for their own welfare and ignored the initiatives of women workers in the struggle to gain equally important rights to livelihood and dignity. This double disavowal severely undermined the emancipatory and humanitarian aspects of the campaigns for maternal benefits and crèches.

NOTES

1. Since the late eighteenth century, the English East India Company officials, Christian missionaries, and liberal observers asserted that the status of women determined a society's place in the hierarchy of civilizations. James Mill, a British utilitarian thinker and historian, famously articulated these ideas. He deplored Indian women's subordination, contrasted them to the "liberated" European women, and thus, placed India at the bottom of the civilizational ladder. Future generations of colonial administrators, Indian and European social reformers, as well as feminist activists reinforced, debated, expanded, or contested Mill's framework through their discourses and activities concerning Indian women. James Mill, *History of British India, Vol. I* (1817) (London: Baldwin, Gradock & Joy, 1826). For a few scholarly discussions on the influence of Mill's constructs, see Lata Mani, *Contentious Traditions: The Debate on Sati in Colonial India* (Berkeley: University of California Press, 1998); Antoinette Burton, *Burdens of History: British Feminists, Indian Women, and Imperial Culture, 1865–1915* (Chapel Hill:

- University of North Carolina Press, 1994); Geraldine Forbes, *Women in Modern India* (Cambridge: Cambridge University Press, 1996); Kumari Jayawardena, *The White Women's Other Burden: Western Women and South Asia during British Rule* (London: Routledge, 1995).
2. Janet Harvey Kelman, *Labour in India: A Study of the Conditions of Indian Women in Modern Industry* (London: George, Allen and Unwin, 1923), 14.
 3. Rajani Kanta Das, *Factory Legislation in India* (Berlin: W. de Gruyter, 1923), 144–45. India was the only colonized, unfree country to be a founder member of the ILO. Other member countries considered it a manipulative move on the part of Britain to influence more votes in the League of Nations and the ILO. See Gerry Rodgers, "India, the ILO and the Quest for Social Justice since 1919," *Economic and Political Weekly*, Vol. XLVI, No. 10 (5 March 2011): 47.
 4. *Proceedings of the General Department of the Government of Bombay*, Maharashtra State Archives (henceforth MSA), File No. 574, 5.
 5. Infant mortality figures represented the deaths of infants under one year of age to the total number of births registered in the city. J. S. Nerurker, *Turner and Goldsmith's Sanitation in India* (Bombay: Times of India Press, 1934), 1137.
 6. *Census of India, 1931, Vol. I-India, Part I-Report* (Delhi: Manager of Publication, 1933), 92; Nerurker, *Sanitation in India*, 1139.
 7. *Annual Report of the Sanitary Commissioner for the Government of Bombay for the Year 1899*, 60; *Memorandum by the Army Sanitary Commission on the Administration Report of the Bombay Municipal Commissioner*, 1900, 4–5.
 8. Doshbhai Rastamji Bardi, "Infant Mortality in Bombay, Its Causes and Prevention," in *Report of the Proceedings of the Bombay Medical and Physical Society* (1897–1911), Wellcome Library, London (henceforth WL) Vol. VII, No. 1, 1903, 26.
 9. Since the early 1980s, some historians have critiqued teleological, unitary conceptions about the working classes. They have questioned the universality of industrial workers' experiences and constructed a more complex history of labor by drawing attention to the significance of culture, caste, community, and neighborhood in constituting the world of industrial labor. This historiography has largely neglected issues of gender and its role in shaping labor history. For instance, Dipesh Chakrabarty's work on jute millworkers of colonial Bengal lacked an analysis of gender, itself a sociocultural construct, and how it informed workers' identity and politics. Similarly, in Rajnarayan Chandavarkar's work on millworkers in colonial Bombay, the issue of working-class women remains subsumed under the discussion on neighborhood and industrial housing.

- Dipesh Chakrabarty, *Rethinking Working-Class History: Bengal, 1890–1940* (Delhi: Oxford University Press, 1989); Rajnarayan Chandavarkar, *The Origins of Industrial Capitalism in India: Business Strategies and the Working Classes in Bombay, 1900–1940* (Cambridge: Cambridge University Press, 1994), 168–238. New perspectives on labor include Dipesh Chakrabarty, “Communal Riots and Labour: Bengal’s Jute Mills in the 1890s,” *Past and Present*, 91 (1981), 140–69; Chitra Joshi, “Kanpur Textile Workers: Some Structural Features of Formative Years,” *EPW*, Vol. 16, Nos. 44 and 46 (November 1981): 1823–38; Rajnarayan Chandavarkar, “Workers’ Politics and the Mill Districts in Bombay between the Wars,” *Modern Asian Studies* (henceforth *MAS*), Vol. 15, No. 3 (1981): 603–47.
10. Samita Sen, *Women and Labour in Late Colonial India: The Bengal Jute Industry* (Cambridge: Cambridge University Press, 1999), 142–76; Dagmar Engels, *Beyond Purdah?: Women in Bengal, 1890–1939* (Delhi: Oxford University Press, 1996), 123–57; Dagmar Engels, “The Myth of the Family Unit: Adivasi Women in Coal Mines and Tea Plantations in Early Twentieth Century Bengal,” in Peter Robb, ed., *Dalit Movements and the Meaning of Labor in India* (Delhi: Oxford University Press, 1993), 225–45.
 11. Although Bombay was one of the largest employers of women in the formal industrial sector of colonial India, the issues of labor and gender in the city have received negligible scholarly attention. Radha Kumar’s essay on working-class budget surveys of Bombay is one rare example. Radha Kumar, “Family and Factory: Women in the Bombay Cotton Textile Industry, 1919–1939,” in J. Krishnamurthy ed., *Women in Colonial India: Essays on Survival, Work and State* (Delhi: Oxford University Press, 1989), 133–62.
 12. For a few examples, see G. M. Broughton, *Labour in Indian Industries* (London: Oxford University Press, 1924); A. R. Burnett-Hurst, *Labour and Housing in Bombay: A Study in the Economic Conditions of the Wage-Earning Classes in Bombay* (London: P. S. King, 1925); G. Findlay Shirras, *Report on an Enquiry into Working-Class Budgets in Bombay* (Bombay: Government Press, 1923); G. Findlay Shirras, *Report on Enquiry into the Wages and Hours of Labour in the Cotton Mill Industry* (Bombay: Government Press, 1923); Das, *Factory Legislation in India*; Kelman, *Labour in India*; S. G. Panandikar, *Industrial Labour in India* (Bombay: Longmans, Green & Co., 1933); C. M. Matheson, *Indian Industries—Yesterday, Today and Tomorrow* (Oxford: Oxford University Press, 1930).
 13. *Indian Industrial Commission*, Vol. I, 72; Buchanan, *Capitalist Enterprise in India*, 200–201.
 14. *Annual Report for the Indian Factories Act in the Town and Island of Bombay* (henceforth *Annual Factory Report*), 1899, 3.

15. *Report of the Textile Factories Labour Committee 1906, Factory Labour in India with Appendices*, Oriental and India Office Collection, British Library, London (henceforth OIOC), 11.
16. *Report of the Commissioner appointed by the Governor of Bombay in Council to Enquire into the Conditions of the Operatives in the Bombay Factories and the Necessity or otherwise for the Passing of a Factory Act* (henceforth *Factory Commission of 1875*) (Bombay: Government Central Press, 1875), 92; *Annual Factory Report*, 1900, 4, 1901, 3. In his evidence to the Indian Factory Labour Commission of 1908, S. Meyers, the manager of David and Standard mills of Bombay, commented that "women would make good weavers but then the owners would have difficulty having sufficient reelers and winders." *Indian Factory Labour Commission*, 1908 (henceforth *IFLC 1908*), Vol. II, 71.
17. *IFLC 1908*, Vol. II, 59.
18. M. D. Morris has pointed out that the lack of standardized wages and payment systems makes wage calculation for the colonial textile industry in Bombay extremely difficult. However, official reports and individual observers noted that gender-based and skill-based differentials existed in the industry and women workers generally earned about half of what men earned. Morris, *Emergence of an Industrial Working Class*, 154–77; *Annual Factory Report*, 1900, 4; *IFLC 1908*, Vol. I, 22; Rutnagur, *Bombay Industries*, 358–59.
19. Sen, *Women and Labour*, 89–141; Nirmala Banerjee, "Working Women in Colonial Bengal: Modernization and Marginalization," in Kumkum Sangari and Sudesh Vaid, eds., *Recasting Women: Essays in Colonial History* (New Delhi: Kali for Women, 1989), 269–301.
20. *Factory Commission of 1875*, 23, 53.
21. *Ibid.*, 53, 55.
22. *Ibid.*, 93.
23. Dosbhai Rastamji Bardi, "Infant Mortality in Bombay, Its Causes and Prevention," *Report of the Proceedings of the Bombay Medical and Physical Society* (1897–1911), Wellcome Library, London, Vol. VII, No. 1, 1903, 26.
24. Public health officials often complained that the records of births and deaths were inaccurate and that mortality rates in Bombay were inflated. Starting in 1867, the Bombay Municipality developed a system for collecting vital statistics in the city. The municipal health officers insisted that the prevalent custom of sending prospective mothers to their native districts for confinement meant there were more infants in the city than were actually born and registered there. The deaths of these out-born infants in Bombay swelled the total infant death rate of the city. In addition, a consistent inflow of rural migrants to the city due to acute

- situations such as famine, the outbreak of epidemics, the reluctance of people to register births and deaths, and the inadequate number of registration staff all constrained accurate collection of birth and death data. *Annual Report of the Bombay Municipal Commissioner* (henceforth *ARMCB*), 1905, 180–81; *ARMCB*, 1914, 15; “Memorandum by the Army Sanitary Commissioner on the Administration Report of the Municipal Commissioner of the City of Bombay, 1900–01,” in “Report on Sanitary Measures in India in 1900–1901,” *Proceedings of the General Department of the Government of Bombay*, MSA, Vol. 13, 211.
25. *ARMCB*, 1901–1905.
 26. *ARMCB*, 1903, 45.
 27. Quoted in the *Annual Report of the Sanitary Commissioner for the Government of Bombay*, 1902, 2.
 28. “Report on Sanitary Measures in India in 1900–1901,” *Proceedings of the General Department of the Government of Bombay*, MSA, Vol. 13, 187.
 29. *Annual Report of the Bombay Millowners’ Association* (henceforth *BMOA*) (Bombay: Times of India Press, 1902), 36; *ARMCB*, 1907, 192.
 30. *Annual Report of the BMOA*, 1902, 36.
 31. *Ibid.*, 37.
 32. *IFLC*, 1908, Vol. I, 60.
 33. Evidence of C. Dorabji Panday, *IFLC*, 1908, Vol. II, 96; evidence of H. B. Shepherd, manager, Greaves Cotton and Company’s Mills, *IFLC*, 1908, Vol. II, 75.
 34. Evidence of S. Meyers, manager, David Mills, *IFLC*, 1908, Vol. II, 70; evidence of Sir Sassoon David, proprietor of the David and Standard Mills, *IFLC*, 1908, Vol. II, 76.
 35. Evidence of S. Meyers, *IFLC*, 1908, Vol. II, 70.
 36. Evidence of Dr. J. A. Turner, executive health officer of the Bombay Municipality, *IFLC*, 1908, Vol. II, 42; evidence of Lt.-Col. Corkey, *IFLC*, 1908, Vol. II, 48.
 37. Evidence of Nowrosji Lakriwalla, manager, Sarsawti Mills, *IFLC*, 1908, Vol II, 78; evidence of C. Dorabji Panday, manager, Emperor Edward Mills, *IFLC*, 1908, Vol. II, 96; evidence of S. Meyers, manager, David Mills, *IFLC*, 1908, Vol. II, 70.
 38. Evidence of Nowrosji Lakriwala, *IFLC*, 1908, Vol. II, 78.
 39. *Ibid.*
 40. Evidence of J. G. Hammet, manager, New Great Eastern Spinning and Weaving Co. Ltd., *IFLC*, 1908, Vol. II, 98; evidence of C. D. Panday, *IFLC*, 1908, Vol. II, 96.
 41. *IFLC*, 1908, Vol. II, 61.

42. *Annual Factory Report*, 1908, 3.
43. Evidence of C. Dorabji Panday, *IFLC*, 1908, Vol. II, 96; evidence of G. W. Hatch, ICS, collector of Bombay, *IFLC* 1908, Vol. II, 155.
44. Evidence of L. W. Hartley, inspector of factories, Bombay, *IFLC*, 1908, Vol. II, 47.
45. Note of dissent of Dr. T. M. Nair, *IFLC* 1908, Vol. I, 106; evidence of Sir Sassoon David, *IFLC*, 1908, Vol. II, 76.
46. Evidence of J. D. F. Engel, inspector of factories, Bombay, *IFLC*, 1908, Vol. II, 57.
47. Sabyasachi Bhattacharya, "Swaraj and the Kamgar: The Indian National Congress and the Bombay Working Class, 1919–1931," in Richard Sisson and Stanley Wolpert, eds., *Congress and Indian Nationalism: The Pre-Independence Phase* (Berkeley: University of California Press, 1988), 223–47.
48. V. B. Karnik, N. M. Joshi: *Servant of India* (Bombay: United Asia Publication, 1972), 63–70.
49. S. M. Rutnagar, *Bombay Industries: The Cotton Mills* (Bombay: The Indian Textile Journal, 1927), 485–86, 700.
50. As a member of the BLC, Bole introduced a bill in August 1923 that recommended that the "untouchables" should be allowed to use all public watering places, schools, courts, offices, and dispensaries created by public funds. The council adopted this resolution. In 1926, he moved yet another resolution recommending that the government should withhold subsidies of municipalities that failed to implement the measures recommended in 1923. Christophe Jaffrelot, *Dr. Ambedkar and Untouchability: Fighting the Indian Caste System* (New York: Columbia University Press, 2005), 46.
51. Ashwini Tambe, *Codes of Misconduct: Regulating Prostitution in Late Colonial Bombay* (Minneapolis: University of Minnesota Press, 2009), 108–9.
52. R. P. Dutt, *India Today* (London: Victor Gollancz, 1940), 432–33.
53. As discussed in Chapter 4, by the early 1900s, the rhetoric of self-improvement or self-civilizing had emerged as a counter to the concept of "western civilizing mission." British colonialists used the concept of "civilizing mission" to legitimize colonial domination, they projected colonialism as a system that benefitted the colonized peoples politically, socially, and economically. Colonial rulers deployed such ideas to highlight their civilizing, modernizing roles in India. They simultaneously used this concept to emphasize the "sheer incapability" of Indians to govern themselves, initiate progressive social changes or reform their own society.

54. Sarah Hodges, "Toward a History of Reproduction," in Hodges, ed., *Reproductive Health in India: History, Politics, Controversies* (New Delhi: Orient Longman, 2006), 15.
55. Kanji Dwarkadas, *Forty-Five Years with Labour* (Bombay: Asia Publishing House, 1962), 24–31.
56. Soon after the outbreak of the war, imports into India from Britain and other European countries were drastically reduced. While this led to the significant expansion of existing Indian industries, including cotton and jute, new industries that produced and supplied arms, ammunition, and other essential to the allies were also started. Das, *Factory Legislation in India*, 137–38. For a summary of the colonial state's industrial policy in India, see *Report of the Indian Industrial Commission*, 1918 (henceforth *IIC*, 1918), Chapter VIII; C. Dewey, "The Government of India's 'New Industrial Policy', 1900–1925: Formation and Failure," in K. N. Chaudhury and C. Dewey, eds., *Economy and Society: Essays in Indian Economic and Social History* (Delhi: Oxford University Press, 1979), 215–57.
57. *IIC*, 1918, 1.
58. "Memorandum of Evidence of Mr. Arthur Edward Miriam," surveyor with the government of Bombay, *IIC*, 1918, 1–27.
59. *Ibid.*, 4.
60. Views of G. N. Barnes, vice president of the International Labour Conference, 1919, and representative of Britain and the British Empire, *Proceedings of the General Department of the Government of Bombay*, MSA, File No. 574, Pt. 1, 1920, m115; James T. Shotwell (the American delegate to the Commission on International Labour Legislation, 1919), "The Shadow of Revolution," in E. John Solano, ed., *Labour as an International Problem: A Series of Essays Comprising a Short History of the International Labour Organisation and a Review of General Historical Problems* (London: Macmillan, 1920), 41–44.
61. Barnes in *Proceedings of the General Department*, MSA, File No. 574, Pt. 1, m115.
62. *Proceedings of the General Department of the Government of Bombay*, MSA, File No. 574, Pt. 1, m115, m121; *Report of the Royal Commission on Labour in India* (henceforth *RCLI*) (London: HMSO, 1931), Vol. V, Pt. I, 327.
63. H. B. Butler, secretary general of the International Labour Conference, 1919, "The Washington Conference," in Solano, *Labour as an International Problem*, 205.
64. *Proceedings of the General Department of the Government of Bombay*, MSA, File No. 574, Pt. 1, 1920, m107; Kelman, *Labour in India*, 178–79; S. Kesho Ram, "The ILO and Women Workers," *Stri Dharma*, May 1931, 292.

65. In colonial India, Factory Regulation was a central subject. The GOI considered amendments and additions to factory acts upon the recommendations of Factory Inquiry Commissions and/or the provincial governments.
66. *Proceedings of the General Department of the Government of Bombay*, MSA, File No. 574, 1920, m11; *Bombay Labour Gazette*, January 1922, 28; Kelman, *Labour in India*, 179.
67. *Proceedings of the General Department of the Government of Bombay*, MSA, File No. 283, 1920, m92–93.
68. G. M. Broughton, “Maternity Benefits for Indtl. [*sic*] Workers,” *Journal of Indian Industries and Labour*, August 1921, 296–303.
69. *Ibid.*, 300.
70. *Ibid.*, 303.
71. *Ibid.*, 299.
72. *Ibid.*, 301–2.
73. *Bombay Labour Gazette*, January, 1922, 28–30.
74. *Ibid.*, 1922, 29.
75. Speech of G. A. Thomas, secretary to the government of Bombay, *Bombay Legislative Council Debates*, 30 July 1924, 667. Government officials and contemporary observers of labor conditions uncritically accepted the justifications for not adopting maternity benefit regulations. Despite her sympathetic approach to the maternity conditions of women workers in Indian industries, Kelman reproduced the justifications the government offered. See Kelman, *Labour in India*, 180–84.
76. The 1919 Washington Conference on Labour laid down that “in framing any recommendation or draft Convention of general application, the Conference shall have due regard to those countries in which climatic conditions, the imperfect development of industrial organisation or other special circumstances make the industrial conditions substantially different.” The Indian representatives to the Paris Peace Conference, especially Lord Satyendra Prassano Sinha and Maharaja Ganga Singh of Bikaner, reiterated these views. *Proceedings of the General Department of the Government of Bombay*, MSA, File No. 574, Pt. 1, m115, m121.
77. Geraldine Forbes, *Women in Modern India* (Cambridge: Cambridge University Press, 1996), 12–14.
78. Michael Mann, “‘Torchbearers upon the Path of Progress’: Britain’s Ideology of a ‘Moral and Material Progress in India,’” in Harald Fischer-Tine and Michael Mann, eds., *Colonialism and Civilizing Mission: Cultural Ideology in British India* (London: Anthem Press, 2004), 4–15.
79. The inconsistencies between the theory and practice of social change were specifically evident in the colonial family and gender reforms. Despite its harsh critique of Indian traditions of marriage and the status

- of women in Indian families and society, the colonial government hesitated to make definitive interventions in Indian socioreligious practices, leaving such issues at the discretion of the community. See Tanika Sarkar, *Hindu Wife, Hindu Nation: Community, Religion, and Cultural Nationalism* (Delhi: Permanent Black, 2001), 230–31; Lata Mani, *Contentious Traditions: The Debates on Sati in Colonial India* (Berkeley: University of California Press, 1998), 1–42; Jana Tschurennev, “Between Non-Interference in Matters of Religion and the Civilizing Mission: The Prohibition of *Suttee* in 1829,” Fischer-Tine and Mann, eds., *Colonialism and Civilizing Mission*, 68–94.
80. Das, *Factory Legislation*, 162–63.
 81. *ARMCB*, 1923, 9.
 82. A. R. Burnett-Hurst, *Labour and Housing in Bombay*, 36.
 83. The municipal death records did not collect infant death data according to the economic or occupational status of the parents. Still, the records showed that a higher percentage of child mortality was evident among the people who lived in one-room tenements, indicating the relation between economic status and infant mortality, something I explore further in Chapter 6. *ARMCB*, 1923, 13; Burnett-Hurst, *Labour and Housing*, 41.
 84. *Bombay Labour Gazette*, April 1922, 15.
 85. Kelman, *Labour in India*, 184.
 86. F. D. Barnes, “Maternity Benefits to Industrial Workers: Final Report of the Lady Doctor,” *Bombay Labour Gazette*, September 1922, 31.
 87. *Ibid.*, 31–35.
 88. *Ibid.*, 34.
 89. Tanika Sarkar, *Hindu Wife, Hindu Nation*, 23–52; Partha Chatterjee, “The Nation and Its Women,” in Ranajit Guha, ed., *Subaltern Studies Reader, 1986–1995* (Minneapolis: University of Minnesota Press, 1997), 240–63; Jasodhara Bagachi, “Representing Nationalism: Ideology of Motherhood in Colonial Bengal,” *Economic and Political Weekly* (henceforth *EPW*), 20 October 1990, 66–71; Anshu Malhotra, “Every Woman Is a Mother in the Embryo: Lala Lajpat Rai and the Womanhood of India,” *Social Scientist*, Vol. 22 (January–February 1994): 40–63; Tanika Sarkar, “Nationalist Iconography: Images of Women in Nineteenth Century Bengali Literature,” *EPW* (21 November 1987): 2011–15; Samita Sen, “Motherhood and Mothercraft: Gender and Nationalism in Bengal,” *Gender and History*, Vol. 5, No. 2 (1993): 231–43.
 90. Jasodhara Bagachi, “Representing Nationalism: Ideology of Motherhood in Colonial Bengal,” 70.
 91. David Arnold, *Colonizing the Body: State Medicine and Epidemic Disease in Nineteenth-Century India* (Berkeley: University of California Press,

- 1993), 265; Sarah Hodges, "Toward a History of Reproduction in Modern India," 11–13; Sarah Hodges, *Contraception, Colonialism and Commerce: Birth Control in South India, 1920–1940* (Hampshire, UK: Ashgate, 2008), 39.
92. "The Waste of Infant Life in India," editorial, *SSQ*, October 1916, 72.
 93. *Proceedings of the General Department of Bombay*, MSA, File No. 574, Pt. II, 1920, 125.
 94. *Proceedings of the General Department of the Government of Bombay*, MSA, File No. 574, Pt. I, 1920, 74.
 95. Dwarkadas, *Forty-Five Years*, 35; *SSQ*, July 1925, 5.
 96. Speech of S. K. Bole in the *Bombay Legislative Council Debates*, 30 July 1924, 662.
 97. Speech of S. K. Bole in the *Bombay Legislative Council Debates*, 30 July 1924, 662–63.
 98. *Ibid.*, 662, 663.
 99. Speech of Dr. K. E. Dadachanji, *Bombay Legislative Council Debates*, 30 July 1924, 666.
 100. *Ibid.*
 101. Speech of A. N. Surve, *Bombay Legislative Council Debates*, 30 July 1924, 670.
 102. Speech of G. A. Thomas, *Bombay Legislative Council Debates*, 30 July 1924, 666, 669.
 103. Speech of Cowasji Jehangir, *Bombay Legislative Council Debates*, 30 July 1924, 673.
 104. Speech of Mr. G. I. Patel, *Bombay Legislative Council Debates*, 30 July 1924, 670–71.
 105. *Proceedings of the Bombay Municipal Corporation*, Office of the Brihann Mumbai Municipal Corporation, Mumbai (henceforth BMC), February 1925, 2950.
 106. Anna Davin, "Imperialism and Motherhood," *History Workshop Journal*, No. 5 (1972): 10–11.
 107. Barnes, "Maternity Benefits," 31–32.
 108. Speech of S. K. Bole in the *Bombay Legislative Council Debates*, 30 July 1924, 664.
 109. Joshi, "Women in Industry," 1925; *N. M. Joshi Papers* (II Installment), Nehru Memorial Museum and Library (NMML), S.N-10, 5.
 110. Campaigners often deployed the data that the nurses employed that the municipality had been collecting since 1904 about prospective mothers, their socioeconomic backgrounds, and the conditions of childbirth. These municipal reports recorded information about the percentage of pregnant women engaged in wage employment, who left their homes for work. Municipal reports documented that between 1909 and 1914,

of the total recorded cases of childbirth in Bombay, 32 percent were among mothers who were engaged in paid employment. The average for the years 1917–1920 was about 35 percent. *ARMCB* for the years 1914 and 1920.

111. Joshi, "Women in Industry," NMML, 4–6.
112. Contemporary observers of labor displayed similar sentiments. R. K. Das, who worked for the ILO and studied labor conditions and factory legislation in colonial India, asserted that "the continued absence of women from home has affected the home life and especially the welfare of children." Das, *Factory Legislation in India*, 203. By 1924, Broughton, who recommended maternity benefits for women factory workers, asserted that "there are many obvious drawbacks attaching [*sic*] to the employment of women in factories. . . . A woman who is away at work nearly as long as her husband is too fatigued to do the household duties of cooking and looking after the children." G. M. Broughton, *Labour in Indian Industries* (London: Humphrey Milford, 1924), 125.
113. *Ibid.*, 127.
114. Joshi, "Women in Industry," NMML, 2.
115. "Letter from the Government of India, Legislative Department," in Appendix 19, *Annual Report of the BMOA*, 1925, 381–82.
116. "Secretary to the Government of Bombay to the Secretary to the Government of India, Department of Industries and Labour," Appendix 19, *Annual Report of the BMOA*, 1925, 383.
117. "Letter from the Secretary, the Millowners' Association, Bombay to the Director, Labour Office, Bombay," Appendix 19, *Annual Report of the BMOA*, 1925, 384.
118. *Ibid.*, 1925, 386.
119. *Ibid.*
120. *Annual Factory Report*, 1921, 8.
121. *Annual Report of the BMOA*, 1925, 92.
122. *Proceedings of the Bombay Municipal Corporation*, BMC, January–March 1926, 2256.
123. Barnes, "Maternity Benefits," 32.
124. "Editorial Notes," *SSQ*, July 1921, 41; April 1922, 226–27; January 1923, 191–92.
125. B. A. Engineer, "Maternity Benefits Bill," *SSQ*, July 1925, 6.
126. Cited in Dwarkadas, *Forty-Five Years with Labour*, 36–37.
127. Joshi, "Women in Industry," NMML, 2–16.
128. *Ibid.*, 12.
129. *Ibid.*
130. Dwarkadas, *Forty-Five Years with Labour*, 38.

131. Forbes, *Women in Modern India*, 64–120.
132. Ibid.
133. *Bombay Presidency Women's Council* (henceforth BPWC) *6th Annual Report*, NMML, 1924–1925, 8.
134. Jerusha Jhirad, “Baby Week,” *SSQ*, April, 1925, 165.
135. *Annual Report of the National Council for Women in India* (henceforth NCWI) NMML, 1926, 19.
136. Deniz Kandiyoti, “Identity and Its Discontents: Women and the Nation,” *Millennium*, Vol. 20, No. 3 (1991): 433.
137. Sanjam Ahluwalia, *Reproductive Restraints: Birth Control in India, 1877–1947* (Urbana: University of Illinois Press, 2008), 10; Mrinalini Sinha, “Refashioning Mother India: Feminism and Nationalism in Late Colonial India,” *Feminist Studies*, Vol. 26, No. 3 (Autumn 2000): 623–44.
138. Forbes, *Women in Modern India*, 79–80, 88–89.
139. Because of the lack of adequate contributions, Margaret Cousins, a founder member of the WIA and editor of the *Stri Dharma*, seems to have written on different subjects herself and published the articles, either with the initials K. E. M. or anonymously.
140. Anonymous, “The Maternity Benefits Bill,” *Stri Dharma*, September 1925, 164.
141. K. E. M. [Margaret Cousins], “A Plea for Protective Legislation for Indian Women Workers,” *Stri Dharma*, September–October 1929, 515–21.
142. Ibid., 518.
143. R. S. Asavale in the *Bombay Legislative Council Debates*, 27 July 1928, 337.
144. Ibid., 338.
145. Ibid.
146. Speech of K. F. Nariman, *Bombay Legislative Council Debates*, 27 July 1928, 358.
147. Ibid., 356.
148. Speech of Dr. B. R. Ambedkar, *Bombay Legislative Council Debates*, 28 July 1928, 382.
149. J. B. Petit, a millowner, and Ghulam Hussain, a general member of the BLC, pointed out that the mandatory payment would ruin this indigenous industry, causing hardships not just for the employers but also for the workers, as it would force employers to cut down female labor. Speech of J. B. Petit, *Bombay Legislative Council Debates*, 27 July 1928, 353; Speech of Ghulam Hussain, *Bombay Legislative Council Debates*, 28 July 1928, 401.
150. *Bombay Government Gazette*, May 1929, 82.

151. There were only three officers, the lady inspector and her two assistants, who were responsible for obtaining compliance with the act in Bombay City, Bombay Suburban District, Sholapur, Jalgaon, Belgaum, and Amalner. *Annual Report on the Administration of the Bombay Maternity Benefit Act, 1929 for the Year ending 30th June 1930*, 1.
152. Kelman, *Labour in India*, 183.
153. Kumar, "Family and Factory."
154. *Bombay Labour Gazette*, October 1934, 146–47.
155. In the 1930s, there were several reports of women millworkers being dismissed when they applied for maternity benefits. *Bombay Labour Gazette*, February 1937, 407; May 1937, 656; August 1938, 917; March 1938, 506.
156. Appendix III, List of Witnesses, *Report of the RCLI*, 1931, 544–45.
157. *RCLI*, 1931, Vol. I, Pt. I, 291–97.
158. *Ibid.*, 292–94.
159. *Ibid.*, 276–85.
160. Following the inquiries of Drs. Barnes and Curjel, in 1925, the Indian Research Fund Association, which the GOI organized in 1911, funded Dr. Balfour and Dr. Talpade to inquire into the adverse effects of work on the maternity conditions of women millworkers and their infants in Bombay. The inquiry lasted till 1929 and a report was published in 1930. Margaret I. Balfour and Shakuntala Talpade, "The Maternity Conditions of Women Millworkers in India," *Indian Medical Gazette*, May (1930): 241–49; November 1930, 630–36.
161. *RCLI*, Vol. I, Pt. I, 276–80, Balfour and Talpade, "Maternity Conditions," 248.
162. "Memorandum to the Royal Commission on Labour in India," *The BPWC, 11th Annual Report*, NMML, 1928–1929, 18–26; *RCLI*, 1931, Vol. I, Pt. I, 515–19.
163. "Memorandum to the RCLI," *The BPWC, 11th Annual Report*, NMML, 1928–1929, 24–25.
164. "Report of the Standing Sectional Committee on Labour," *The NCWI, Third Biennial Report*, NMML, 1930–1932, 41–45.
165. *Ibid.*
166. *All Asia Women's Conference: Report* (Bombay: Times of India Press, 1931), 113–14, 145.
167. K. E. M. [Margaret Cousins], "A Plea for Protective Legislation for Indian Women Workers," 516.
168. *Ibid.*, 515.
169. *Bombay Labour Gazette*, October 1923, 33.
170. *Times of India*, 4 January 1928, 9.

171. *N. M. Joshi Papers*, IInd Installment, NMML, File No. 51, 74.
172. *Bombay Labour Gazette*, August 1928, 19–20.
173. *Bombay Labour Gazette*, February 1928, 486; December 1928, 326; January 1929, 422–23; May 1929, 856; September 1929, 16; April 1930, 763–64; January 1931, 435.

Childbirth, Childcare, and Working-Class Women

The efforts to protect infant lives were not limited to the discussions and eventual passage of the Maternity Benefit Act in 1929. There were simultaneous attempts to reform the birthing and childcare practices of Bombay's working-class mothers on the basis of scientific and sanitary principles. From the early 1900s, local public health experts had been insisting that unhygienic childbirth and uninformed childcare were leading causes of infant deaths. For instance, in his award-winning paper on the subject, Dosbhai R. Bardi, a Parsi Licentiate of Medicine and Surgery (LMS) and a faculty member at the Grant Medical College, deplored the "mismanagement during childbirth" and "badly conducted labours [*sic*] by the native midwives."¹ Describing the conditions of childbirth in working class tenements, he noted:

In the darkest corner of a dirty[,] overcrowded room you find a female, with a whole wardrobe closing round her body, the head tied, perspiring freely, with a recently born babe similarly covered up from head to foot lying by her side. . . . You will also find that in the after-treatment of the woman, as regards her lochia &c., dirt and dirty rags take the place of cleanliness and clean things. Small wonder that infants born and brought up amidst such surroundings should fall ready victims to the first inroads of disease, and swell the mortality to an alarming degree.²

Bardi regretted that "personal hygiene has no place in the rearing of infants among the poorer classes."³ Echoing Bardi, the provincial

sanitary officer argued that “the semi-religious, semi-social superstition of the people themselves” were causing disease and mortality among infants.⁴ An assiduous propagandist of maternal and infant welfare, John A. Turner, Bombay’s municipal health officer from 1901 to 1919, agreed with these perspectives and insisted that the lack of “skilled attendance in confinement” and the “ignorance of poorer class mothers” caused infant deaths.⁵ He also pointed out that the nonexistence of nurseries in their factories prevented women millworkers from breastfeeding their infants at regular intervals.⁶

Thus, in early twentieth-century Bombay, the childbirth and childcare practices of working-class mothers became common objects of enquiry and reforms. Local and global influences shaped the discourse that arose around these women’s birthing and caring practices. Provisions of new, sanitary settings of childbirth, replacement of traditional midwives with scientifically trained attendants, and the wider dissemination of “appropriate” childcare techniques emerged as potent methods of preventing infant mortality.⁷ By the early 1910s, the wives of some high-level British officials, along with women doctors and volunteers from local influential families, joined forces with the local government and biomedical practitioners. They collaborated with the municipality to provide medicalized childbirth facilities, antenatal and postnatal care, and crèches to working-class mothers and their infants. Simultaneously, they formed groups to promote hygienic childbirth and childcare, published articles in professional journals on these topics, and lobbied for the creation of state- and corporate-supported childbirth and childcare facilities for workers’ families.⁸ As indicated in the preceding chapter, such initiatives acquired greater prominence after the formation of the ILO in 1919.

This chapter examines the accomplishments and limitations of the various maternal and infant welfare programs in Bombay. The focus on the city’s working classes throws light on the tensions and complexities of funding institutionalized medical care for the masses in colonial India. The reconstitution of childbirth, its transformation from a domestic, traditional practice into a medicalized, institutional process, was deeply linked to the colonial project of modernity. Since the late nineteenth century, replacement of “unscientific” methods of childbirth with new, sanitized practices was projected as a major achievement of colonial rule. However, despite emphasizing the civilizational aspects of modern childbirth, the colonial state was unwilling to allocate adequate funds for such amenities. Therefore, in Bombay, like elsewhere in colonial India,

the creation of childbirth facilities for working-class women largely relied on private philanthropy and municipal initiatives. Although the rhetoric of protecting infant life resulted in the extension of a few facilities for working-class mothers, most efforts remained limited because of insubstantial government aid.

In the industrial city of Bombay, the issue of infant welfare fostered new forms of civic engagement, especially for women social activists. The wives of British officials and educated Indian and European women were instrumental in promulgating the ideas of scientific motherhood among the city's working classes. Their interest in childbirth, reproduction, and the well-being of the working-class population contributed to the creation of antenatal and postnatal care services in the city's poorer neighborhoods. Simultaneously, their voluntary efforts underlined elite women's growing concerns for their working-class sisters. The discourse of scientific motherhood thus constituted a plausible common ground where women, regardless of their social class status, could work together toward the well-being of the country's children. However, this chapter argues that in practice, the discourse of infant welfare was shaped in significant ways by class and class-based differences. Along with local public health authorities, elite, educated women cast working-class women as backward mothers whose ignorance and unhygienic habits endangered infant life. Therefore, their strategies to reduce infant mortality centered on the training and supervision of the supposedly uninformed working-class mother and her modes of birthing, breastfeeding and raising her infants. This chapter highlights that essentialist notions about the irrationality and ignorance of working-class mothers sharpened class and educational differences in colonial urban society and legitimized the elite-dominated invasive discourse and practices of mothercraft and infant welfare.

The multiple and overlapping welfare efforts are divided into two broad categories: medicalization of childbirth and the improvement of infant care practices of working-class mothers. Brief, broad overviews of childbirth facilities in India in general and Bombay in particular until the early 1910s provide context for these initiatives. Subsequent sections discuss the development of medicalized childbirth facilities for Bombay's working-class women, the establishment of infant welfare centers that institutionalized antenatal and postnatal care, and Bombay Baby Weeks and the campaigns to open crèches for the infants of women millworkers. Together, the various sections of this chapter reveal that the history of reproduction in

modern India was not merely about the physiological acts of childbirth, breastfeeding, or infant-rearing methods. Rather, it was closely linked to aspects of colonial social policies, urban governmentality, voluntary activism, and colonial power politics.

COLONIAL MEDICINE AND INDIAN WOMEN

The slow, partial development of Western medicine in colonial India was a prime example of the colonial state's limited governmentality. The British government of India projected colonial rule as a civilizing, paternalistic system of governance that would liberate the colonized from superstitious and backward practices.⁹ Those who promoted the expansion of modern scientific principles of hygiene and healthcare in India constructed such efforts as important aspects of the colonial civilizing mission. Thus, modern, Western medicine constituted a part of what Michel Foucault has characterized as biopolitics.¹⁰ Expansion of social welfare measures such as modern medicine and healthcare institutions legitimized governments' power. Simultaneously, it enabled modern governments to intrude in the daily lives of people, discipline their bodies, collect data, and render people into decipherable, manageable entities.¹¹ In colonial India, hygiene and modern medical science also became vehicles to undermine indigenous medical practices and establish Western cultural superiority. The issue of public health and sanitation allowed the state to increase its control over the bodies and movements of the colonized population, as historians Biswamoy Pati and Manjari Kamat have argued.¹²

However, the colonial state's principles of fiscal conservatism constrained its rhetoric of imperial benevolence and its desire to civilize and control colonized people. In the nineteenth century, the British government of India tied the Western system of medicine to the needs of the British Empire in colonial India, focusing largely on establishing and expanding medical facilities for the British Indian Army because a strong army was critical for maintaining the empire.¹³ The government also created hospitals for European civilians in key imperial urban locations such as Bombay, Madras, and Calcutta. By 1838 the colonial government had begun funding medical care for Indians by establishing dispensaries and hospitals in important urban areas that provided treatment to the destitute and to famine- or epidemic-stricken people. However, in subsequent decades, the colonial state insisted that new hospitals and

dispensaries for the masses must be primarily funded by individual philanthropic resources, voluntary public subscriptions, or local, municipal taxes collected from Indian taxpayers.¹⁴ The government defended its own lack of financial commitment by invoking the civic ideal in Britain, where private philanthropy had played a major role in creating medical institutions.¹⁵ The colonial government's reluctance to allocate adequate resources to public medical care affected the expansion of hospitals and dispensaries for the Indian masses.

Until the late nineteenth century, even this limited medical care system was largely male-oriented. Although the upliftment of Indian women constituted the core of the colonial civilizing mission, the colonial state mostly neglected women's health.¹⁶ Prior to the 1870s, the only women who received any medical attention were prostitutes, whose sexual health the authorities deemed crucial for the health and vigor of British soldiers. Created in 1844, the lying-in hospital of Madras was a rare example of the government's involvement in women's healthcare.¹⁷

By the late nineteenth century, Indian women's health began to attract some attention. Colonial gender politics significantly shaped the emerging discourse on women's health. The colonial government singled out indigenous customs such as child-marriage and *purdah*¹⁸ and the seclusion of women in the supposedly impervious *zenana* (women's quarters) as symbols of India's cultural backwardness and Indian women's degraded status. In colonial discourse on gender, the closed *zenana* came to represent Indian womanhood as a whole, ignoring the fact that only the upper strata of Indian women followed the rigid rules of seclusion. The emancipation of *zenana* women became a justification for the imposition of British rule over India. Reflecting this gender ideology of imperialism, Christian missionaries, European medical women, and social activists projected the medicalization of childbirth and the dissemination of hygienic childcare methods as efforts to civilize Indian culture. Indian women's reproductive health also became a topic of urgent debates in the nineteenth-century Indian social reform movements.

Valorizing women's role as mothers, some Indian social reformers and nationalists denounced practices of child marriage and *purdah* that arguably hindered India's progress as a modern, rational nation. Social reform groups, most prominently the Arya Samaj of North India, were concerned that early marriage, early parturition, and ignorance of safe childbearing and childrearing practices resulted in high rates of infant mortality and weakened the community and nation.¹⁹ For Indian social

reformers, voluntary activists, philanthropists, and local administrators, medicalized childbirth and informed childcare were critical for the creation of a robust, healthy population. This infant centric social discourse rendered women's health synonymous with reproductive health. However, the introduction of Western medical assistance in childbirth in colonial India was a contentious issue. Although a few Indian reformers and nationalist leaders lauded modern methods of birthing over the indigenous ways of childbirth, others, such as Bal Gangadhar Tilak of Bombay Presidency, viewed the extension of Western medicine to indigenous women as yet another example of colonial interference into the lives of the colonized.²⁰ Those calling for change not only advocated reforms in Indian marriage traditions but also favored scientific, hygienic methods of childbirth over the traditional, "unclean" methods the indigenous *dais* used.

The dais or lower-caste barber women were hereditary midwives who traditionally helped in the birth process and cleared away the afterbirth. They typically received their knowledge of and skill in childbirth from their mothers or female relatives. In the colonial discourse on medicalized childbirth, the dais with their perceived superstitious, unhygienic practices, and their disheveled appearance, represented the antithesis of the scientific and sanitized process of birthing.²¹ Throughout the colonial period, public health officials and advocates of medicalized childbirth deplored the "notorious ignorance of Indian midwives" as one of the reasons behind maternal morbidity and child mortality.²² Women physicians contended that crude methods such as "careless cutting and dressing of umbilical cord" contributed to high infant mortality.²³ Thus, the replacement of dais with trained midwives constituted an integral part of the discourse on colonial Indian women's physical well-being.

In the late nineteenth century, medical missionaries and the Dufferin Fund drew attention to the medical needs of Indian women. Beginning in the 1860s, medical missionaries provided assistance during childbirth, especially to the poor.²⁴ By the 1870s and 1880s, numerous Christian missionaries such as the Church of England Zenana Missionary Society, the Methodist Mission, the American Presbyterian Foreign Missionary Society, and the United Free Church of Scotland Mission Hospital, to name a few, established institutes to train the indigenous midwives and provide assistance during childbirth.²⁵ Toward the end of the century, following the lead of the Dufferin Fund, Christian missionary societies secured women doctors from Britain and America, where these doctors

had relatively restricted career opportunities in a male-dominated profession, to provide medical assistance to Indian women.²⁶ The American Marathi Mission of the American Board of Commissioners for Foreign Missions had been active in Bombay Presidency since 1815, and in 1894 it established a hospital for women in Ahmednagar, a town about 150 miles east of Bombay City.²⁷

Rhetoric that focused on saving the Indian women of the secluded zenana significantly informed the creation of the National Association for Supplying Female Medical Aid to the Women of India, popularly known as the Dufferin Fund. It was the first organized effort to secure medical help for Indian women from “doctors of their own sex” because the rules of seclusion and modesty kept elite Indian women from consulting male physicians.²⁸ The Dufferin Fund was established in 1885 at the behest of Queen Victoria. A non-governmental organization, it aimed to establish new dispensaries for zenana women, add female wards to existing hospitals, and ensure that India had a steady supply of trained women doctors, nurses, and midwives from Europe for its hospitals, dispensaries, and private house visits.²⁹

Drawing its resources from donations, public subscriptions, and occasional government grants, the Dufferin Fund embodied the British ideal of medical philanthropy. The heavy involvement of the wives of British officials, and of the officials themselves, made this organization a shining example of British benevolence. Its founder and president, Lady Harriet Dufferin, was the wife of Viceroy Lord Dufferin (1884–1888), while the Queen herself was a patron. The Viceroy and provincial governors also acted as patrons of the Fund. Subsequent vicereines, such as Lady Hardinge and Lady Reading, assumed leading positions in the administration of the Fund.³⁰ They intended their initiatives to introduce scientific principles of medical care to the supposedly most oppressed, secluded section of India’s population—the zenana women.³¹

With its primary focus on the zenana, the Dufferin Fund overlooked the needs of other Indian women, especially those belonging to the rural agricultural or urban working classes.³² But although the Fund emphasized the needs of elite, secluded women, its practices and models of philanthropy influenced the development of medical care for working-class women in places like Bombay City. Despite all its paternalistic rhetoric, the colonial government was unwilling to view women’s health as a state responsibility. This trend continued well into the early twentieth century, creating deep problems of funding, and the Dufferin Fund exemplified

non-governmental initiatives that provided medical relief to women. As subsequent sections show, throughout the late nineteenth and early twentieth century, the government of Bombay encouraged private, voluntary efforts of providing childbirth and childcare facilities for the working classes. Also, the Dufferin Fund's demonization of "untrained" dais impacted the discourse of maternal and infant health across colonial India. The creation and operation of the Fund fostered colonial paternalism. For example, it highlighted the agency and civilizing roles of elite British wives and European or American women doctors, while Indian *zenana* women figured as voiceless recipients of scientific medical care. This top-down approach was evident in colonial Bombay as well. Local administrators, medical professionals, and British and Indian women social activists, discursively constructed working-class women as backward and passive recipients of emerging childbirth and childcare facilities.

THE DEVELOPMENT OF CHILDBIRTH INSTITUTIONS IN THE CITY OF BOMBAY

Like elsewhere in colonial India, medical care for women in Bombay developed gradually and encountered persistent funding problems. Sophia Jex-Blake, one of the first women physicians in late nineteenth-century Britain and a champion of medical education for women, noticed the unwillingness of the Bombay government to assume full responsibility for providing medical care for its "female subjects."³³ But the government did enter into public-private healthcare partnerships, the first being the Jamsetjee Jejeebhoy (or J. J.) Hospital, which opened in 1845. The government of Bombay and Sir Jamsetjee Jejeebhoy, a wealthy Parsi cotton merchant and philanthropist from Bombay, jointly shared the building costs, while the government assumed responsibility for maintaining the hospital.³⁴ In 1852, the hospital created three maternity wards with twenty-four beds, the total number of beds in the hospital being 237.³⁵

In 1882, Lady Reay, the wife of Bombay's governor, supported George Kittredge, an American businessman resident in Bombay, and Sorabji S. Bengali, a Parsi reformer and a member of the provincial legislative council, in organizing the Medical Women for India Fund (MWIF).³⁶ In his 1889 historical account of the MWIF, Kittredge documented that he and other organizers were highly influenced by the growing demands to provide the "native lady the privilege of medical assistance from her own sex."³⁷ Generating funds from wealthy city

dwellers, the MWIF brought qualified women physicians from Europe or America for the newly created women's hospitals such as the Cama and Motalibai Hospitals in the city.³⁸ In subsequent years, charitable contributions from local industrialists and businessmen remained main sources of funding for women's medical care.³⁹

In 1886, Pestonjee H. Cama, a Parsi businessman of Bombay, established the first general women's hospital in the city. The Cama Hospital had sixty-three beds for surgical and medical cases and twelve for maternity cases. Four years later, in 1890, it became the Cama and Albless Hospital when Bomanji Edulji Albless, another Parsi businessman, contributed to the opening of an obstetric hospital in the same compound.⁴⁰ Private funds from the Wadia and Petit industrial families financed the construction of the Bai Motlibai Wadia Obstetric Hospital in 1889 and the Sir Dinshaw Maneckji Petit Hospital for women and children in 1890. With the opening of the Bai Motlibai Hospital, the J. J. Hospital closed its maternity wards.⁴¹ The provincial government shared financial responsibility for the running of these new hospitals. However, in 1907, an amendment in the Municipal Act of 1888 enabled the government of Bombay to transfer its responsibility for maintaining medical institutions to the municipality.⁴²

While European and American women medical health professionals, to whom medical education had been open since the 1850s, gained career opportunities through these early efforts, medical colleges in colonial India did not accept female students before 1883. Even then, proportionally fewer Indian women joined the field because science education was considered inappropriate for respectable Indian women.⁴³ The MWIF and the Dufferin Fund helped the three hospitals—Cama and Albless, Wadia, and Petit—obtain women physicians from Europe and America. In 1886, the MWIF facilitated the appointment of Dr. Edith Peachy from Britain as the physician in charge of Cama Hospital. The following year, the Dufferin Fund established a residential school adjunct to the Cama Hospital that trained Indian women as nurses and midwives.⁴⁴ In 1909, the Bombay Presidency Nursing Association further standardized the training and examination of nurses and midwives in the city.⁴⁵ In the following year, the Mahila Seva Sadan, the sister organization of the Social Service League, established a nursing school to train Indian women in “scientific” midwifery and nursing.⁴⁶ During a training period of two to three years, women trainees twenty to thirty years of age received education in elementary anatomy, physiology, and midwifery. At the end of the course, pupils were examined by their institutes and received a diploma.⁴⁷

These early public-private endeavors were inadequate for a rapidly expanding city like Bombay, and they did not reach the working classes.⁴⁸ In 1907, municipal data documented that “untrained” dais or female relatives of pregnant women conducted 79.8 percent of the total registered births in Bombay.⁴⁹ The Cama and Albless Hospital provided 100 beds; the Bai Motlibai had forty beds, while the Petit Hospital provided twenty beds for maternity cases.⁵⁰ As a government report documented in 1909, the administrators of Bai Motlibai, Cama, and Petit hospitals complained that they lacked adequate space to accommodate all incoming maternity cases and women’s general medical cases.⁵¹ By 1915, ten private maternity homes, three maternity hospitals, and three women’s general hospitals with auxiliary maternity wards existed in Bombay.⁵² Most of them provided facilities for members of specific communities only. For example, the two private Parsi lying-in hospitals established in 1887 and 1898, exclusively admitted Parsi women.⁵³ A 1916 report indicated that with the exception of Bai Motlibai and Cama and Albless hospitals, where a few beds were reserved for indigent patients, all facilities were private and charged unspecified fees.⁵⁴ Most millworkers might have been unaware of the availability of the childbirth facilities at the Cama and Bai Motlibai hospitals because these institutions were located far from the mill districts of north Bombay. Efforts to train midwives and open medical maternity facilities in working-class neighborhoods remained limited until 1914.

“SCIENTIFICALLY” TRAINED MIDWIVES AND MATERNITY HOMES FOR WORKING-CLASS WOMEN

The municipality, the body accountable for the city’s public health, led what efforts there were to medicalize childbirth and supervise infant care among the working-class population of Bombay, with some assistance from voluntary groups active in the city’s working-class areas. These initial strategies to reduce infant mortality focused on the supervision and education of mothers through the practice of home visiting. There were simultaneous efforts to control or eradicate traditional midwifery and replace it with scientific methods of childbirth. Britain provided a model for such reforms. By the late nineteenth century, a number of municipalities in the United Kingdom had adopted similar methods of improving infant health through medicalizing childbirth and regular monitoring of working-class mothers’ caring practices. These methods were expanded

considerably after the Anglo-Boer War.⁵⁵ The British model of infant and maternal welfare was imported to various parts of the empire through medical missionaries and the wives of colonial British officials or the “maternal imperialists” of Britain.⁵⁶ These policies shaped the discourse of infant welfare in early twentieth-century Bombay as well. However, like elsewhere in the British Empire, in Bombay too, these imported techniques were shaped by the local political economy.

The early efforts in Bombay had two interlinked aspects—the scientific training of midwives and the opening of maternity homes. In 1901, Dr. Turner, the municipal health officer, proposed that the municipality employ ten district nurses, and his recommendation was executed the following year.⁵⁷ Municipal nurses were responsible for making morning and evening visits to poorer-class localities in Bombay’s ten municipal registration districts.⁵⁸ Their primary responsibility was to collect data about births, deaths, and unvaccinated and sick children and adults, statistics relevant to the extension of public health measures in the city.⁵⁹ These nurses were also to attend working-class women in childbirth and thus displace “unqualified” dais.⁶⁰

The municipal initiative was one of the first efforts to bring the maternity and childcare issues of the laboring poor under the general rubric of public health. The home visits, the collection of health data, and a growing insistence on supervised childbirth intended to reduce infant mortality by monitoring and regulating the reproductive practices of working-class families. These preventive care strategies also shaped the agendas of Bombay’s voluntary groups. Shortly after its establishment in 1904, the Bombay Sanitary Association (BSA), a voluntary organization whose activities among millworkers are discussed in a previous chapter, appointed two female health visitors to the mill localities of E, F, and G wards.⁶¹ Performing duties similar to those of municipal nurses, the BSA health visitors represented another example of how voluntary efforts collaborated with the municipality to expedite the medicalization of childbirth and the supervision of infant rearing in working-class localities.

Relatively little information is available about the training and skills of the midwife-nurses and health visitors, categories that often appear interchangeably in municipal records. Apparently, municipal nurses were trained midwives and though they were designated as nurses, they had no formal training in nursing.⁶² In contrast to the midwives, the health visitors, it seems, underwent a more comprehensive training. They were required to obtain at least a primary education and a basic knowledge

of the English language and relevant vernacular languages before starting their training. They received instruction in basic nursing, midwifery, sanitation, and training in the skills to communicate with a largely illiterate, poorer-class population.⁶³ Available records suggest that the majority of midwife, health visitor, and nurse trainees were “native Christians” while some were “Eurasian” and “European.”⁶⁴

Both the municipality and the BSA paid specific attention to the training of dais. Dr. Turner represented a dominant view when he described the dai as an “unclean woman who receives a small fee [and] attends woman after woman without any aseptic precautions. . . . Weird and incredible are the descriptions given of the crude and primitive methods employed by the Dais during and after delivery.”⁶⁵ Acknowledging the wide reach of the dais, Turner also accepted that it was impossible to get rid of “this class of women at once” and therefore, he embarked on a scheme in 1907 that aimed to train dais in the modern methods of childbirth. He gathered them in municipal dispensaries where the district registrar, a male medical professional and a municipal employee, lectured and gave demonstrations about how to use hygienic methods in a normal delivery.⁶⁶ Although data are lacking regarding how many dais attended these lectures, those present were instructed to use antiseptics, clean their hands and surroundings, and seek qualified assistance in complicated deliveries. These initial strategies thus focused on midwifery practices and placed emphasis on improved conditions of domiciliary childbirth. British and local women social activists expanded the municipality’s efforts.

Shortly after her arrival in Bombay in 1913, Lady Marie Willingdon personally visited millworkers’ neighborhoods in F ward. The wife of Lord Willingdon, who was then governor of Bombay (1913–1917) and later the governor-general of India (1931–1936), Lady Willingdon was dismayed by the high infant mortality rates in Bombay, but she acknowledged that the poor could not possibly afford to pay for qualified physicians and nurses. She therefore decided to collaborate with the BSA and the municipality to formulate accessible, hygienic childbirth programs especially for working-class women.⁶⁷ Subsequently, in February 1914, the BSA inaugurated the Lady Willingdon Scheme (LWS) at a meeting of the “prominent ladies of the city” where Lady Willingdon presided.⁶⁸ The LWS was supported primarily by public subscriptions.⁶⁹

Echoing the municipality, the LWS characterized the “untrained dai as one of the most important factors contributing to the high rates of infant

mortality.”⁷⁰ As a counter, it appointed ten “scientifically” trained midwives to visit poorer-class localities. Like the municipal nurses who had been working as health visitors since 1902, the LWS midwives sought out prospective mothers during their daily visits and offered assistance during childbirth at the women’s homes.⁷¹ In addition to appointing midwives, the LWS, again like the municipality, sought to bring dais in contact with the “scientifically” trained nurses and female health visitors so that the latter could supervise the dais’ work and thus minimize the risk to mother and child.

Given the limited interests of the colonial state and industrialists in public health matters, such small moves of managing childbirth seemed more feasible. Still, even though the BSA, the LWS, and other voluntary societies supplemented municipal efforts, supervision of childbirth in the city’s vast working-class neighborhoods remained a challenge. Maternity homes presented another alternative to the continued dominance of traditional dais in childbirth, but apparently municipal members were least enthusiastic about the proposals to build them. In 1913, a Committee of the Corporation considered possible measures for preventing infant mortality.⁷² Although this committee said it appreciated the voluntary efforts of the BSA and the work of municipal health visitors, it dismissed the proposals for opening municipal maternity homes for working-class mothers. D. E. Wacha and Nadirshaw Sukhia, two prominent municipal councilors, declared that there was no dearth of maternity institutions in the city and surmised that working-class women were probably unwilling to attend them.⁷³ They considered investing taxpayers’ money in such ambiguous ventures as wasteful. Sukhia asserted that the expansion of maternal and infant health programs should be left to voluntary efforts. The municipality continued to view the development of childbirth facilities as a responsibility of the private capital and voluntary sectors.

In February 1915, the LWS opened its first free maternity home for working-class women in a rented building on Bellasis Road in Byculla in E ward, a prime mill area. Dr. Mary Browne, a Licentiate of Medicine and Surgery (LMS), was its first resident medical officer in charge.⁷⁴ The home had sixteen beds and admitted thirty-nine cases within the first two months of its opening. A year later, in February 1916, Lady Willingdon inaugurated another LWS maternity home, this one with fourteen beds in the Parel neighborhood of F ward, another prominent mill locality.⁷⁵ In September 1916, the LWS added a third home, with six beds, in Colaba in A ward, which was not a mill area.⁷⁶ The Colaba Home

closed in February 1919.⁷⁷ J. A. Turner documented that its location in south Bombay and its relative unpopularity among residents of the area led to its closure.⁷⁸ Each home employed a qualified woman physician, one trained nurse-midwife, and two *ayahs* or attendants.⁷⁹ To boost their bodies and enable them to breastfeed their infants, the women who attended these maternity homes were entitled to receive cow's milk at a subsidized rate. The municipality attached a milk depot to both the Bellasis Road and Parel maternity homes. In cases where the mother was unable to lactate, the cow's milk was to be given to the babies, not to mothers.⁸⁰ The municipality and voluntary groups adopted similar strategies to encourage working-class women to participate in their programs.

The LWS maternity homes also served as training centers where qualified nursing staff instructed traditional dais in conducting normal delivery cases and in the value of cleanliness during delivery. In addition, the municipal district nurse-midwives attended the maternity homes at least once a month. In 1916, the LWS began a more formal nine-month training program for dais who were interested and literate. This program included basic theoretical and practical instruction, and in its last three months it let trainee dais observe complicated cases in one of the city's maternity hospitals. At the conclusion of their training and after their examinations, the trainees obtained a certificate and a bag containing equipment and cleansers necessary for normal delivery cases, bags the district nurse-midwives would subsequently regularly inspect. Women who participated in this program received a monthly stipend of Rs. 10.⁸¹ By 1918 the LWS had trained sixteen midwives, but even such limited efforts gradually proved unaffordable for a voluntary organization that existed on public subscription.

Although the LWS maternity homes were small, their maintenance cost of approximately Rs. 10,000 per annum, was substantial.⁸² Consequently, Lady Willingdon urged the municipality to take over these homes. In 1916, the municipality undertook the Bellasis Road Home and two years later it agreed to take over the Parel home as well.⁸³ Although the municipality assumed the responsibility of running LWS maternity homes, it lacked the resources to do so. Therefore, the LWS sought to acquire larger private contributions earmarked for running the maternity homes. In 1918, Lady Willingdon secured Rs. 500,000 from the Haji Saboo Sidick Trust that she entrusted to the municipality to maintain existing maternity homes and to establish new ones in memory of Sidick, a philanthropic Gujarati Muslim merchant in Bombay.⁸⁴ Accordingly,

in 1919, the Haji Saboo Sidick maternity home of twenty beds opened on the Imamwada Road in E ward, an area with a significant mill population.⁸⁵

Despite these developments, the programs to train large numbers of dais and gradually replace them with municipal and LWS midwives and maternity homes did not achieve immediate success. Available municipal records reveal that the number of childbirths attended by traditional dais or women relatives had declined from 79.8 percent in 1907 to 65 percent in 1920. But the figures still underlined the dominance of dai-administered childbirths.⁸⁶ Contemporary observers such as Janet Kelman argued that the comparatively lower proportion of nurses and midwives indicated the relative unfamiliarity of working-class women with medicalized methods of childbirth.⁸⁷ Although women laborers did not strictly follow the rules of *purdah*, they might have preferred to give birth in the familiar atmosphere of their own tenements. Similarly, they might have preferred the presence of a familiar female figure, a dai, during the intimate processes of childbirth. It is likely that a dai with her roles not only in childbirth but also in marriages and other ceremonies, appeared as a more reliable person, a member of the community, and hence she was preferable to a professional midwife in the alien environment of a maternity home. At the same time, growing popularity of LWS maternity homes suggested that despite their inhibitions, the women of mill areas were not averse to using available biomedical health services.⁸⁸

In the single year of 1918, the Bellasis Road and Parel maternity homes, with twenty-one and fourteen beds respectively, had a total of 1,000 maternity cases. By 1921, admitted cases increased to 1,500.⁸⁹ The Parel maternity home, a rented building with a capacity of fourteen beds, was always full, and sometimes the administration of the home had to refuse admission to applicants.⁹⁰ It is possible that rather than working-class women's reluctance to use new maternity services, it was the lack of adequate facilities that kept traditional dais in high demand. The numbers of municipality and LWS midwives, nurses, and maternity homes were not sufficient to serve the constantly growing city.

The population of Bombay had dramatically increased from 776,006 in 1901 to 1,175,914 in 1921.⁹¹ The working class constituted approximately 79 percent of the city's residents.⁹² The municipal health office lamented that increasing numbers of women of childbearing age required greater efforts to provide skilled care during and after childbirth.⁹³ Although the municipality increased its nurses from ten to twenty in

1921, it was still unable to serve each and every prospective mother considering that the city had more than 200,000 women of childbearing age.⁹⁴ Since 1915, Turner had been arguing that a significant increase in working-class women made a big maternity hospital of at least 100 beds necessary in the mill district of the city.⁹⁵ In response, the provincial government of Bombay reiterated that under the Municipal Act of 1907, such initiatives were a municipal obligation.⁹⁶ Although the problem of funding persisted, by the early 1920s the increasing pressure to create maternal and infant welfare programs for industrial workers pushed millowners and the provincial and local governments to invest in childbirth facilities for working-class women.

THE EXPANSION OF MEDICALIZED CHILDBIRTH IN THE INTERWAR PERIOD

In 1920, the government of India responded to the 1919 ILO Draft Convention by instituting an inquiry into the childbirth conditions of women workers in Bombay and other industrial centers. The Draft Convention recommended paid maternity leaves and job security for pregnant women industrial workers, and it also advocated that women workers should have access to free medical facilities and free assistance from a woman physician or a qualified midwife at the time of childbirth.⁹⁷ The colonial government of India did not implement these recommendations immediately, but it appointed Gladys M. Broughton to collect information about women's employment and maternity conditions. She documented that medical aid for women and the number of women physicians and nurses to attend women workers needed immediate expansion.⁹⁸ Dr. Florence D. Barnes, who surveyed the conditions of women millworkers in Bombay in 1922, asserted that the number of "scientifically" trained midwives was hardly adequate to prevent "mis-managed" childbirth.⁹⁹

Barnes reported that even in the 1920s, more than 75 percent of women millworkers delivered children at home with the assistance of dais or female relatives.¹⁰⁰ She noted that traditional methods adopted to treat women after childbirth caused infections such as pelvic cellulitis.¹⁰¹ To avoid these harmful conditions, she, like Dr. Turner, recommended the creation of maternity hospitals meant specifically for working-class mothers. Barnes further recommended that each millowner must appoint

women doctors for their female employees, while bigger mills with more employees should collaborate to build big hospitals with maternity wards.¹⁰² Such institutions would not only provide skilled assistance in childbirth but also antenatal and postnatal care to women and their infants. These measures, Barnes argued, would positively “affect the next generation” and effectively dispel the influence of “unskilled persons.” Both Broughton and Barnes also recommended the appointment of women factory inspectors to obtain knowledge about women workers’ specific grievances and needs.¹⁰³

Following these recommendations, in 1923 the government of Bombay appointed Dr. Tehmina J. Cama as the first woman factory inspector. Initiating and supervising maternal and infant welfare work in the mills, she served in this post until her death in 1936.¹⁰⁴ By 1923, the government of Bombay also acknowledged that though commendable, “the efforts of Lady Willingdon Scheme only provide for a fraction of the [maternity] cases.”¹⁰⁵ A year later, a provincial government committee on medical relief recommended a thorough expansion of medical services, including maternity hospitals for Bombay.¹⁰⁶ Leslie Wilson, the governor of Bombay from 1923 to 1928, agreed that “the welfare of the children of any country is the real foundation of the prosperity of that country” and emphasized the necessity of establishing maternity hospitals in the mill district.¹⁰⁷ Still, the government of Bombay resisted increasing government spending and reiterated that affluent Indians must share the financial responsibility for these measures.¹⁰⁸

After the First World War, government reports on maternity conditions of working-class women and consistent campaigns by labor welfare leaders to improve these conditions compelled some millowners to introduce basic health services for their women workers, as discussed in the previous chapter. However, as a group, the Bombay Millowners’ Association (BMOA) repeatedly claimed that providing maternity hospitals and such facilities as were necessary for women workers in “the most crucial period of their lives” was the government’s responsibility.¹⁰⁹ Although for most individual millowners, labor welfare was still an unnecessary financial burden, some, most notably the Tatas, Petits, and Wadias began to provide paid maternity leave and crèches to their women employees. A few mill groups such as the Currimbhoyas, Tatas, and Sassoons employed full-time women physicians, while the Spring Mill of the Wadia group opened a dispensary with a part-time woman physician for their female employees and their children.¹¹⁰ Established in 1925, the Nowrosji N. Wadia

Maternity Hospital, the first such medical institution in the mill districts of Bombay, was a prime example of the willingness of individual Parsi millowners to extend medical care to their women workers.

In 1924, Ness N. Wadia, a scion of the Parsi shipbuilding and textile manufacturing family, donated Rs. 16 lakh to create a maternity hospital in the mill neighborhood of Parel for working-class women, especially those engaged in the textile industry.¹¹¹ Known for their philanthropy, the Wadias, one of the wealthiest Parsi business families of colonial Bombay, generously supported several medical institutes, including the Parsi General Hospital and the Bai Jerbai Wadia Hospital for children.¹¹² With 120 beds, the proposed Nowrosj N. Wadia Maternity Hospital was to reserve at least half of its beds for women who at the time of their admission were employed in a textile mill.¹¹³ All such women were to receive free treatment. The Wadia Trust created an endowment fund to support half of the maintenance costs, and the provincial government and the municipality agreed to share equally the remaining 50 percent of the total cost.¹¹⁴ Sir Leslie Wilson inaugurated Wadia Hospital in December 1925. In his speech, he underlined the importance of such health services in “saving many thousands of lives in the future and alleviating the pain and suffering of women [in the mill area].”¹¹⁵ The governor of Bombay reiterated that philanthropy was instrumental in expanding medical aid for Britain’s working class, and he exhorted employers in India to follow this model and the example of Ness Wadia.

The hospital was “equipped with the most modern appliances and fittings” and Dr. M. V. Mehta, its chief medical officer (CMO), was known for his “tact and patience” in treating working-class women.¹¹⁶ Elite British women such as Vicereine Lady Irwin and Lady Wilson, wife of Bombay’s governor, visited the hospital and praised it as an important effort to displace the dais.¹¹⁷ Frequently regarded as “an example [of goodwill] in the annals of philanthropy,” this hospital quickly became popular.¹¹⁸ According to a municipal report, “female operatives of the cotton mills came in by the hundreds to take advantage of the care and skill with which the antenatal and confinement cases were treated.”¹¹⁹ Dr. Mehta reported that by 1928 the hospital conducted more than 3,000 births annually.¹²⁰ Thus, Wadia Maternity Hospital was a significant addition to the growing numbers of childbirth and antenatal care institutes in the city.

Despite these developments, the supply could not keep up with a rising demand. In Wadia Hospital, patients who came for childbirth or

antenatal and postnatal care increased considerably, creating enormous pressure on the nursing staff, which consisted of only four trained general nurses, four nurse-midwives, and thirty-six nurse trainees. For a hospital that conducted 340 births in the single month of October 1929, the staff was grossly inadequate.¹²¹ The high number of patients at Wadia Hospital amply indicated that working-class women were not averse to using modern childbirth facilities. However, the hospital's success did not stimulate plans for further expansion of these facilities. Meanwhile, medical experts kept suggesting that wider availability of childbirth amenities was crucial for controlling infant mortality. However, persistent problems of resource allocation limited the execution of the experts' advice.

In their 1929 study of the women millworkers and male millworkers' wives, Drs. Margaret Balfour and Shakuntala Talpade recommended that to make childbirth safer and to create a healthier infant population, each mill should attach a simple maternity home to its premises with a "scientifically" trained midwife to attend normal labor cases.¹²² The doctors reiterated their recommendations during the proceedings of the Royal Commission of Labour in India (RCLI).¹²³ In response, the representatives of the BMOA argued that since one of their members had already funded a maternity hospital (Wadia) and the municipality provided several other maternity homes, "why should it be our duty to provide any more?"¹²⁴ Indian millowners reiterated their complaints about unjust tariffs and the lack of protection against international competition, conditions that undermined their profit share. In this situation, they argued, labor welfare created an "excessive and unwanted burden on the industry."¹²⁵ As discussed in an earlier chapter, millowners had frequently used the vulnerability of Indian enterprise under imperial rule as a justification for avoiding labor welfare. Despite growing international and local pressures, only a few industrialists allocated resources for the well-being of their workforce.

In 1930, Dr. Mehta of Wadia Hospital presented a scheme for the reorganization of municipal maternity homes, a measure that would ease the pressure on his institution.¹²⁶ He recommended the appointment of more nurse-midwives in maternity homes to handle normal cases of pregnancy and childbirth. Mehta also advocated a free ambulance service, which would facilitate the transfer of more complicated cases to the Wadia Hospital. The municipal subcommittee found these suggestions "financially impracticable."¹²⁷ Responding to the RCLI's

recommendations regarding the expansion of maternity facilities for women workers, the government of Bombay also reiterated its financial limitations. It declared that the interwar depression had limited its ability to support existing government and semi-government medical institutions. During this period of economic distress, the government could not be expected to create new medical facilities for the working classes.¹²⁸ The provincial government simply passed the buck and asserted that the millowners of Bombay, voluntary groups, and the municipality should finance the expansion of these services.¹²⁹ Consequently, in the 1930s, the expansion of medicalized maternity facilities depended on the municipality or private funds.

The municipality continued its efforts, and in 1931 it established two more maternity homes, one in E ward with fifty beds and another in G ward with sixteen beds.¹³⁰ Now Bombay City had forty-eight maternity institutions consisting of smaller homes as well as hospitals. Designed to assist normal delivery cases, the capacity of the maternity homes was between two and fifty beds, while the number of beds in well-equipped hospitals ranged from twenty to 120. Together these small and large institutions provided a total of 899 beds.¹³¹ Out of the 48 maternity homes and hospitals, only four maternity homes and the Wadia Hospital were located in the mill district (municipal wards E, F, and G). G ward, which housed a large working-class population, had only a small municipal maternity home of twelve beds that opened in 1931.¹³²

Reflecting the city's rapid growth, by 1934 maternity institutions in Bombay numbered sixty, with a total of nearly 1,000 beds.¹³³ All were maternity homes with the exception of the Bai Motlibai and Wadia hospitals, the two private Parsi lying-in hospitals, and the maternity wards of the Cama and Albless Hospital. All were privately owned and profit-oriented apart from the five municipal maternity homes and the Wadia, Motlibai, and Cama and Albless hospitals.¹³⁴ A municipal report claimed that trained women physicians, midwives, and nurses opened maternity homes in different parts of the city to earn quick profit.¹³⁵ In subsequent years, the municipality considered several proposals to expand the capacity of its maternity homes. It also proposed creating more sophisticated facilities to handle complicated childbirths and avoid the inconvenience of transferring such cases to hospitals.¹³⁶ By 1940, the municipality was forced to drop all such plans due to the Second World War and the consequent diversion of revenues.¹³⁷

PREVENTING INFANT MORTALITY THROUGH ANTENATAL AND POSTNATAL CARE

In the rhetoric of infant welfare, preventive care was valued as highly as the scientific management of childbirth. Beginning in the early 1900s, commentators on infant mortality such as Dr. Bardi had been claiming that the “ignorance of the masses,” poverty, unsanitary surroundings, or such practices as “injudicious feeding” caused stillbirths and the death of infants within their first twelve months.¹³⁸ Turner reaffirmed that “premature birth,” “ignorance” of expectant women, and “defective feeding” endangered infant life during the crucial first year.¹³⁹ Both Bardi and Turner claimed that the conditions of poverty—insanitation, overcrowding, and lack of nutrition—made babies susceptible to diarrhea, respiratory problems, lower birth weight, and debility. Later, advocates of maternal and infant welfare such as N. M. Joshi emphasized that healthier living conditions required structural changes in the city’s built environment and also in the incomes of Bombay’s working classes. The municipality, individual biomedical experts, and voluntary groups lacked the resources and authority to alter the unevenness of living conditions or to place expectant working-class mothers and newborn babies into a healthy environment. Instead they supported small measures intended to improve antenatal and postnatal care for working-class mothers and their infants.

As early as 1907, the municipality instructed its nurse-midwives, who had been visiting working-class areas since 1902, to provide maternity advice to women in their assigned localities. They were to make home visits before and after childbirth and teach mothers about appropriate antenatal practices, the healthy care of babies, and ways to avoid situations that might negatively affect the lives of their infants.¹⁴⁰ By 1912, the municipality granted a small annual sum of Rs. 1,000 to distribute milk, bread, and even bedding to facilitate healthy and comfortable childbirth for working-class women during the later stages of their pregnancy.^{141,142} There are no available data on how many women actually received these benefits. Apparently, women could qualify for such benefits only after going through the bureaucratic procedure of obtaining a certificate of poverty from the district registrar of their area. Such processes might have restricted access to these provisions. However, the municipality and voluntary groups continue to follow these tactics of producing healthy infants. For example, the midwives of the LWS

gave “homely talks” to women chawl dwellers on antenatal practices and the hygienic care of infants. As mentioned earlier, the municipality had established two milk depots at the Belasis Road and Parel maternity homes, and they distributed milk to women who delivered babies in the LWS or municipal maternity homes. The LWS also provided free feeding bottles for infants born in its maternity homes. New mothers were taught how to feed cow’s milk to their babies if they were not lactating sufficiently.¹⁴³ These efforts assumed a new, larger form by the early 1920s.

In March 1919, after transferring the responsibility of its last maternity homes to the municipality, the LWS closed down. The balance of its funds passed to a “Ladies Committee,” headed by Lady Blanche Lloyd, the wife of Bombay’s governor.¹⁴⁴ She supervised and expanded the work of the LWS. Emphasizing the importance of antenatal and postnatal care in preventing infant mortality, a year later she established a voluntary organization, the Bombay Presidency Infant Welfare Society.¹⁴⁵ Aside from Lady Lloyd, the supervising “Ladies’ Committee” of the Infant Welfare Society included prominent Indian women of Bombay, such as Lady Mehrbai Tata, Dr. Dosbhai Dadabhoy, Dr. Malini Sukhtankar, and Mrs. J. B. Petit.¹⁴⁶ The involvement of British women in infant welfare programs, it may be argued, highlighted the caring, maternal face of colonialism. Similarly, educated Indian women’s prominent presence in such endeavors underscored their widening roles in the public sphere and in the making of a robust Indian society. Therefore, social welfare programs were not simply meant to preserve infant life, they also served broader political and ideological purposes.

One of the main objectives of the Infant Welfare Society was to establish Infant Welfare Centers (IWC) in different parts of the city. Raising funds through public subscription and small municipal grants, by the early 1930s the Society had created seven centers. Of these, five were located in mill areas, with one attached to the Imamwada Municipal Maternity Home that was established in 1919 with a total of twenty beds.¹⁴⁷ Like the municipality and the LWS, the Infant Welfare Society claimed that advice on good antenatal practices, appropriate care of babies, and distribution of milk were crucial measures to reduce infant mortality. In addition, regular medical checkups and timely treatment for infantile diseases could protect infants.¹⁴⁸ Further extending the work of the municipality and LWS, each IWC appointed one female

health visitor. Available records indicate that unlike municipal nurses, the nurse-midwife and health visitors of the IWC did not provide regular midwifery services during childbirth. Rather, they visited workers' chawls to advise women about "proper" ways of breastfeeding and bathing their babies. They persuaded expectant mothers or women with infants to attend the nearest IWCs at least once a month for antenatal and postnatal advice.¹⁴⁹ In addition to the health visitor, each IWC appointed a woman doctor and one nurse-midwife who supervised milk distribution and assisted women doctors in advising mothers and examining or treating infants.

The IWCs regularly examined the babies under their supervision for infections and diseases such as diarrhea, measles, and respiratory problems, which were some of the identified causes of death during early infancy.¹⁵⁰ Their staff maintained an overall chart of infants' health, entering changes in babies' body weights. The IWCs resorted to various techniques to encourage women to attend the centers with their infants. For instance, most IWCs provided subsidized or free milk to nourish lactating women who were registered with them.¹⁵¹ In 1923, the IWCs recorded the distribution of around fifteen and a half gallons of milk.¹⁵² The centers thus played multiple roles in preventing infant mortality. They monitored the health of working-class babies, gave lessons in maternity, and instituted a system that rewarded participating mothers with subsidized milk and free advice about infant care.

Motivated by the success of the IWC's schemes, in 1930 the municipality began to attach an antenatal, postnatal, and infant welfare clinic to each of its maternity homes. Since the municipality did not increase the staff of its maternity homes, these clinics were held only twice a week, but they provided facilities similar to the IWC's.¹⁵³ The sizeable number of women availing themselves of antenatal and postnatal care reaffirmed that working-class women were not resistant to modern health services. Although historical records have rarely documented laboring women's own perceptions about such measures, it appears that working-class mothers were willing to avail such facilities as the municipality and the IWCs offered.¹⁵⁴ Available documents show that in 1932, about 16,000 women visited the IWCs for antenatal advice, a thousand more than in the previous year. More than 6,000 infants were registered for regular examinations.¹⁵⁵ Commenting on a decade of the IWCs work, a 1933 piece in the *Social Service Quarterly* congratulated the Infant Welfare

Society “for the welfare of the many mothers and children of the mill area of Bombay.”¹⁵⁶

“APPROPRIATE” CARE MAKES HEALTHY BABIES

In the interwar period, champions of infant health were raising a wide array of issues, and division of their overlapping activities into neat categories is challenging. They attacked several aspects of working-class maternity: insufficient breastfeeding due to women’s wage employment, leaving children unsupervised, and “bad mothering” in general. Drawing on existing accounts of working-class women’s mothering practices, they devised intervention, supervision, and education as effective ways of dealing with maternal ignorance. The reformers specifically advocated the creation of crèches for well-managed, supervised infant care while they also assumed responsibilities for helping working-class mothers improve their caring practices. The project of reforms involved two contradictory objectives. The provision of crèches suggested the possibility of a critical structural change that would enable wage-earning mothers to nurse their babies at regular intervals. At the same time, the insistence on teaching mothercraft to working-class women underscored the fact that individual mothers themselves were responsible for the health and well-being of their children and therefore they must be adequately instructed for their tasks.

The earliest observers of infant health, Dosbai Bardi and J. A. Turner, repeatedly claimed that the working classes lacked knowledge about cleanliness, proper diets, and appropriate ways of nursing and bathing their infants, and that ignorance caused more infant deaths.¹⁵⁷ They argued that working-class women’s employment and their extended hours away from their infants took time away from their childrearing duties. Bardi asserted that because of their work schedules, women millworkers were unable to breastfeed their infants at regular intervals. Consequently, he noted, “in course of time the good milk gets deteriorated in quality by being kept in the breasts for long hours.”¹⁵⁸ This irregular feeding, he claimed, devitalized infants and lowered their life expectancy. Bardi was shocked to note that to soothe their ill-fed, irritable infants, most women workers resorted to *balgoli*, a pill containing opium that quieted infants but severely endangered their lives.¹⁵⁹ By the early 1920s, the problems of inadequate breastfeeding and opium drugging fueled the demand for

crèches or nurseries in the mills. Similarly, the alleged maternal malpractices also intensified the campaigns for working-class mothers' education.

As discussed in Chapter 5, Bombay's labor welfare leaders had asserted during their campaign for maternity benefits that a crèche was a crucial facility. S. K. Bole, for instance, argued that crèches within a mill would ensure the regular breastfeeding of infants.¹⁶⁰ N. M. Joshi, another labor welfare leader, lamented that "the evil of drugging the babies with opium is solely due to the failure to provide crèches."¹⁶¹ Despite their insistence, a clause that would have mandated crèches was dropped from the Bombay Maternity Benefit Act of 1929. The removal of this clause exempted Bombay's provincial government and millowners from any mandatory obligation to provide childcare facilities. Even so, the concerns over the lack of crèches and the negative implications for women workers' babies persisted throughout the early twentieth century.

The campaigns for crèches drew heavily on the report of Dr. Florence Barnes that was published in 1922. Her brief yet poignant account of maternal and infant health among Bombay's millworking families concluded that the lack of crèches damaged infants' health in several ways.¹⁶² It deprived babies of regular breastfeeding and exposed them to the evil of opium drugging. Claiming an almost "universal usage of opium in Bombay," her report declared that close to 98 percent of children born to industrial workers had "opium administered on them . . . to keep them quiet till the mother returns from work."¹⁶³ Her accounts of opium drugging might have been exaggerated, as Samita Sen points out.¹⁶⁴ However, Dr. Barnes's findings provoked considerable concern among medical professionals and activists. Subsequent surveys of working-class lives in Bombay invariably mentioned women's "habit" of drugging their babies. Most accounts do not provide clear data and therefore it is unclear whether drugging babies with opium was widespread or if these reports were based on anecdotal evidence. Nevertheless, the reports fed into the narrative of maternal malpractice and intensified reformers' campaigns for crèches and consciousness raising.

Janet Kelman's extensive account, for instance, documented the custom of feeding *balgoli*, "a tiny opium pill mixed with a little of the mother's milk" to keep the baby quiet while the mother was at work.¹⁶⁵ Under the impact of opium, she wrote, the "little one fades away, or yields to bronchial trouble. . . . It is difficult to keep such [opium drugged] babies alive for the first two years."¹⁶⁶

A. K. Burnett-Hurst, a professor of economics at the University of Allahabad, listed the use of “poisonous pills” as one of the reasons for dismal infant health among millworkers.¹⁶⁷ N. M. Joshi lamented that “among women workers, it is almost an invariable practice to drug the babies with opium in order to keep them quiet at home.”¹⁶⁸ In 1925 this scandalous issue reached the British House of Commons. T. Johnson, the inspector of factories in Bombay, reported to the House that the use of opium on millworkers’ babies significantly contributed to the city’s infant mortality rates.¹⁶⁹ Women physicians agreed that millworking women frequently administered opium on their infants. Dr. Jerbanoo E. Mistry, a Parsi LMS in Bombay, listed “the habit of giving opium to babies to keep them quiet while the mothers are away” as one of the main causes of infant mortality.¹⁷⁰ Based on her study of women millworkers and their infants in Bombay, Dr. Margaret Balfour indicated a wide use of opium to keep babies calm.¹⁷¹ She pointed out that “unless crèches are provided for all the mills, the children of working mothers are liable to be dosed with opium.”¹⁷² She insisted that crèches kept the infants “near the mother and with people at hand to prevent them coming to harm. . . . There [at their homes] they might be left with a neighbor or a young brother or sister and perhaps given a dose of opium to keep them quiet.”¹⁷³

Most millowners were unwilling to assume this responsibility.¹⁷⁴ After her appointment in 1923 as the first and only woman factory inspector in Bombay, Dr. Tehmina J. Cama attempted to convince more millowners to open crèches.¹⁷⁵ Similarly, in 1926, citing from the directives of the Washington Convention on Labour, the Bombay Municipality reminded the Millowners’ Association of the obligation to provide crèches. The proposed plan of the municipality advised millowners to pool their resources and to create eleven centralized crèches for the infants of their female employees. The BMOA responded that millowners were unprepared to assume the responsibility for this “elaborate and costly scheme.” They expected the provincial government and the municipality to bear this cost.¹⁷⁶ The BMOA further claimed that such attempts were anyway futile because millworking women were unwilling to leave their infants away from themselves and with unfamiliar attendants.¹⁷⁷ The popularity of existing mill crèches contradicted this claim. Since 1919, the Currimbhoy Ebrahim Mills had maintained a crèche. In the beginning women were reluctant to use this

facility because they hesitated to leave their babies with the unfamiliar staff but eventually attendance in this crèche increased. In 1926, this crèche cared for about 70 babies.¹⁷⁸ From 1919, the Sassoon groups of mills successfully ran two crèches for both infants and young children of their female employees. The staff of these crèches was responsible for giving baths to the infant and child attendees and providing them with milk, biscuits, and meals. David mill and Maneckji Petit mills provided similar crèche facilities.¹⁷⁹

In 1924, the Bombay Presidency Infant Welfare Society attached a crèche to its Tardeo center in the mill district of E ward that accommodated forty infants.¹⁸⁰ By the late 1920s, over twenty mills out of eighty-three provided crèches. While the Infant Welfare Centre crèches admitted only infants, the few existing mill crèches generally accommodated both infants and children up to five years of age. But like maternity homes and hospitals, crèches struggled for funds during periods of financial stress. When “trade was dull,” infants were turned out of a mill crèche, as Kelman revealed.¹⁸¹ Dr. Cama noted that the slackening of business during the prolonged mill strike of 1928 triggered the closure of several crèches.¹⁸² Despite their limited success, crèches emerged as a way to enable regular breastfeeding and were seen as an effective counter to the practice of drugging babies with opium. Dr. Cama claimed that the crèches in some mills ensured that at least a few infants could escape the “pernicious balagolis.”¹⁸³

By the late 1920s, crèches and their trained staff members embodied “appropriate” infant care. The much-publicized visits of elite British women to the crèches became occasions to display hygienic childcare methods. During her trip to Bombay in 1927, Vicereine Lady Irwin and the provincial governor’s wife, Lady Wilson, visited the Infant Welfare Society crèche for millworkers’ infants in Tardeo.¹⁸⁴ They inspected the crèche’s sanitary and feeding arrangements and “two little mites were bathed in order to demonstrate to Her Excellency the first proceedings on arrival [of infants] each morning.”¹⁸⁵ Emphasizing how crèches showcased healthy childrearing practices, the Bombay Presidency Women’s Council (BPWC), women physicians, and social activists, all demanded further expansion of such facilities for women workers and their infants.¹⁸⁶

Apart from crèches, informal training in mothercraft was promoted as a major strategy for promoting hygienic childrearing among the working

classes. Burnett-Hurst claimed that “the average woman of the poorer classes has little or no idea about how to rear a child, and is almost entirely ignorant of hygiene and sanitation.”¹⁸⁷ He was reiterating a widely held assumption. From the early 1900s, the municipal health reports of Bombay insisted that a lack of hygienic consciousness among working-class mothers significantly contributed to infant mortality and “the remedy for this lies in the direction of educating the poorer classes.”¹⁸⁸ Therefore, delivering regular informal lectures on domestic hygiene constituted one of the duties of the municipal and LWS midwives and the BSA health visitors.¹⁸⁹ During their home visits, health visitors talked about household sanitation, appropriate care of lying-in women and infants, and the proper rearing of children.¹⁹⁰ Other topics of instruction were the causes of infantile diarrhea and deleterious influenza. Health visitors urged mothers to keep food covered and maintain cleanliness and ventilation in their living quarters. They advised that in order to avoid diarrhea, mothers must breastfeed their babies up to six months of age.¹⁹¹ The health visitors cautioned mothers against feeding inadequately boiled cow’s milk or stale food to their infants and leaving their babies unattended. Referring to similar campaigns among the jute millworkers of colonial Bengal, Samita Sen argued that doctors, health visitors, “scientifically” trained midwives and middle-class social activists defined the new mothercraft or the “appropriate” ways of rearing infants. “The standards of hygiene, nutrition and childcare they set were derived from the middle-class contexts.” They assumed that working-class women were unfamiliar with the basic principles of sanitation and infant care that formed the core of the new mothercraft.¹⁹² Therefore, working-class women’s participation was limited to being passive recipients of this knowledge.

Apart from home visits, the occasional organization of baby weeks emerged as a powerful way of promoting the ideals of infants’ well-being. The propaganda of baby weeks reinforced the stereotype of the irrational working-class mother who perpetually required guidance from her educated, enlightened sisters. Founded in 1921, the Lady Chelmsford All India League for Maternity and Infant Welfare was instrumental in organizing baby weeks across India.¹⁹³ Within two years of its foundation, the Lady Chelmsford League and the Red Cross Society created the National Baby and Health Week Association (BWA). The BWA soon became a prominent voluntary group that organized infant health propaganda programs in various parts of India.¹⁹⁴

Lady Cowasji Jehangir, member of an influential Parsi business family of Bombay chaired the Bombay branch of the Baby and Health Week Association (henceforth Bombay Baby Week) while Lady Wilson became its president.¹⁹⁵ This group specifically targeted the “evil” childrearing practices prevalent among the working classes and decided to intensify the mothercraft lessons that the municipality, IWC, and BSA had started.

In 1926, Lady Wilson inaugurated the Bombay Baby Week held in Parel, a heavily populated mill area. Her address, reprinted in the *Times of India*, outlined the aims of the program:

The Movement attempts to make a delicate child healthy and a healthy child healthier, but its progress is hampered on all sides by the one important factor, the ignorance of the poorer class mothers. . . . In close cooperation with other social organizations in the city, we propose to carry on throughout the year vigorous propaganda against ignorance, filth and superstition. This work will necessarily have to be done in the very homes of the poorest people. We will regularly visit slums and speak to mothers, pregnant women etc. and give demonstrations as to how to bathe the baby, how to feed him, and how to keep him clean and tidy.¹⁹⁶

She too declared opium drugging as one of the “most serious yet easily remedied causes of infant mortality in Bombay.”¹⁹⁷ The Bombay Baby Week was to campaign against these problems.¹⁹⁸

Baby Week exhibitions displayed charts and visual images related to “preventable diseases, erratic feedings, and principles of sanitation.”¹⁹⁹ The organizers showed short films on the themes of “superstitious” child-rearing and the negative effects of opium drugging to thousands of attendees in mill areas.²⁰⁰ Moreover, the exhibitions showcased the work of the Infant Welfare Society. The Baby Week organizers created a miniature IWC in the exhibition hall and, with the help of charts and cards, they displayed how babies were weighed and bathed. They also showcased the IWC’s Tardeo crèche as a model of infant care. Photographs of babies attending this crèche were juxtaposed with those of untended, opium-drugged babies to underscore the advantages of informed infant care in a crèche.²⁰¹ Moreover, at the end of their program, baby shows gave prizes to the healthiest participating babies of up to two years of age, a ritual that might encourage working-class people to adopt healthy methods of childrearing.²⁰² By the early 1930s, the Bombay Baby Week

Association organized ten to thirteen annual exhibitions in the mill areas that tens of thousands of working-class parents and other inhabitants of the areas attended.²⁰³ To encourage millworking men and women to come, organizers held some baby week programs on Sundays, a weekly holiday.

While baby weeks showcased ideal childcare annually, more frequent informal lectures covered aspects of mothercraft. The Infant Welfare Society of Bombay advised women who attended their centers on “feeding, clothing, and general care of the young ones.” In addition, they routinely demonstrated “appropriate” ways of bathing and cleaning infants.²⁰⁴ By 1935, the BPWC started lectures in mill areas for women on such subjects as “cleanliness, child care, disease prevention, hints to pregnant women, proper breastfeeding and diet.”²⁰⁵ The BPWC organized these lectures both at the mills and in the chawls to draw out women millworkers as well as the wives of male millworkers.²⁰⁶ It elicited the support of some millowners to arrange these educational lectures inside the mill during recess time. Thus, by the late 1930s, mothercraft was disseminated through informal lectures and demonstrations. These practices emerged as an inseparable part of infant welfare campaigns. However, in the absence of infrastructural support, the usefulness of mothercraft remained limited.

THE LIMITATIONS OF MOTHERCRAFT

The report of Dr. Florence Barnes was not merely about the opium drugging of babies, it had also recorded the dismal, overcrowded living conditions of millworkers and the negative impact these conditions had on mothers and infants:

[In mill workers’ chawls] I have several times verified the overcrowding of rooms. In one room, I found six families living. . . . Three out of six of the women who lived in this room were shortly expecting to be delivered. . . . When I questioned the district nurse who accompanied me as to how she would arrange the privacy in this room, I was shown a small space some 3 ft. × 4 ft.—which was usually screened off for the purpose. The atmosphere at night of that room filled with smoke from the six ovens, and other impurities would certainly physically handicap any woman and infant, both before and after delivery.²⁰⁷

Barnes went on to document the absence of ventilation and sunlight in the haphazardly built chawls, and “sunlight we know is inimical to the life of most pathogenic organisms.”²⁰⁸ Both Drs. Shakuntala Talpade and Margaret Balfour also reported the overcrowded and unsanitary state of millworkers’ tenements and the possible negative impact of this situation on pregnant women and infants.²⁰⁹

The ill-effects of dismal living conditions on infant health was evident from the fact that in Bombay the proportion of infant mortality among people who occupied one room or less was higher than among people who could afford larger accommodations. In 1919, more than 83 percent of infant deaths occurred in tenements of one room or less while in houses consisting of four or more rooms, it was about 18.93 percent.²¹⁰ Although a decade later in 1931, the overall infant mortality figures showed a decline, 73 percent of infant deaths still happened in one room or less while in accommodations of four or more rooms only 1.1 percent of deaths took place.²¹¹ The investigation of Balfour and Talpade strengthened the links between infant health and material conditions. They juxtaposed the cases of millworking women with non-industrial women who were admitted to the Wadia Hospital for childbirth. Their analysis revealed that the millworking population had an inadequate diet that was rich in carbohydrates but lacking in vitamins and fats, which might be responsible for the greater occurrence of stillbirths and low birth weight among this population.²¹² Thus any long-term solutions to the problem of infant mortality required systemic and systematic improvements in the living conditions of industrial workers.

However, as Dr. Balfour suggested, the importance of preventive propaganda programs could not be discounted.²¹³ Information about hygiene and germs and the negative impact of opium drugging on their infants might have been useful for working-class women. However, the application of this acquired knowledge required certain material conditions that were extremely inadequate in early twentieth-century Bombay. As discussed in Chapter 3, because of persistent financial problems the projects of building sanitary industrial housing with adequate drainage and water fittings remained incomplete, forcing millworking people to live in overcrowded rooms and unsanitary surroundings. The provision of adequate, clean water, essential for maintaining physical cleanliness, was also too limited. Although public health officials agreed that a well-constructed water supply system was essential for personal sanitation, inadequate financial resources kept the municipality from expanding its

water supply network.²¹⁴ Historian Radha Kumar observed a chronic shortage of water in workers' chawls.²¹⁵ This acute inadequacy of water caused regular quarrels among chawl dwellers, which in extreme cases led to physical injuries and even death.²¹⁶ The backdrop of an inadequate, ill-developed living environment significantly limited any attempts to maintain hygiene in everyday life. This structural barrier constrained the well-being of working-class families and the ability of working-class mothers to raise healthy babies.

CONCLUSION

In early twentieth-century Bombay, the persistence of high infant mortality rates compelled the municipality, the body primarily responsible for maintaining public health, to consider the causes of, and the remedies to, this problem. The municipality and public health reports determined that the dismal life expectancy of infants could be improved by extending medicalized childbirth and healthy childrearing practices to the city's large industrial working-class population. From 1900 onward, a range of public-private collaborations attempted to provide biomedical assistance to working-class families during childbirth and for antenatal and postnatal care. The creation of medicalized childbirth services indicated that the well-being of the city's large working-class population relied on the expansion of basic amenities such as institutionalized healthcare. In this context, the creation of municipal maternity homes and the Wadia Hospital for the working classes were important infrastructural changes. However, such changes required a sustained reallocation of governmental and corporate funds. These remained limited because of the financial conservatism of the colonial state and Indian industrialists. Consequently, for most working-class families, birthing and caring remained domestic and traditional, rather than institutional or based on biomedical principles.

The surveys and studies on the topic of infant mortality in Bombay often acknowledged that poverty, lack of nutrition, and dismal living conditions significantly contributed to the high rates of infant mortality. However, the notion that the reduced life expectancy of infants resulted from uninformed mothering deemphasized the adverse effects of structural inequalities on infants' health. Therefore, from the early 1900s onward, government authorities and voluntary societies stressed the need for monitoring working-class women's caring practices. It was presumably more complicated to get the government and industrialists to

improve living conditions and establish affordable healthcare facilities for the city's working-class population than to hold working-class mothers responsible for the persistence of infant mortality. By the 1920s, elite-led infant welfare programs consistently targeted various aspects of working-class maternity, citing careless infant feeding and unhygienic habits as the reasons for the poor health of infants. The ensuing projects of maternal improvement involved unannounced inspections by health visitors, distribution of subsidized milk, provisions for free antenatal and postnatal advice, as well as propaganda in the form of baby weeks. Although all these measures underlined the urgency of a wider infant welfare program that included Bombay's working classes, underlying biases and persistent funding issues constrained their efficacy.

NOTES

1. Dosbhai Rastamji Bardi, "Infant Mortality in Bombay, Its Causes and Prevention," in *Report of the Proceedings of the Bombay Medical and Physical Society* (1897–1911) Wellcome Library, London (henceforth WL), Vol. VII, No. 1, 1903, 41.
2. Ibid.
3. Ibid., 42.
4. *Annual Report of the Sanitary Commissioner for the Government of Bombay*, 1906, 1; *Annual Report of the Municipal Commissioner of Bombay* (henceforth ARMCB), 1907, 192.
5. J. A. Turner, "Infant Mortality in Bombay and How to Reduce It," in *Report of the Proceedings of the Bombay Medical and Physical Society* (1897–1911), WL, Vol. XIII, No. 3, August 1909, 31.
6. Ibid., 32.
7. Bardi, "Infant Mortality in Bombay," 50–55, ARMCB, 1908, 5.
8. F. D. Barnes, "Maternity Benefits to Industrial Workers: Final Report of the Lady Doctor," *Bombay Labour Gazette*, September 1922, 31–35; G. M. Broughton, "Maternity Benefits for Indtl. [sic] Workers," *Journal of Indian Industries and Labour*, August 1921, 296–303; A. R. Burnett-Hurst, *Labour and Housing in Bombay: A Study in the Economic Conditions of the Wage-Earning Classes in Bombay* (London: P. S. King, 1925), 36.
9. Thomas R. Metcalf, *Ideologies of the Raj* (Cambridge: Cambridge University Press, 1997), 1–27.
10. Michel Foucault, "Power," in James D. Faubion, ed., Robert Henry et al., trans., *Essential Works of Foucault, 1954–1984* (New York: New Press, 1994), 95.

11. Michel Foucault, "Governmentality," in Graham Burchell, Colin Gordon, and Peter Miller, eds., *The Foucault Effect: Studies in Governmentality* (Chicago: University of Chicago Press, 1991), 87–104; Foucault, "Power," 95.
12. Biswamoy Pati, "Ordering 'Disorder' in a Holy City: Colonial Health Interventions in Puri During the Nineteenth Century," and Manjari Kamat, "The Palakhi as Plague Carrier: The Padharpur Fair and the Sanitary Fixation of the Colonial State; British India, 1908–1916," in Biswamoy Pati and Mark Harrison, eds., *Health, Medicine and Empire: Perspectives on Colonial India* (New Delhi: Orient Longman, 2001), 270–98, 299–316.
13. David Arnold, *Colonizing the Body: State Medicine and Epidemic Disease in Nineteenth-Century India* (Berkeley: University of California Press, 1993), 63–64.
14. For example, the English East India Company built a European general hospital in 1677 in Bombay (known as St. George Hospital for Europeans since 1892) for the care of the servants of the company and seamen. However, Indian elites were expected to share the cost of building hospitals for Indians in Bombay. Besides the J. J. Hospital, Sir Cowasji Jehnagiri Ophthalmic Hospital (built in 1866) and the Gokuldas Tejpal Hospital (jointly built by the government of Bombay and Gokuldas Tejpal, a Gujarati Bhatia, in 1874) were examples of public-private collaboration in healthcare. By the 1880s, the provincial government was actively encouraging the wealthy Indians of Bombay to build hospitals for their fellow Indians. Continuing this trend, in 1925, in his inaugural speech at the opening of the Wadia Maternity Hospital in north Bombay, Governor Leslie Wilson highlighted the pivotal role of philanthropy in creating hospital facilities for Indians. W. W. Hunter, *Bombay, 1885–1890: A Study in Indian Administration* (London: Henry Frowde, 1892), 325. Lt.-Col. D. G. Crawford, *A History of the Indian Medical Service, 1600–1913*, Vol. II (London: W. Thacker and Company, 1914), 399–400; *City Gazetteer*, 188–90; *Proceedings of the General Department of the Government of Bombay*, MSA, File No. 3532 II, m423–424.
15. *Proceedings of the General Department of the Government of Bombay*, File No. 1856-B, III, 1923, Maharashtra State Archives (henceforth MSA), m121–m124; Samiksha Sehrawat, *Colonial Medical Care in North India: Gender, State and Society, 1840–1920* (Delhi: Oxford University Press, 2014), 1–65.
16. David Arnold points out that "in the early nineteenth century, in an essentially male-oriented and male-operated system of medicine, women appeared only as adjuncts and appendages to the health of men. The

- primary arenas of state medicine in the first decades of the nineteenth century—the army, the jails, even the hospitals—were primarily male domains in which women played little part.” *Colonizing the Body*, 254. See also Mark Harrison, *Public Health in British India: Anglo-Indian Preventive Medicine, 1859–1914* (Cambridge: Cambridge University Press, 1994), 92–95.
17. The Madras lying-in hospital was funded by public subscriptions and a government of Madras grant. The hospital attended cases of childbirth and also trained midwives. Sean Lang, “Drop the Demon *Dai*: Maternal Mortality and the State in Colonial Madras, 1845–1875,” *Social History of Medicine*, Vol. 18, No. 3 (2005): 357–78.
 18. *Purdah* literally means veiling and more broadly refers to rules of female modesty prevalent in many parts of South Asia, especially among the elite and middle classes. The observance of *purdah* varied according to class, caste, region, and religion. See Hanna Papanek and Gail Minault, eds., *Separate Worlds: Studies of Purdah in South Asia* (Columbia, MO: South Asia Press, 1982), vii–viii.
 19. Anshu Malhotra, “Of Dais and Midwives: ‘Middle Class’ Interventions in the Management of Women’s Reproductive Health in Colonial Punjab,” in Sarah Hodges, ed., *Reproductive Health in India: History, Politics, Controversies* (New Delhi: Orient Longman, 2006), 203–4.
 20. Maneesha Lal, “The Politics of Gender and Medicine in Colonial India: The Countess of Dufferin’s Fund, 1885–1888,” *Bulletin of the History of Medicine*, Vol. 68, No. 1 (Spring 1994): 29–66.
 21. Geraldine Forbes, “Managing Midwifery in India,” in Dagmar Engels and Shula Marks, eds., *Contesting Colonial Hegemony: State and Society in Africa and India* (London: I. B. Tauris, 1994), 152–72; Roger Jeffery, *The Politics of Health in India* (Berkeley: University of California Press, 1988), 89–90.
 22. *Annual Report of the Sanitary Commissioner for the Government of Bombay*, 1906, 1. Observers of the maternal conditions of working-class women routinely held the *dai* responsible for high infant mortality. See Kelman, *Labour in India*, 175–77; Burnett-Hurst, *Labour and Housing in Bombay*, 38; Margaret Balfour, “Indian Women in Industry: Part I and II,” *Journal of the Association of Medical Women in India* (henceforth *JAMWI*), February 1933, 14.
 23. *JAMWI*, August 1912, 3.
 24. Rosemary Fitzgerald, “A ‘Peculiar and Exceptional Measure’: The Call for Women Medical Missionaries for India in the Later Nineteenth Century,” in Robert A. Bickers and Rosemary Seton, eds., *Missionary Encounters: Sources and Issues* (Richmond: Curzon Press, 1996), 174–96.
 25. Kelman, *Labour in India*, 174; Balfour and Young, *Medical Women in India*, 13–19.

26. In 1869, the first qualified woman physician, Clara Swain, came from the United States as a medical missionary of the American Women's Foreign Missionary Society. By 1900, apart from numerous American women physicians, there were forty-five women missionary doctors with British qualifications who were serving in India. Margaret Balfour and Ruth Young, *The Work of Medical Women in India* (London: Humphrey Milford, 1929), 14–16; Antoinette Burton, "Contesting the Zenana: The Mission to Make 'Lady Doctors' for India," 1874–1885, *Journal of British Studies*, No. 35 (July 1996): 368–97.
27. William Ellsworth Strong, *The Story of the American Board: An Account of the First Hundred Years of the American Board of Commissioners for Foreign Missions* (Boston: Pilgrim Press, 1910), 1–2, 422.
28. "Annexure XIV," *Annual Report of the National Association for Supplying Medical Aid by Women to the Women of India* (henceforth *Annual Report of the National Association*), Wellcome Trust Library, 1928, 83.
29. Queen Victoria became interested in Indian women's health when, in 1881, she learned from a medical missionary, Elizabeth Beilby, about the sufferings of purdah women during childbirth. Although the queen did not recommend that the British government of India revise its medical policies, she instructed Lady Harriet Dufferin, the wife of Governor General Dufferin, to take necessary action. "Annexure XIV," *Annual Report of the National Association*, 1928, 83–84; Balfour and Young, *Medical Women in India*, 33–53.
30. "Annexure XIV," *Annual Report of the National Association*, 1928, 83–86.
31. *Annual Report of the National Association*, 1923, 109–11; Balfour and Young, *Medical Women in India*, 36.
32. For a detailed analysis of the fund and its activities, see Lal, "The Politics of Gender and Medicine in Colonial India," 29–66; and Sehrawat, *Colonial Medical Care*, 100–154.
33. Sophia Jex-Blake, *Medical Women: A Thesis and a History* (London: Hamilton, Adams, 1886), 238.
34. "Report on the Medical Relief Committee," *Proceedings of the General Department of the Government of Bombay*, MSA, File No. 1856, III, 1923, m124.
35. *Ibid.*
36. *City Gazetteer*, Vol. III, 185–86; Balfour and Young, *The Work of Medical Women in India*, 24–25; Mridula Ramanna, *Western Medicine and Public Health in Colonial Bombay, 1845–1895* (New Delhi: Sangam Books, 2002), 193.
37. George A. Kittredge, *A Short History of the Medical Women for India Fund* (Bombay: Educational Society Press, 1889), 29.

38. *City Gazetteer*, Vol. III, 191.
39. S. M. Edwardes, an Indian Civil Service officer in Bombay and a chronicler of the city's progress, documented how urban growth in Bombay, including the creation of modern educational and medical facilities, was a joint project of the colonial government and Indian elites. He commented that wealthy Indians' endowments and subscriptions for building public institutions enabled them to demonstrate their resources and leave behind memorials of their financial power. *Rise of Bombay: A Retrospect* (Bombay: Times of India Press, 1902), 281, 319–20.
40. *City Gazetteer*, Vol. III, 185.
41. Edwardes, *Rise of Bombay*, 319–20; Balfour and Young, *Medical Women in India*, 25–26; Crawford, *History of the Indian Medical Service*, 399–400. In Bombay, the J. J. Hospital had been training a limited number of nurses since the 1850s. By the late 1880s, training programs for nurses and midwives expanded with donations from private sources and with the opening of a nursing school at the Cama Hospital. The newly established Bai Motlibai, Cama-Albless, and Petit Hospitals provided practical training in midwifery and nursing. Mridula Ramanna, *Western Medicine and Public Health in Colonial Bombay*, 195–98.
42. Known as the “Police Charges Act,” the 1907 amendment in the Municipal Act outlined that the creation of new medical facilities and the expansion of existing hospitals were responsibilities of the municipality. In return, the provincial government undertook the whole cost of maintaining the police in Bombay City. *Proceedings of the General Department of the Government of Bombay*, MSA, File No. 1856 III, 1923, m124, m221.
43. Forbes, “Medical Careers and Health Care for Indian Women,” 517–19.
44. *Proceedings of the General Department of the Government of Bombay*, MSA, Vol. 119, 1912, S-237; *City Gazetteer*, Vol. III, 191–92.
45. The association was registered under Act XXI of 1860, *City Gazetteer*, 187.
46. Vera Anstey, *The Economic Development of India* (New York: Longman Greens, 1931), 81.
47. *Proceedings of the General Department of the Government of Bombay*, MSA, Vol. 119, 1912, S-237.
48. A similar situation existed in Calcutta, in the jute industry. Samita Sen, *Women and Labour in Late Colonial India: The Bengal Jute Industry* (Cambridge: Cambridge University Press, 1999), 160–61.
49. Municipal data cited in Lt.-Col. M. A. T. Collie, IMS, “The Maternal Death Rate in Bombay,” *Transaction of the Bombay Medical Congress*, 1909, MSA (Bombay: Times of India Press, 1909), 63. *ARMCB*, 1914, 4.
50. “Surgeon General H W Stevenson, IMS with the Government of Bombay to the Secretary to Government on 21 June 1909,” *Proceedings of the General Department of the Government of Bombay*, MSA, File No. 400, 1915, 2.

51. Ibid.
52. In contrast to a maternity home, a maternity hospital has more beds and a larger staff to support its greater number of patients. A maternity home is equipped to handle cases of normal labor whereas a hospital, with more sophisticated equipment, could care for complicated cases of childbirth. *Proceedings of the Municipal Corporation of Bombay*, Office of the Brihann Mumbai Municipal Corporation (henceforth BMC), 1941, 358.
53. *Census of India, 1901, Vol. X Bombay: Town and Island* (Bombay: Times of India Press, 1901), 148.
54. "Lady Willingdon Scheme," *Proceedings of the General Department of the Government of Bombay*, MSA, File No. 369, 1919, m85.
55. Anna Davin, "Imperialism and Motherhood" *History Workshop*, No. 5, 1972, 9–65, C. Davies, "The Health Visitor as Mother's Friend: A Woman's Place in Public Health, 1900–1914, *Social History of Medicine*, Vol. 1, No. 1 (1988): 39–59.
56. Barbara Ramusack, "Cultural Missionaries, Maternal Imperialists, Feminist Allies: British Women Activists in India, 1865–1945," *Women's Studies International Forum*, Vol. 13, No. 4 (1990): 309–21; Jean Alman, "Making Mothers: Missionaries, Medical Officers and Women's Work in Colonial Asante, 1924–1945, *History Workshop*, No. 38 (1994): 23–47.
57. "Report of the Committee of the Corporation Regarding Measures for Improving the Condition of Women During Labour and of Their Infants During Infant Life and for Reducing Infant Mortality," *Proceedings of the General Department of the Government of Bombay*, MSA, File No. 621, 1914, m5.
58. For the efficient collection of birth and death data, Bombay Municipality was divided into ten registration districts, each under a district registrar. *Proceedings of the Municipal Corporation of Bombay*, BMC, 1920, 2054.
59. *Proceedings of the Municipal Corporation of Bombay*, BMC, 1906, 1236–37.
60. Ibid., 1237.
61. "The Bombay Sanitary Association and the Sanitary Institute Bombay 1904–1917," Appended to the *Annual Report of the Bombay Sanitary Association*, MSA, 1918, 1.
62. *Proceedings of the Municipal Corporation of Bombay*, BMC, 1938, 1323.
63. JAMWI, May 1918, 7–10; March 1920, 19–21; and February 1924, 14. There were training schools for health visitors in Delhi, Calcutta, Madras, and Nagpur, but Bombay did not have one until 1932. Oral evidence of Drs. Margret Balfour and Shakuntala Talpade in the *Royal Commission of Labour in India* (henceforth RCLI), Vol. I, Pt. I (London: His Majesty's Stationary Office, 1931), 284.

64. *Proceedings of the General Department of the Government of Bombay*, MSA, Vol. 119, 1912, S-243.
65. *ARMCB*, 1912, 16.
66. *ARMCB*, 1914, 16–17.
67. “Bombay’s Poor Mothers,” clipping from the Advocate of India in the *Proceedings of the General Department of the Government of Bombay*, MSA, File No. 621, 1914, 2.
68. “Lady Willingdon Scheme,” *Proceedings of General Department of the Government of Bombay*, MSA, File No. 369, 1919, m27.
69. Some prominent donors were the Wadia Charities, the Western India Turf Club, and the Begum of Bhopal. *Proceedings of the Municipal Corporation of Bombay*, BMC, 1920, 1898.
70. *Ibid.*
71. “Lady Willingdon Scheme,” m28–29.
72. “Report of the Committee of the Corporation Regarding Measures for Improving the Condition of Women during Labour,” *Proceedings of the General Department of the Government of Bombay*, MSA, File No. 621, 1914, m5.
73. *Ibid.*, m9.
74. *ARMCB*, 1914, 18.
75. Indicating the drive for personal glory in charitable efforts, Lady Willingdon inaugurated the Parel home on her birthday. Later, during the process of transfer of the LWS maternity homes to the municipality, she insisted that the transfer should also be made on her birthday. *Proceedings of the Municipal Corporation of Bombay*, BMC, 1918, 1633.
76. *Appendix to the Annual Report of the Bombay Sanitary Association*, MSA, 1918, 9.
77. *ARMCB*, 1919, 17.
78. *Proceedings of the Municipal Corporation of Bombay*, BMC, 1920, 600.
79. *Proceedings of the Municipal Corporation of Bombay*, BMC, 1918, 1634.
80. *Proceedings of the Municipal Corporation of Bombay*, BMC, 1919, 1358.
81. *ARMCB*, 1919, 17, *Appendix to the Annual Report of the Bombay Sanitary Association*, MSA, 1918, 9.
82. *Proceedings of the General Department of the Government of Bombay*, MSA, File No. 369, 1919.
83. *Ibid.*, m27, m51, *Proceedings of the Municipal Corporation of Bombay*, BMC, 1918, 1636.
84. *Proceedings of the Municipal Corporation of Bombay*, BMC, 1918, 1027.
85. *ARMCB*, 1919, 17.
86. Constructed from the *ARMCB* of 1919, 1920.
87. Kelman, *Labour in India*, 172–73.

88. A later report of the Social Service League (SSL), a voluntary group active among millworkers, observed that the mill population was reluctant to use the maternity service initially. However, consistent persuasions by nurse-midwives and encouragement from the activists of the SSL gradually popularized medicalized childbirth. Therefore, cultural constraints were neither static nor solely responsible for the prevalence of dais. Rather, continued use of dais indicated the inadequacy of medicalized childbirth facilities. *Social Service Quarterly* (henceforth *SSQ*), April 1937, 168–69.
89. *ARMCB*, 1918, 20; *ARMCB*, 1921, 15.
90. *Proceedings of the Municipal Corporation of Bombay*, BMC, 1918, 1633; *Annual Report of the BSA*, 1918, 9.
91. *Census of India*, 1931, Vol. VIII: Bombay, 4.
92. *ARMCB*, 1923, 18.
93. *ARMCB*, 1918, 18.
94. *ARMCB*, 1921, 14.
95. “Question of Providing Hospital Accommodation for the Growing Needs of the City,” *Proceedings of the General Department of the Government of Bombay*, MSA, File No. 400, 1915, m29.
96. *Ibid.*
97. Kelman, *Labour in India*, 184.
98. G. M. Broughton, “Maternity Benefits for Indtl. [sic] Workers,” *Journal of Indian Industries and Labour* (August 1921): 302.
99. F. D. Barnes, “Maternity Benefits to Industrial Workers,” 31.
100. The data in Dr. Barnes’s report refers to women millworkers only, whereas the municipal statistics indicated the total registered births in the city and the percentage that were assisted by unskilled midwives.
101. “Pelvic Cellulitis is a bacterial infection of the parametrium, occurring after childbirth or spontaneous or therapeutic abortion. It represents an extension of infection via the blood vessels and lymphatics from a primary wound infection in the external genitalia, perineum, vagina, cervix, or uterus. It is characterized by fever, uterine subinvolution, chills and sweats, abdominal pain that spreads laterally, and, if untreated, the formation of a large abscess and signs of peritonitis. It occurs most commonly between the third and the ninth days after delivery or abortion.” <http://medical-dictionary.thefreedictionary.com/pelvic+cellulitis>.
102. Barnes, “Maternity Benefits to Industrial Workers,” 32.
103. “Women Factory Inspectors: The Need for Appointment,” *Bombay Labour Gazette*, October 1923, 33.
104. *Annual Factory Report of the Bombay Presidency*, 1936, 22; *Bombay Presidency Women’s Council: Handbook of Women’s Work*, 1928–29; Royal Asiatic Society Library, Bombay (Bombay: Tutorial Press, 1929), 73.

105. "Report of the Medical Relief Committee," *Proceedings of the General Department of the Government of Bombay*, MSA, File No. 1856 III, 1923, m125.
106. "Medical Relief in Bombay," *Proceedings of the General Department of the Government of Bombay*, MSA, File No. 1856 III, 1924, m125.
107. "His Excellency the Governor's Speech at the Laying of the Foundation Stone of the Wadia Maternity Hospital, in Bombay," *Proceedings of the General Department of the Government of Bombay*, MSA, File No. 3532 II, 1924, m276–277.
108. *Ibid.*, m221.
109. *Annual Report of the Bombay Millowners' Association* (henceforth *BMOA*), 1925, 386.
110. *Annual Factory Report*, 1922, 10; *Annual Factory Report*, 1926, 14; Burnett-Hurst, *Labour and Housing*, 110.
111. *Proceedings of the General Department of Government of Bombay*, MSA, File No. 3532 III, 1925, m423.
112. S. M. Rutnagur, *Bombay Industries: The Cotton Mills* (Bombay: Indian Textile Journal, 1927), 730.
113. *Proceedings of the Municipal Corporation of Bombay*, BMC, 1925, 15–17.
114. "His Excellency the Governor's Speech," m279.
115. "Speech of his Excellency, the Governor at the Opening of the Nowrosji Wadia Maternity Hospital," *Proceedings of the General Department of the Government of Bombay*, MSA, File No. 3532-II (B), m424.
116. Rutnagur, *Bombay Industries*, 511.
117. *Indian Textile Journal*, January 1928, 109.
118. *Ibid.*
119. *Proceedings of the Municipal Corporation of Bombay*, BMC, 1930, 509.
120. *Ibid.*, 366.
121. "Medical Relief in Bombay City," *Proceedings of the General Department of the Government of Bombay*, MSA, File No. 1856 V, 1927, m183.
122. Margaret Balfour and Shakuntala Talpade, "The Maternity Conditions of Women Mill Workers in India," *Indian Medical Gazette*, May 1930, 242.
123. *RCLI*, Vol. I, Pt. I, 276–85.
124. *Ibid.*, 313.
125. *Ibid.*, 314.
126. *Proceedings of the Municipal Corporation of Bombay*, BMC, 1930, 2520.
127. *Ibid.*, 2525.
128. *Proceedings of the General Department of the Government of Bombay* (Political) MSA, Serial No. 6589, 1933, 220.
129. *Ibid.*, 223–24.
130. *ARMCB*, 1931, 13.

131. *Proceedings of the Municipal Corporation of Bombay*, BMC, 1932, 398, 1934, 403–4.
132. *Proceedings of the Municipal Corporation of Bombay*, BMC, 1930, 2520.
133. *Proceedings of the Municipal Corporation of Bombay*, BMC, 1934, 26.
134. Ibid.
135. Ibid.
136. *Proceedings of the Municipal Corporation of Bombay*, BMC, 1938, 1312–15; also *Proceedings of the Municipal Corporation of Bombay*, BMC, 1939, 208.
137. *Proceedings of the Municipal Corporation of Bombay*, BMC, 1940, 1315.
138. Bardi, “Infant Mortality in Bombay,” 33.
139. Turner, “Infant Mortality in Bombay,” 30.
140. “Review by the Standing Committee of the Administration Report of the Municipal Commissioner for the City of Bombay for the Year 1907–08,” in *Proceedings of the General Department of the Government of Bombay*, MSA, Vol. 8, 1909, xiii; *ARMCB*, 1909, 6.
141. *ARMCB*, 1913, 16.
142. *ARMCB*, 1914, 50.
143. *ARMCB*, 1914, 20; *ARMCB*, 1918, 16.
144. *Proceedings of the Municipal Corporation of Bombay*, BMC, 1921, 167.
145. Ibid.
146. *Proceedings of the Municipal Corporation of Bombay*, BMC, 1919, 1270.
147. Lady Cowasji Jehangir, “Maternal Welfare Work in Bombay,” *Asiatic Review*, Vol. XXXIII, No. 116 (1937): 759.
148. *Proceedings of the Municipal Corporation of Bombay*, BMC, 1919, 1279.
149. “Annual Report of the Infant Welfare Society,” *SSQ*, April 1922, 228.
150. *SSQ*, April 1921, 233.
151. *Proceedings of the Municipal Corporation of Bombay*, BMC, 1920, 600.
152. In 1923, the IWC distributed 62,600 *seers* (seer is a traditional weight unit in South Asia equal to about a liter) of milk and in 1931, more than 75,000 *seers*. *ARMCB*, 1924 and 1931, 16.
153. *Proceedings of the Municipal Corporation of Bombay*, BMC, 1938, 1313.
154. Kelman, *Labour in India*, 188.
155. “The Bombay Presidency Infant Welfare Society,” *SSQ*, October, 1933, 83.
156. Ibid., 84.
157. Bardi, “Infant Mortality in Bombay,” 52; Turner, “Infant Mortality in Bombay,” 32.
158. Bardi, “Infant Mortality in Bombay,” 41.
159. Ibid.
160. *Bombay Legislative Council Debates*, 30 July 1924, 664.

161. N. M. Joshi, "Women in Industry," paper presented at the *Conference of the International Women Suffrage Alliance*, London, Nehru Memorial Museum and Library (henceforth NMML), July 1925, 14.
162. F. D. Barnes, "Maternity Benefits to Industrial Workers," 32.
163. Ibid.
164. Sen, *Women and Labour in Late Colonial India*, 154.
165. Kelman, *Labour in India*, 191.
166. Ibid.
167. Burnett-Hurst, *Labour and Housing in Bombay*, 38.
168. N. M. Joshi, "Women in Industry," 5.
169. Cited in the *Proceedings of the Municipal Corporation of Bombay*, BMC, 1925, 63.
170. Jerbanoo Mistry, "Baby Week," *SSQ*, April 1925, 161.
171. M. I. Balfour, "Indian Women in Industry," 16.
172. Evidence of Drs. Talpade and Balfour, *RCLI*, Vol. I, Pt. I, 284.
173. Balfour, "Indian Women in Industry," 16.
174. *Annual Factory Report*, 1921, 8.
175. *Annual Factory Report*, 1928, 19.
176. *Proceedings of the Municipal Corporation of Bombay*, BMC, 1926, 2256–58.
177. Ibid., 2258.
178. *Bombay Labour Gazette*, June 1926, 1059. Both Kelman and Burnett-Hurst documented that in the beginning, women millworkers were hesitant to use crèches because they were unwilling to leave their infants with an unfamiliar ayah or nurse. Burnett-Hurst, *Labour and Housing*, 112–13; Kelman, *Labour in India*, 191–92.
179. Burnett-Hurst, *Labour and Housing*, 112–13; *Bombay Labour Gazette*, November 1943, 212.
180. *ARMCB*, 1924, 16.
181. Kelman, *Labour in India*, 193.
182. *Annual Factory Report*, 1930, 13.
183. *Annual Factory Report*, 1934, 7.
184. *Times of India*, Bombay, 14 December, 1927, 15.
185. Ibid.
186. "Report of the Standing Sectional Committee on Labour," *The National Council of Women in India: 3rd Biennial Report*, 1930–32, NMML, 42; "Evidence of Drs. Talpade and Balfour," 284.
187. Burnett-Hurst, *Labour and Housing in Bombay*, 38.
188. *ARMCB*, 1907, 192.
189. *ARMCB*, 1913, 15; *ARMCB*, 1919, 16.
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192. Sen, *Women and Labour in Late Colonial India*, 149.
193. Kelman, *Labour in India*, 183–84.
194. “Lady Chelmsford All India League for Maternity and Child Welfare, Report for 1923,” *Annual Report of the National Association*, 1923, 109–11.
195. *Times of India*, Bombay, 11 February 1926, 12.
196. Cited in *Times of India*, Bombay, 12 February 1926, 8.
197. *Ibid.*
198. Noronha, “The Bombay Baby Week,” 145.
199. *Ibid.*, 146.
200. *Times of India*, 12 February 1926, 8.
201. *Times of India*, 10 February 1926; 10 and 11 February 1926, 12.
202. *Times of India*, 1937, 14.
203. *Annual Factory Report*, 1934, 20.
204. “Infant Welfare Society,” *SSQ*, October 1933, 28.
205. “Bombay Presidency Women’s Council,” in the *National Council of Women in India Bulletin* (henceforth *NCWI Bulletin*), October 1935, 48.
206. *NCWI Bulletin*, June 1936, 43.
207. Barnes, “Maternity Benefits for Industrial Workers,” 31.
208. *Ibid.*
209. Balfour and Talpade, “Maternity Conditions of Women Mill Workers in India,” 241–49, 242.
210. *Proceedings of the Municipal Corporation of Bombay*, BMC, 1921, 166.
211. *ARMCB*, 1931, 11.
212. Balfour and Talpade, “Maternity Conditions of Women Mill Workers,” 247.
213. Margaret Balfour on Baby Week, *Times of India*, 18 May 1927, 7.
214. *Proceedings of the Municipal Corporation of Bombay*, BMC, 1923, 1500.
215. Radha Kumar, “City Lives: Workers’ Housing and Rent in Bombay, 1911–1947,” *Economic and Political Weekly*, Vol. 22, No. 30 (25 July 1987): PE47–PE56.
216. *Ibid.*, PE 50.

Epilogue

The following two excerpts from the two leading English-language magazines of India succinctly capture mainstream perspectives about working-class localities of Mumbai:

This is Parel, Mumbai's embarrassing eyesore, once the nucleus of a flourishing textile industry that died in the early '80s. Today it is teeming with sweatshops, churning out garments for international fashion houses. And the mills are in ruins. Home to Mumbai's working class, Parel is grim, seedy, and decidedly downmarket—save for this swanky skyscraper, rising from its industrial graveyard like that fabulous, mythical bird.¹

Look out of your window as you approach touchdown at Mumbai airport and you see a huge ocean of slums. It isn't quite the most desirable first impression for a financial powerhouse in the making, not least when there are glittering rivals like Shanghai, all chock-full of eye-catching skyscrapers and superhighways.²

Mumbai, formerly Bombay,³ is presently the capital city of the state of Maharashtra in Western India. Located on India's west coast, this island city grew, as Chapter 2 of this book delineated, from a marshy swamp in the seventeenth century to an important trading port town and a center of modern factory industry during the colonial period. In its contemporary post-liberalization, post-industrial phase, Mumbai has become the financial and commercial capital of India, a center of the global service economy, and an epitome of India's economic growth. With a

population of more than 20 million, Mumbai is the largest metropolitan region of India in terms of population. Mumbai's recent demographic and economic growth is driven by the economic reforms of the 1990s that emphasized the role of large cities—where most economic activities are concentrated—in development.

The changing economic structure of the city is also affecting its urban landscape. Representing the ideals of global capitalism, newspaper and magazine pieces highlight a desire to emulate Shanghai and transform Mumbai, the erstwhile industrial center into a global city, a hub of financial speculation, media services, and telecommunication sectors.⁴ In this discourse, the teeming working-class localities of the former mill district figure as “eyesores” that have unduly occupied the prime areas of Mumbai. In popular culture and policy documents of postcolonial times, urban working-class neighborhoods figure as vast, unruly, and decontextualized spaces peopled with filthy squatters and criminals.⁵ Apparently, the emerging global city is more responsive to the needs of a small section of Mumbai's managerial and technocratic elite, the “proper citizens.”⁶ Thus, its dying, “rat-infested” mills are gradually being transformed into “swanky skyscrapers . . . that house [the] who's who of Mumbai's corporate world.”⁷

This envisioning of Mumbai as a global city has neglected the needs of the urban poor. Consequently, Mumbai's dynamic economy coexists with a social profile of extreme inequality. More than 41 percent of its over 20 million people reside in housing that is cramped, poorly ventilated, and has little access to basic facilities such as water and sanitation.⁸ The growing spatial and social disparities have provoked intense debates about spatial and infrastructural inequities and their adverse impact on labor and the economy.⁹ However, Mumbai's reputation as a city of sharp contradictions is hardly recent and the lack of sanitation, housing, and health facilities for the working classes also has a long history. This book has traced the history of uneven urban development in late nineteenth- and early twentieth-century Bombay. Focusing on cotton textile millworkers, it has demonstrated the city's ambiguous relationship with its large working-class population. The book explored how unequal urban and economic growth and its adverse impact on the working classes stimulated discussions of worker well-being in the colonial city.

By the 1870s, a century of global trade had transformed Bombay from an unwelcoming fishing hamlet into a magnificent imperial port city that was dotted with impressive public and residential buildings.

Although colonial global trade was a critical component of Bombay's commercial development, a rapidly expanding cotton textile industry contributed significantly to its economic and demographic growth. In the 1850s, Indian entrepreneurs started manufacturing cotton textiles in the city. As Chapter 2 documented, the rise and expansion of this industry attracted rural migrant millworkers, especially from the coastal areas of Konkan in western India and the Deccan plateau region in central India. By 1905, Bombay had established eighty-two cotton mills that together employed about 130,000 men and women workers. The growth of cotton mills stimulated various ancillary, small-scale industries. These economic activities generated greater demands for labor, making Bombay a destination for impoverished rural migrants. By the early 1900s, together with their families and dependents, the working-class population of Bombay constituted about one-fifth of the city's population. The proximity to the raw cotton-producing hinterland and the availability of a surplus pool of raw labor enabled the industrialists of Bombay to reduce their cost of production, increase their profit margins and give competition to their rival English textile industry centered in Lancashire and Manchester. Therefore, the rural migrant workforce played a critical part in the rise and growth of Bombay City as well as the indigenous capitalist enterprise.

The migrant millworkers of Bombay, as documented in Chapters 2 and 3, also bore the hidden costs of unchecked and partial industrial and urban growth. For instance, long working hours in the fiber-laden, humid atmosphere of the mill endangered workers' health, causing respiratory and lung diseases such as tuberculosis, as some colonial accounts have recorded.¹⁰ Reminiscing about his experiences of working in a cotton mill in Bombay in the 1940s, a former worker noted that, "cotton would go into your nostrils and rot inside. I had to be hospitalized for ten days. They burnt out the cotton. For days the rot kept coming out of my nose and throat. This was common. At least 10 to 12 percent of the workers would suffer from this tuberculosis [Byssinosis]." ¹¹

The uneven growth of Bombay's built environment was equally harmful to the health and well-being of millworkers. Colonial urban planning, the expansion of the water and drainage network, and the construction of roads and modern buildings were all limited to the elite commercial and residential parts of the city. Escalating land prices and unaffordable rents in the well-developed southern and southwestern parts of Bombay forced the rural migrant men and women millworkers to settle in haphazardly

constructed chawls in the then low-lying outskirts of the city that lacked adequate infrastructure, especially with respect to sanitation. Poverty, overcrowding, air pollution, and the lack of an adequate sewage disposal system rendered the mill populations susceptible to various diseases and caused high rates of infant mortality. Yet in the late nineteenth century, unhealthy working and living conditions elicited few sympathetic responses. Indian nationalists characterized any critique of these conditions as a Lancashire conspiracy against a nascent Indian enterprise. In the late 1890s, the outbreak of a disastrous and prolonged bubonic plague in Bombay, and the consequent loss of human capital, triggered urban renewal schemes that targeted the working classes. The shock of the epidemic opened the possibility of a more equitable distribution of basic public goods. However, the fiscal conservatism of provincial and municipal governments and the narrow cost-benefit logic of Indian millowners constrained the effectiveness of post-plague urban renewal programs.

In its analyses of millworkers' living conditions, this work both borrowed from and contributed to the existing historical literature on colonial sanitation and public health policies. Scholarship on these subjects has emphasized what Partha Chatterjee has termed the "rule of colonial difference," the categorization of colonies as exceptions to modern, Western sensibilities.¹² This study acknowledged that colonial discourses on health and sanitation produced essentialist cultural binaries of East and West. Simultaneously, it emphasized that the lack of clean housing and adequate health facilities resulted from structural inequalities in a colonial economy and polity that neglected the well-being of the masses. The policies of Indian entrepreneurs and nationalists intensified such disparities.

Chapter 4 analyzed the growing anxiety about the living conditions of industrial workers and voluntary and municipal efforts to improve their situation. Focusing on an underexplored subject, this chapter documented the early twentieth-century proliferation of social service groups in Bombay that worked specifically to "uplift" the moral and material conditions of millworkers. They outlined various educative and propaganda programs designed to instruct the "ignorant" working classes about healthy and virtuous living. The social activists simultaneously lobbied to provide sanitation facilities in mill neighborhoods. Several factors stimulated the formation and functioning of these groups.

By the early twentieth century, the systemic failure to expand civic infrastructure in working-class neighborhoods reinforced the discourse of

a “culture of poverty” that interpreted dismal health, filth, and squalor as essential cultural attributes of the poor. This discourse produced alternate forms of urban governmentality. Highlighting the responsibility of the educated public in creating a healthy, disciplined, and contented subaltern population, middle-class social activists in Bombay assumed the role of active citizens seeking knowledge about and answers to the grave problems of industrial urbanization. The contemporary nationalist desire to create a clean and orderly urbanism devoid of subaltern-elite conflicts was equally forceful in stimulating the formation of voluntary social service groups such as the Social Service League (SSL). Although no voluntary social service groups were directly associated with any nationalist organization, their “apolitical” activism among industrial workers reflected the Gandhian ideals of trusteeship and self-help. Moreover, the nationalist quest to cleanse the future Indian nation of “immoral” vices such as alcoholism, gambling, and prostitution significantly informed the temperance programs of the social service groups that targeted millworkers.

The anxiety to contain growing militancy among textile millworkers further promoted the industrial welfare programs of groups such as the SSL and the Bombay Young Men’s Christian Association (YMCA). The efforts of these groups to create benign forms of associational culture among workers reflected the impact of similar experiments in Europe and America. From the late nineteenth century, the Toynbee Hall in London and the YMCA of Britain and the United States had created models of labor welfare that could be replicated in other contexts. The impact of these models on colonial Bombay’s social service culture underscored the growing transnational exchange of ideas, especially after the First World War and the creation of the International Labour Organization. Historians of South Asian labor have frequently cited the influence of international trends such as Bolshevism on the social and political trajectories of industrial workers in colonial India.¹³ Contributing to this existing literature, my chapter on social service delineated that transnational examples were equally important in creating non-trade union, non-confrontational models of associations among workers. Moreover, my analysis of social service groups traced the role of non-state, non-corporate actors in labor welfare, foreshadowing current moves by the state and employers to “outsource” public provisioning to non-governmental organizations.

The growing concerns for workers' well-being reflected discomfort with the effects of filth and poverty on the broader public health and civic life of the city. The urban public health crises were not limited to the frequent occurrence of epidemics such as plague, cholera, and influenza. In late nineteenth- and early twentieth-century Bombay, extremely high infant mortality rates generated anxieties among local and provincial governments, men and women physicians, as well as social activists. In an industrial city such as Bombay, preventive measures needed a greater focus on the working classes. Chapters 5 and 6 considered how colonial discourses on infant health brought the hitherto intimate subjects of birthing, breastfeeding, and nurturing into the public sphere. Men and women advocates of infant welfare debated these issues in the provincial legislative councils, in journals and newspapers, and in public forums. They collaborated with the Bombay municipality to create modern childbirth facilities for women millworkers. Voluntary groups and the municipality also disseminated knowledge of "appropriate" baby care, considered important for preventing mortality in the crucial first year of infant life.

International events such as the Draft Convention of the First Labour Conference held in Washington, DC, in 1919, outlined working-class women's welfare in terms of their role in social reproduction. Simultaneously, nationalist visions of creating healthy future citizens of the nation strengthened this broader perception about women's social roles. By the 1920s, the campaigns for paid maternity leave and crèches for women millworkers and their infants intensified. Chapter 5 illustrated the implications of the discursive interlinking of nationalism, motherhood, and basic labor rights for women millworkers. Significantly, the trope of the nation helped middle-class advocates of maternity benefits to create a broader consensus in favor of protective legislation for women factory workers. Still, the incorporation of working-class women in the nationalist project overshadowed women millworkers' identity as laborers. This process obscured the fact that women laborers needed basic amenities such as paid maternity leave and crèches, not only to reproduce healthy national citizens but also to facilitate wage work, essential for maintaining the material well-being of their families. My analysis of maternity benefit campaigns in Bombay historicized the ideologies and processes that devalued women's productive employment, rendering them available for the underpaid sweatshops of a globalized economy.

The next chapter documented the expansion of childbirth facilities to working-class women in Bombay. The limited scholarship on the

general development of health care in colonial Bombay City and Bombay Presidency has highlighted the establishment of hospitals and dispensaries, public health policies of the provincial government, and philanthropic initiatives to expand modern medicine.¹⁴ My research specifically focused on the development of childbirth amenities for mill women and the role of the municipality, voluntary groups, and private enterprise in providing such facilities. I documented that childbirth facilities for women millworkers were limited. Their slow growth in the late 1910s and 1920s underlined the partial role of the colonial state in providing medical care for the masses. Consequently, expansion of childbirth and medical care in Bombay City depended on a public-private partnership, a phenomena that has become common in post-globalization India.¹⁵

The role of municipalities in fostering maternal and infant health is still a largely unexplored subject. In her recent research, Barbara Ramusack has examined the initiatives of the Madras municipality in providing antenatal and postnatal care and starting propaganda programs such as baby weeks to ensure safe childbirth and healthy infant care.¹⁶ My research documented that in Bombay, the municipality initiated a few of its own programs in mill areas, while it also collaborated with voluntary groups and millowners to provide facilities for childbirth, antenatal and postnatal care, and crèches for the mill population. The focus on municipalities highlights the key role of local governance in articulating and implementing urban sanitation and public health policies, a subject that remains neglected in historical research.

Moreover, the incorporation of municipal activities into historical research partially addressed the much-lamented dearth of primary sources in the fields of labor and gender histories. Annual reports of the municipality and records of municipal proceedings provided insights into the location of industrial workers in the sanitation and public health schemes of colonial Bombay. These documents, along with provincial legislative council records and papers of social service groups, were important in understanding how the infant welfare discourse stimulated the creation of some health care facilities for working-class women. Simultaneously, this infant-centric discourse defined working-class women in terms of their maternal bodies, reducing them to baby-producing organisms.

Cumulatively, the chapters in this study brought together disparate strands of urban, labor, sanitation, health, gender, and social reform histories to reconstruct the social history of labor in colonial Bombay. The

dismal living conditions of millworkers in colonial Bombay reflected the similarity of industrial experience in other parts of the world. However, the colonial situation added new dimensions to the industrial workers' situation in Bombay. The perceived disadvantaged status of Indian enterprise in a colonial economy became a pretext for Indian millowners and nationalists to ignore the well-being of millworkers. Concurrently, in a predominantly industrial city like Bombay, labor welfare was inextricably linked to the maintenance of urban public health and the nationalist visions of building a cohesive and strong nation. This awareness stimulated municipal and voluntary initiatives in the field of labor welfare.

Scholarship on colonial India has emphasized that despite its Western, modernist roots, Indian nationalist thinking imagined a nation with an ideal rural community, giving negligible thought to the growing Indian urban social groups.¹⁷ This study delineated that with their sprawling laboring populations, colonial urban industrial centers indeed attracted Indian nationalists as well as voluntary groups that imbibed nationalist values. Colonial cities such as Bombay became sites to forge a national community devoid of class tensions and peopled with sober, industrious laborers and responsible working-class mothers. Thus, the study of industrial cities is crucial to examining the overlapping colonial politics of urban development, class, gender, and nation. The examination of colonial, industrial urban centers is equally important for historicizing the political economy of growth in India in its current, neoliberal phase.

Although the current political and economic backdrop has changed significantly, the lives of working-class people in post-independence metropolitan cities are still marked by spatial marginalization and hardships. In postcolonial times, the mill industry of Bombay gradually lost its key position in the economy of the city, and India in general. Scholars and activists have documented how diversion of investments to new capital-intensive sectors and the pharmaceutical industry adversely affected the textile manufacturing industry as well as workers' wages and living conditions.¹⁸ Worsening capital-labor relations that culminated in a general strike in 1982–1983 that lasted for eighteen months also contributed to the dismantling of the industry. The strike resulted in the closure of many mills and the dismissal of more than 100,000 workers. As capital retreated from the formal mill industry, patterns of employment witnessed a major shift. The majority of former millworkers have joined the expanding informal economy of the city, especially the power loom industry and construction work in and around the Mumbai metropolitan

region where they have fewer labor rights, job security, or regulated working conditions.

Moreover, with the expansion of the Mumbai metropolitan area, the value of the real estate on which the mills and workers' chawls stood, has risen considerably. Since the dismantling of cotton mills in the 1980s, the remodeling of the 400 acres of land area consisting of the former mills and workers' chawls has been a contentious issue among the state government, millowners, real estate actors, and the worker-inhabitants of the erstwhile mill localities. Despite agreements reached in 1991 and again in 2001, the state government has failed to provide affordable housing to the workers formerly living in the mill district. Instead, the government of Maharashtra has compensated millowners and reallocated most of the land to real estate groups for the gentrification of the area.¹⁹ Similarly, the new owners and developers of mill lands have failed to provide stable and well-paying alternative jobs for millworkers.²⁰ Thus, in postcolonial Mumbai, the gradual decline of the industrial sector and the growth of a service and speculative economy have intensified the problems of unemployment, overcrowding, and displacement.

These problems have stimulated sympathetic responses from concerned citizen groups and individuals. Neera Adarkar, architect, activist, and author of *One Hundred Voices*, recounts how the dismantling of cotton mills and the ensuing gentrification of mill lands has motivated citizen groups to join forces with workers and prevent their displacement and unemployment.²¹ Adarkar mentions how women's rights and social activists of Mumbai like herself, Meena Menon, Arvind Adarkar, Gajanan Khatu, and a host of playwrights and artists have been participating in arduous legal and political battles against the anti-worker Development Control Regulations (DCR) since the early 1990s.

The DCR of 1991 sanctioned the conversion of parts of mill lands for residential and commercial purposes. The amended DCR of 2001 further reduced the share of public land in the erstwhile mill lands. This change, Adarkar recalled, brought together various citizen groups of Bombay "from the very upper-class, elite environmental organisations which talked about only beautifications of the city, to the slum-dwellers organization. . . . So, on one hand, it became a city level issue, on the other hand, for the mill workers also, they got support from various sectors of the society."²² Subsequently, the groups and individuals, along with the millworkers, formed the Mumbai People's Action Committee, which aims to resist policy-level changes that restrict inclusive urban

growth and neglect millworkers' rights. Although Adarkar is hopeful, she also notes how the "nexus" of the government, millowners, and developers has undermined such collaborative voluntary efforts. The joint attempts of citizen groups and workers' committees face numerous bureaucratic obstacles and are unable to get the civic authorities to repair existing tenements, provide them with "good infrastructure, health and education," and enable worker-dwellers to support themselves.

The educated citizens of Mumbai have expressed their concerns for the city and its laboring-class population in various ways. The persistent efforts of citizen-activists have kept alive the issue of former millworkers' livelihoods and living conditions. Simultaneously, there are more short-lived efforts to improve the everyday lives of slum dwellers and the people of Mumbai in general, through citizen-initiated consciousness-raising campaigns. The recent "fight the filth" campaigns of Mumbai are a prime example of this trend. In a piece published on 27 June 2011, *Mumbai Mirror*, an English-language daily, introduced the campaign as it lamented: "In the financial capital of the country it is alright if you spit, litter and throw garbage wherever you fancy. . . . It is not enough to blame the civic body for the cesspool the city has turned into. We as citizens have a role to play." The daily urged Mumbai's citizens to be a part of this drive.²³

Reminiscent of the sanitary rounds of the SSL in colonial Bombay, discussed in Chapter 4, these clean city campaigns consisted of surveys of slum areas by college students and educated citizens. Based on the notion that insanitation resulted from ignorance, or lack of civic sense, the participants attempted to instill sanitary consciousness in slum dwellers. The campaigns were managed by the local civil society organizations like the Rotaract Club and the National Service Schemes. The participating students educated slum dwellers about the health problems that might arise from littering and careless behavior.²⁴ These campaigns ended in September 2011. The organizers and participants of these campaigns were unable to explain how the lack of basic service amenities and sanitation infrastructure might affect the slum dwellers' ability to practice hygienic ways of living. Rather, the effort showcased dutiful, educated citizens of Mumbai and their commitment toward building a clean and ordered city. Echoing colonial campaigns, such citizen initiatives are thus examples of "governmentality from below."²⁵ Such civic movements have limited impact on the health and well-being of the urban poor because of continuing infrastructural inequalities.

Apart from examining the social history of urban, industrial labor, this study has opened up possibilities for future research in related areas. My research indicated that municipal and voluntary activism to promote sanitation and medicalized childbirth required paid workers such as midwives, health visitors, nurses, crèche caretakers, and trained social workers. The training and work of women physicians in colonial India has attracted some scholarly attention.²⁶ However, research into training programs, licensing, and registration of women ranking below physicians is lacking. Analytical narratives of their education and positioning in the hierarchy of the fledgling care industry would contribute to a growing body of research on the colonial history of medicine and public health.

In colonial cities, factories were not the only employers of women. By the 1920s, women increasingly worked as clerks, typists, teachers, and nurses in various colonial institutions and offices. Research into the social background of these women and how they lived in cities is crucial to understanding the intersections of gender, wage work, and the norms of respectability in colonial India. My preliminary research on this subject indicates that transnational organizations such as the Young Women's Christian Association (YWCA) were one of the first to create hostels for women employed in white-collar jobs in the colonial cities of India. Which sections of Indian women lived in these hostels and how the YWCA negotiated with the ideals of respectability to create "respectable" residential options for women constitute intriguing research questions.

Colonial discussions on women's role in social reproduction indicated that the field of labor and gender encompasses both women's paid labor outside the home and their unpaid care work within the family. Growing colonial industries and institutions expanded paid employment opportunities for women. But how did colonial modernity redefine women's unpaid labor? A study of the growing advertising industry in colonial India, especially the deconstruction of printed advertising images and texts for everyday commodities such as soap, hair oil, tea, milk substitutes, and dietary supplements, could reveal how the new commodity market refashioned women's sexual labor and their functions as caring wives and mothers. Cumulatively, these possible research areas could contribute to the important albeit inadequately explored fields of labor, gender, and urban culture in colonial India. Moreover, historical research on these themes would underline how structural inequalities hamper inclusive growth and negatively affect the well-being of the laboring masses. As Mumbai morphs into a megacity of the Global South, it is

important to create a development agenda, which includes working-class people as the beneficiaries of urban and economic growth.

NOTES

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3. Bombay was renamed Mumbai in 1995 by the state government of Maharashtra as an assertion of cultural identity. This official change of name stimulated a debate around chauvinistic nationalism and the identity of the city. See Sujata Patel, "Bombay and Mumbai: Identities, Politics and Populism," in Sujata Patel and Jim Masselos, eds., *Bombay and Mumbai: The City in Transition* (New Delhi: Oxford University Press, 2003), 3–29.
4. "What Will Make Mumbai into a Shanghai?" *Times of India*, 6 April 2005. http://articles.timesofindia.indiatimes.com/2005-04-06/india-business/27838709_1_shanghai-financial-hub-financial-centre.
5. Partha Chatterjee, *The Politics of the Governed: Reflections on Popular Politics in Most of the World* (New York: Columbia University Press, 2004), 144. Danny Boyle's 2008 feature film is one of the recent movies that depict Mumbai's slumlands as the quintessential, timeless repositories of urban filth, poverty, crime, child abuse, and prostitution. Danny Boyle, *Slumdog Millionaire*, 2008.
6. Chatterjee, *Politics of the Governed*, 131–32, 142–43.
7. Baria, "New Look."
8. *Primary Census Abstract for Slum* (New Delhi: Office of the Registrar General and Census Commissioner, 2011).
9. See Darryl D'Monte, *Ripping the Fabric: The Decline of Mumbai and Its Mills* (New Delhi: Oxford University Press, 2005). Recent government and corporate reports have identified the lack of basic public goods as a primary obstacle that blocks sustained economic progress and they advocate. See *Annual Report of the Planning Commission of India, 2013–2014* (www.planningcommission.gov.in), 77–82; Greg Clark and Tim Moonen, *Mumbai: India's Global City, A Case Study for the Global Studies Initiatives: A Joint Project of Brooking and JP Morgan Chase, 2014* (https://www.jpmorganchase.com/corporate/Corporate-Responsibility/document/gci_mumbai_02.pdf).
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12. Partha Chatterjee, *Lineages of Political Society: Studies in Postcolonial Democracy* (New York: Columbia University Press, 2011), 250–51.
13. Dick Kooiman, "Bombay Communists and the 1924 Textile Strike," *Economic and Political Weekly* (henceforth *EPW*), Vol. 15, No. 29 (19 July 1980): 1223–25, 1227–36; Sanat Bose, "Communist International and Indian Trade Union Movement (1919–1923)," *Social Scientist*, Vol. 8, No. 4 (November 1979): 23–36; S. Bhattacharya, "Capital and Labour in Bombay City, 1928–29," *EPW*, Vol. 16, No. 42/43 (17 October 1981): PE36–PE44.
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18. D'Monte, *Ripping the Fabric*, Menon and Adarkar, *One Hundred Years, One Hundred Voices*, 61–72.
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