Danielle Falconer is currently a third year history major with a focus on Southeast Asian studies. She hopes to eventually pursue a career in law after graduating from Cal Poly, but aims to travel through South America and Southeast Asia for the year prior to committing. Along with studying history, Danielle loves reading, writing, and playing sports. Though this is Danielle's first publication, she hopes to continue her studies with a focus on the topic of prostitution.

Abstract

This article involves the discussion of British imperialism in Southeast Asia, specifically Malaysia, through the eighteenth and nineteenth centuries. By using Western medicine as an example of the strategies used by imperialists, this paper aims to develop a plausible and defensible argument concerning the reasoning behind the implementation of Western practices. By capitalizing on the use of travelogues as the main source of historical reference, the paper clearly illustrates the true opinions held by the British imperialists towards the native Malays, as well as the bias traditionally present through primary source documents. Along with addressing the British perspective on native practices, this paper highlights the reactions of the indigenous people towards the colonial power.
From 1771 to 1946, British influence challenged both the culture and unity of Malaysian people. Through the implementation of Western medicine, British imperialists gained access to Malaysian villages to remedy what they deemed “barbaric.” With little to no knowledge of native medical practices, the imperialists heavily criticized Eastern medicine, calling it witchcraft and relating it to the lower-class superstitions of European peasantry. This paper asks how the British imperialists viewed Malaysian medical practices and why Western medicine failed to create strong roots in Malaysian culture. This paper will argue that British imperialists sought to implement Western medicine by undermining traditional Malaysian medical practices as a way to further their own power.

Travelogues helped unify many Europeans by creating the illusion of a geosphere, which allowed the people of these expansive empires to feel connected
to conquered lands. Furthermore, travelogues painted a mental foundation regarding the concept of a geo-body, allowing societies of the imperialist nations to feel collective affiliation over their colonies. Though travelogues allow historians to view a particular culture under the scrutiny of an imperialist power, they also convey the culture of the imperialist along with the colonized nation itself. By recognizing the cultural bias, researchers can divulge how imperialists felt about a certain native practice, along with the intrinsic values of imperialist culture. Although historians are able to gather what a particular traveler might have felt, there are virtually no primary documents from the natives’ point of view, leaving scholars dependent on the imperialists’ descriptions. Because of the one-sided nature of the travelogues, researchers must understand that they present an obvious bias towards whoever wrote them and adjust their analysis accordingly. As primary source documents, travelogues provide clear insight into the minds of their authors and how they viewed the world around them. These documents may also have been employed to portray others in a skewed light so as to more accurately benefit the author’s cause.

Beginning in the sixteenth century and continuing well into the twentieth, European powers began the process of imperialism as a means of extending their respective empires, partly through the implementation of religious beliefs. Along with the promise of greater religious authority, Europeans recognized the abundance of resources in areas such as Southeast Asia, seeing it as a springboard for trade with China. British imperialists looked to colonize Southeast Asia for its political and cultural benefits as well as its large economic affluence, crucial for any expanding empire. Although the European contributions to culture, religion, and language in the imperialized countries were overwhelmingly prevalent, in reality, the post-colonial state lines created by imperialism acted as the longest-lasting impact. Driven largely by its capitalistic economy, the British government continued with the promise of raw materials that could be brought back to England and sold at inflated prices. Starting in India in the 1700s, British imperialists traveled

5 Ibid, 79
through Southeast Asia, conquering countries such as Myanmar, Singapore, and Malaysia.

The colonization of Southeast Asia, driven by the promise of raw materials, started in the 1600s with exploration by the Portuguese and spread quickly to include other European powers such as Spain, France, and Great Britain. British imperialists colonized and discriminated against the native cultures they conquered, claiming that many of the natives were “disconcertingly credulous.” For the Malaysian Peninsula in particular, the British Empire attempted to colonize by building new strategic trading posts in Malaysian ports, which allowed them to swiftly gain access to the country. To the native people of the colonized countries, these infringements disrupted their own methods of living. Contrary to the jaded views of the colonial powers, many Southeast Asian countries had previously established ways of living, complete with religion and traditional Eastern medicine.

Traditional Malay medical practices predate the British insertion of Western medicine into Malaysia by hundreds of years. Homeopathy, the modern term for holistic medicine, was introduced by migrant Hindus and spread rapidly from India into the Malaysian Peninsula. Holistic medicine practices remained the most popular form of medicine because of their spiritual ties, which appealed to traditional Malaysian superstitions. Malaysians believed that sicknesses such as malaria, dengue fever, and other common tropical diseases signified punishments from spirits called the Hantu. They also believed that attacks from one of the evil Hantus were appropriately handled through witchcraft, which was led by medicine men and practiced alongside homeopathic remedies, rather than conventional medicine. Along with this, sicknesses had to be treated by the Bomoh, or local medicine men.

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9 Ibid, 85
10 Ling Roth, *The Natives of Sarawak and British North Borneo; Based Chiefly on the mss. of the Late Hugh Brooke Low, Sarawak Government Service* (London: Truslove and Hanson, 1896), 294.
British Views on Malaysian Medicine

British imperialists rebuffed the Malaysian style of medicine due to its heavy ties in both Muslim and Indian culture, which emphasized religion and superstitions over science, and related their practices to those of European peasantry. They continued to relate “the Oriental’s idea of medical treatment” to the lower and more ignorant social classes in England, emulating the same negative stereotype onto the natives as they would to the uneducated British masses. British imperialists felt superior over the natives because of Western science, which they believed to be more proficient than traditional Eastern practices. For example, imperialists belittled native culture for lacking rudimentary first-aid systems, such as nursing divisions and ambulances, which were common throughout Europe at the time. The imperialists used the lack of these seemingly elementary factors as an attempt to justify their sense of superiority even further, intensifying their paternalistic ways.

The British disregarded native superstitions towards white men and looked down upon the native Malaysians’ lack of medical advancement, according to European standards. Imperialists also discounted the methods of native medical practices as well, refusing to aid natives in need. In one case, a doctor equipped with a medical bag refused to see native patients, saying he would “rather see them die than live.” Another travelogue author reported that a group of natives asked him for pieces of paper to burn for a certain medical purpose, which he admittedly laughed at.

Much of the discrimination that surrounded Malaysian medicine stemmed from the harsh critiques of travelogue writers concerning the traditional treatments of the Bohom. British doctors questioned Malaysian medicine, criticizing remedies that included items such as the wing bone of a goose, the horn of a wild goat, the spine of a sea porcupine, and various unidentified

12 Ola Hanson, The Kachins, Their Customs and Traditions (Rangoon: American Baptist Mission Press, 1913), 72.
16 W. C. King and G. T. Lay, The Claims of Japan and Malaysia upon Christendom: Exhibited in the Notes of Voyages Made in 1837, from Canton, in the Ship Morrison and Brig Himmaleh, Under the Direction of the Owners (New York: E. French, 1839, 10.)
jungle roots and barks. Medical practitioners also distrusted the traditional Bohom practice of breathing on an inflicted person as a way of repelling an evil spirit, arguing that it was a disturbing and primitive practice. Travelogue writers considered Malaysians to be ignorant for using their herbs and roots instead of European medicine.

Imperialists believed Western doctors possessed skills far superior to Malaysians and thought the natives were ridiculous for clinging to their own ways of medicine. Though some Western doctors credited Malaysian medicine men with knowing important properties of local herbs, most European doctors overwhelmingly denounced the methods, saying science trumped Malaysian “witchcraft.” In some cases, Malaysians waited until their most advanced medicine proved futile before they entered western hospitals. Native skepticism toward Western medicine coupled with heavy emphasis on superstition frustrated the British doctors, leading to further scrutiny of Malaysian practices by the imperialists.

Implementation of Western Medicine

By implementing systems of first aid, such as ambulances and nursing stations, the British medical practitioners gained the natives’ trust while simultaneously infiltrating native land. In reality, these systems created a sense of dependency the natives had on the imperialists, allowing them to further their own agenda. The first organizations based off of Western medicine that provided medical relief were those created during wartime. In 1877, imperialists founded an ambulance organization called St. John’s Ambulance Association and Brigade on the Malaysian Peninsula. Though the British missionaries used a seemingly helpful organization such as St. John’s to implement Western medical practices, they also carried colonial

20 Harrison, An Illustrated Guide to the Federated Malay States, 125.
22 Harrison, An Illustrated Guide to the Federated Malay States, 123.
prejudices and paternalist desires by expanding their territorial reach under medical pretenses.  

Another example of British territorial expansion is shown by the creation of the King Edward VII’s Medical College. In 1905, the college opened in the Malay states as a way to teach treatments for tropical disease, which simultaneously furthered British superiority through medical practice. By opening colleges to teach Western medicine, specifically in an attempt to curb the spread of native diseases, British imperialists employed their own medical practices. This created a native sense of dependency on the British, further promoting the idea of Western responsibility over indigenous people.

The hospitals built in Malaysia brought in enormous amounts of revenue from many Southeast Asian countries. The British then used this income to further their advancement into the country by supplying troops and other material needs to the imperialists abroad.

Along with the direct infiltration of Western medicine into the Malaysian culture, British imperialists encouraged English society to further its implementation of Western medicine in Malaysia. In 1912, Burroughs Welcome & Co. distributed medicine chests to English citizens that included medical and surgical requirements specifically for expeditions to tropical climates. By advertising these medical chests, the British government and imperialists promoted the idea of advancing the imperialists’ domination of the natives. Imperialists equipped citizens with Western medicine that protected them from tropical diseases abroad, introducing safe travel to Malaysian colonies. The immunity granted by the medicine in the chests increased the number of eligible British travelers; thus, spreading their sphere of influence.

Along with promotional tactics designed to incite British citizens to travel to colonial holdings as a means of furthering Western superiority, the British government used medical missionaries an additional method of entering Malaysia. Women were commonly employed as medical missionaries as they

24 Liew, 367-381.
were perceived as trustworthy and were therefore welcomed where no male missionaries were able to gain entrance.\textsuperscript{29} They also used this newfound acceptance as a way of spreading Christianity. For example, Dr. Christianity, a medical missionary from England, reported that she dealt medicine out to flocking crowds while preaching the ways of Christ.\textsuperscript{30} Like the implementation of first-aid systems, these allowed imperialists to enter areas of Malaysia that would have otherwise remained untouched.

**British Views and Reasons for Imposing Their Own Practices**

As an imperialistic power, British imperialists implemented their systems of medicine under the false pretense of bringing aid to natives. Many travelogue writers described British doctors as compassionate, who were only in Malaysia to show their medical skill to the native people.\textsuperscript{31} Additionally, imperialists believed that if they could curb tropical diseases, productivity would increase in native workers.\textsuperscript{32} This, in particular, shows clear cultural bias towards the advantage of the imperialist power, rather than the well being of natives. Though Western doctors and medical women reportedly ministered to the needs of the natives unselfishly, they admittedly fought diseases in native tribes to increase the productivity of the people they sought to exploit.\textsuperscript{33}

In a specific example, British doctors executed new ways of childbirth in traditional Malaysian villages to expose natives to Western medical techniques. They criticized Malaysian mothers for being unclean when giving birth and for being too attentive afterwards. Imperialists implemented their own techniques for birth and childcare, and in doing so, attempted to break down traditional Malaysian family dynamics, further imposing Western

\textsuperscript{29} Cyrys D. Foss, *From the Himalayas to the Equator: Letters, Sketches, and Addresses, Giving Some Account of a Tour in India and Malaysia* (New York and Cincinnati: Eaton and Mains, 1899), 63.

\textsuperscript{30} Martin Van Buren Knox, *A Winter in India and Malaysia Among the Methodist Missions* (New York: Cranston and Stowe, 1891), 192.

\textsuperscript{31} King and Lay, *The Claims of Japan and Malaysia Upon Christendom: Exhibited in the Notes of Voyages Made in 1837, From Canton, in the Ship Morrison and Brig Himmaleh, Under the Direction of the Owners*, 10.


Along with the direct imposition of medical practices, imperialists used propaganda to garner support for their invasive domination of the native Malays. British advertisers broadcast an astonishing statistic in parts of British Malaysia that claimed death rates among troops had dropped from fifty to seventeen percent due to the introduction of Quinine, a drug that fought malaria. Further explanation showed that the drug was manufactured chiefly for British troops but was withheld from most of the native population. By using statistics referencing the welfare of their own troops, the British attempted to bolster support for the implementation of Western medicine abroad, while simultaneously proving that they had only their interests in mind rather than those of the native Malaysians. The British fought against tropical diseases mainly to protect their military, though it was carried under the good name of humanitarian work. Though the British rhetoric of propaganda claimed to introduce these medical practices for the benefit of the native people, they were primarily used for white imperialists’ benefit.

Malaysian Views on Western Medicine (as Told by the British)

As reported by the travelogues, Malaysian natives opposed Western medicine, mostly due to their spiritual ties and lack of understanding of the newly implemented practices. In many cases, Malaysians reportedly believed Western doctors poisoned native patients in white hospitals. One traveler described the natives as fanatical, commenting that their accusations were “precisely not the way of it.” Malaysians feared white doctors more than the plague and convinced themselves that doctors used pieces of Malaysian patients to make their medicine. Moreover, natives feared surgeries performed by western doctors. One travelogue writer reported that Malaysians believed western doctors merely cut pieces of people off during surgical procedures, never attempting any real medical feat. In another account, a Malaysian

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36 Ibid., 36.
37 Harrison, An Illustrated Guide to the Federated Malay States, 123.
38 Norman, The Peoples and Politics of the Far East: Travels and Studies in the British, French, Spanish and Portuguese Colonies, Siberia, China, Japan, Korea, Siam and Malaya, 293.
39 Harrison, An Illustrated Guide to the Federated Malay States, 123.
woman believed white doctors slowly starved her husband to death, which the British author merely scoffed at, relating it again to the overabundant superstitions of the native people.\footnote{Harrison, \textit{An Illustrated Guide to the Federated Malay States}, 123.}

According to a similar travelogue, the captain of a group of British troops claimed to want to help a sick and dying Malaysian man who refused to comply with the guards due to his lack of trust in Western medicine. The guard reporting the incident explained his distrust was caused by Malaysians’ fear of the unknown, even if it meant saving their lives.\footnote{Nordan, \textit{From Golden Gate to Golden Sun: a Record of Travel, Sport and Observation in Siam and Malaysia}, 28.} Travelogue writers regularly commented on the goodness that they brought to the Malaysians and derided them for being ignorant towards British services in the medical field. Because of the high amount of fear that surrounded medical practices, it is clear that the introduction of Western medicine was troublesome to the native population. This, coupled with the blame of lesser education leading to abundant superstitions, rejects the British claim of implementing their medical practices for the benefit of the natives.

Through trial and error, British medical practitioners attempted to limit the use of traditional Malaysian medicine, spreading their own practices as a means of gaining further holdings throughout the country. Westernized medicinal practitioners faced adversity from many of the natives; their only true triumph was through chiefs and upper classes in Malaysian societies that invited them into their villages. Travelogue authors claimed that communities hoped to protect the royal families from common diseases that regularly plagued the lower classes.\footnote{Ooi G Ling, “British Colonial Health Care Development and the Persistence of Ethics Medicine in Peninsular Malaysia and Singapore,” \textit{Southeast Asian Studies} 29 (1991): 172.}

Despite imperialists’ attempts, Western medicine was never truly adopted into the majority of Malaysian societies until much later in the twentieth century. Reasons for this included the spiraling costs of health care, the deleterious effects of many Western drugs, and the problems of rural health care delivery. Perhaps the most important factor, however, was Malaysians’ strong faith in the ancient and familiar practices of their own ethnic tradition.\footnote{Colley, “Traditional Indian Medicine In Malaysia,” 77.}
Through medical missionaries, trading ports, and the creation of first-aid systems, British imperialists gained access to the most rural and inaccessible places in Malaysia. In doing so, they attempted to spread Western culture in hopes of creating a more dependent colonized country, strengthening their own empire with raw materials and greater land mass. Because of the deep-seeded religious and spiritual roots in Malaysian culture, coupled with disdain towards white doctors and places of medical practice, Western attempts to influence the native society could not permanently combat the traditional ways of life in Malaysia.
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