

Give an overview of the research/studies you will be undertaking**Title: Medicine, charity and dominion in British colonial Cyprus, Malta and the Ionian Islands (1800-1914)**

Many studies have discussed the link between health and colonialism, drawing attention to differences and similarities between medicine in the metropolis and the peripheries as an important aspect of the history of colonialism. However, few studies have explored the medical history of the Mediterranean under the British Empire and, in particular, the small islands or archipelagos scattered throughout the Mediterranean. Yet these islands played an important part in the naval and mercantile routes to Egypt and India, especially after the opening of the Suez Canal in 1869. These islands also served as quarantine stations within the Empire, thus contributing to the general health of the troops through rigorous measures imposed on vessels coming from eastern and southern Mediterranean shores (Mark Harrison 1994, John Booker 2007). Considering the Ionian Islands, Malta and Cyprus during British dominion, I propose to address the following questions;

- How did local politics and naval/military health services affect civil charities?
- How did local churches share the burden of national health services in times of politico-religious tension? How involved were the local churches in offering financial and medical support to the poor and sick?
- How were medical services in the towns and around ports affected by the military and naval services on the islands? What form did rural health services take and how did they differ from those in the larger towns?
- Was health care part of a broader plan of British colonialists to civilise the native populations of these islands?
- How do these islands, where race was not a dominant issue, compare with other case studies of colonial medical interventions, where racial differences dominated discourse, social relationships and action?

Aims

My aim is to analyse and compare the individual health care systems of these three case studies, against a backdrop of 19th-century Mediterranean colonial policy and practice, with a particular focus on hospital provisions, maternity care, mental health, out-door relief and general public health policies.

In order to understand the cultural background of these islands, one needs a firm grasp of the history of the Mediterranean region. Essentially this area was the melting pot of East-West and North-South divergences. The Mediterranean saw the birth of Hellenism, which later was vital in the colonial histories of Cyprus and the Ionian Islands. Though sharing similar histories in terms of colonial experience, these three case studies have many distinct differences. One of these relates to the geo-strategic importance of each island within the British Empire, which had a direct impact on health and medical services in terms of the size of the garrison and number of troops stationed there, as well as on the importance attached to civilian health care. Race, ethnicity and religion also constitute important reference points and influences in the three islands.

Through the study of various charitable institutions, naval and military hospitals, public health, hospital provision and quarantine measures, I aim to understand the relationship between medicine, the colonial civilising mission and the transmission of information and ideologies between the metropolis and periphery. Inevitably the colonisers had certain preconceived notions about the islanders, mainly garnered from contemporary romanticised literature (Gallant 2002). In turn, the islanders often reacted differently to the measures and systems imposed by the British colonisers in their civilising mission. One such example was identified by Thomas Gallant in his study of the Foundling Hospital in the Ionian Islands. He explained how the islanders used this new system for helping foundlings in a way which augmented the power of the local elite through the exploitation of colonial funds (Gallant 2002). This study aims to look closely at all the charitable systems on these islands to discover if such social control on the part of the powerful elite, which could serve to subvert the colonial mission, existed in all or few of these charitable institutions and organisations.

The relationship between charity and religion will form a key element of my study. Research in the past few decades has primarily focused on the poor and charity in the Western Christian world and rarely studied poor relief in the Christian Orthodox and Islamic worlds. It is evident that each faith had its own understanding of what poverty meant and who was eligible for relief (Cohen 2005). Religion was a very strong component in the Mediterranean Islands where the Greek Orthodox Church, Roman Catholicism and Islam put forward strong social and political messages. In both the Ionian Islands and Cyprus, *Enosis* (union with Greece) was strongly advocated by the clergy. In Malta there were never open political quarrels between the British colonial government and the Roman Catholic Church, but the latter was generally allowed to rule in all moral and social aspects and to 'advise' the British Government on political issues related to its moral jurisdiction. My aim is to study how poverty was dealt with by these religious bodies and what systems and interventions were sponsored by the church.

Charitable and medical institutions, especially in rural areas, are more often associated with religious establishments. These establishments were frequently run by nuns, missionaries or the local church, and offered maternal and child health care, and sometimes care for the magdalens (Davidovitch & Greenberg 2007). Meanwhile, in towns and ports, naval, military and civil medical institutions were often situated near each other and tended to accrue a greater number of patients than those in rural areas.

I will build upon other postcolonial studies of medical history in Africa and Asia (David Arnold 1993, P.D. Curtin 1964, D.M. M. Vaughan 1991 and others) with the intent of exploring the history of medicine in these islands from both colonialists and colonised point of views. Michael Worboys (2004), distinguishes three different types of colony; 'Orientalist' colonies of India, 'Executive' colonies in Africa, and 'Settler' colonies such as Australia and New Zealand. Although Worboys does not claim that these categories are exhaustive, one cannot but note the exclusion of the Mediterranean colonies. Or could Malta be associated with the 'Executive' colonies in Africa and the Ionian Islands and Cyprus with the 'Orientalist' colonies of Asia? This in itself is also an anthropological dilemma - are Mediterranean countries simply a composite of the East-West and North-South conflicting cultures or a homogenous area with the same climate, temperament and culture ready to be studied on their own? This study will try to shed some light, with respect to the history of medicine, on such differences and similarities between these Mediterranean islands under British rule.