COMMUNITY HONOR/SEXUAL BOUNDARIES:
A DISCURSIVE ANALYSIS OF DEVADASI
CRIMINALIZATION IN MADRAS, INDIA,
1920–1947
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In the late nineteenth century, colonial ideology emphasized the moral and scientific inferiority of India’s traditions. The position of Indian women and supposedly “barbaric” Hindu practices such as child marriage and the devadasi system became symbols of Britain’s higher level of civilization and of its moral right to govern a subject population. Beginning about 1880, the indigenous intelligentsia reacted with a fervent nationalism that asserted the superior spirituality of its culture and, in particular, the spirituality of the uncolonized domestic abode and the mothers who resided therein. In this contest between colonial images of the superior education and “civilization” of British women and Indian nationalist images of the superior spirituality of Indian women, less “respectable” expressions of female sexuality, such as the courtesans and devadasis, were gradually marginalized and criminalized. The criminalization of the devadasis in the 1920s, 1930s, and 1940s was the result of the intersection of apparently competing discourses, imperialist nationalism and anticolonial nationalisms. These discourses shared similar premises regarding the regulation of female sexuality. “Normal” and “moral” expression of female sexuality was that contained in monogamous marriages and motherhood: the health of the “family” and of the “race” was partly dependent on the behavior of mothers, considered as caregivers to the nation. In the case study of the criminalization of the devadasis of the Madras Presidency between 1920 and 1940, I will discuss the similarities among several discourses: imperial medical condemnation of traditional religious practices, nationalist reformers who viewed the devadasis as simple prostitutes posing a hygienic risk to the nation, and Tamil nationalists who viewed the devadasi system as an insult to Sudra honor. What tied these nationalist discourses together was a single underlying premise: the morality/health/progress of the national com-
munity was dependent upon the sexual honor/cleanliness/normality of "its" women. Indeed, by the 1920s, reformers, colonial administrators, and nationalists drew implicit equations between national morality and community hygiene. Hence the supposedly scientific discourse of public health and the more "traditional" discourse of national honor and morality were frequently conflated, each becoming metaphors for the other. Fears about the spread of venereal disease through prostitution became a frequent symbol for anxiety about sexual transgressions of national boundaries and moral communities. In this convergence between middle-class colonial administrators' views, and those of (mainly) middle-class nationalists, the devadasi became equated with commercial prostitutes and viewed as an undesirable "alien" to be suppressed in the nation's march to modernity and enlightenment.

Kay Jordan (1989) has explained the criminalization of devadasis in the Madras Presidency as due to a growing sense of shame toward indigenous traditions that was imparted by Western colonial education and missionary activities among middle-class Indians. Yet this explanation is incomplete. It ignores the fact that by the 1920s, social reforms, such as devadasi abolition, were promoted by and seen as emerging from within the nationalist block itself. In relation to public health policy concerning venereal diseases and prostitution, most nationalist reformers argued that British commitment to a policy of non-interference with Indian beliefs and customs had led to a serious neglect of public health (Arnold 1993, 241). In fact, Jordan's own information, taken mostly from legislative records, shows that the colonial administration was far more reluctant to intervene in religious matters such as the devadasi institution than were nationalist legislators during this period. A simplistic colonial discourse perspective, such as that of Jordan, assumes that all hegemony and will to power resides in the domain of the colonizer and none emanates from the colonized themselves (Sarkar 1993, 1869-70). Yet by the later colonial period, during which time the actual criminalization of Madras devadasis occurred (1927-1947), Gandhi had forged a mass movement for India's independence and various electoral reforms enacted through pressure from the nationalist movement had partially devolved power to the Indian electorate. Increasingly, both colonizer and colonized were becoming aware that the question of India's independence was more a matter of time than of fact. In addition, by focusing on legislative records alone, Jordan ignores local discourses of gender and power, in particular the anti-Brahmin and Brahmin conflict in Tamil Nadu. This conflict provided a major backdrop for Madras politics in the late-colonial and postcolonial periods.

Colonial control of the sexual body politic was evident in the late nineteenth century in the enactment of the Contagious Diseases Act (1868-1888) and Cantonment Regulations. These laws provided for the inspection and regulation of Indian women even suspected of providing sexual services for British troops. In addition, regulated brothels were created for British troops in India and a number of courtesans were transferred to regimental brothels (Ballhatchet 1980). Nationalists of the 1880s strongly objected to the operation of the Contagious Diseases Act, seeing it as evidence of India's national shame and of the brutal exploitation of Indian women by British troops (Whitehead 1995). Yet by the early twentieth century, Western medicine and public health policies had gained increasing prestige among the nationalist intelligentsia due to successes in treating infectious diseases and they became an active aspect of indigenous rhetoric and social practice (Arnold 1993, 242). Although nationalists criticized many aspects of British and European culture and society, the basic terms through which the human body and the Indian body politic were to be understood, regulated, and controlled were unconsciously set by nationalist acceptance of the superiority of Western medicine. Increasingly throughout the early twentieth century, legislative debates concerning the role of sexuality, women, and motherhood were couched in scientific, medical arguments, rather than through the religious precepts of the Dharmaashtras.

Historically, devadasis arose out of the South Indian bardic tradition and consisted of groups of dancers and oral historians who became attached to specific courts and temples throughout southern and eastern India. The first scriptural mention of devadasis is found in an eleventh-century collection of stories, the Kathasaritsagaras, and there are no known references to devadasis and temple dancing in the oldest books of dance theory, the Natya Shastra and the Abhinaya Darpana. In inscriptions and textual evidence from the thirteenth century onward, the devadasis are referred to as "ever-auspicious" females who were to deal with the dangerous divine, especially in its feminine aspect of shakti. The status of devadasis varied throughout the subcontinent, being most closely connected to the courts and of highest status in Tamil Nadu and Orissa. Since the devadasis of Orissa managed to maintain their privileges throughout the colonial period (Marglin 1984), I will be focusing only on the devadasis of Tamil Nadu in this chapter.

In ritual terms, the word devadasi was applied to that class of women who dedicated themselves to temple worship through ceremonies of marriage to deities. During the Vijayanagar period (1346-1565), the term was applied to all women devotees who donated money to temples, and not only to temple dancers (Orr 1996). Devadasis were considered ever-auspicious, or mitrasamundaris, because they had been symbolically married to deities and could therefore never be widowed. No devadasi caste per se existed. Rather, there existed a devadasi way of life and professional ethic. The profession of devadasis was hereditary, but it did not confer the right to work without adequate qualification. These qualifications included a rigorous education and five to ten years of training in Bharat Natyanam dance undertaken with a guru, or dance teacher. The teacher also came from the devadasi community but was invariably male. The caste term Isai Veilala, which many men from the
devadasi community claimed as their own, only emerged in relation to the reform movement and the anti-Brahmin Self Respect organization to which many belonged (Ananthi 1991, 23). Following the dedication ceremony, the devadasi usually acquired a Brahmin patron who sponsored her dance performances and contributed to the financial upkeep of her household and orchestra. He also often became her lover.

The matricentric features of devadasi households and communities have been much remarked upon, and indeed roused missionaries' disgust in the nineteenth century. Devadasis were awarded land grants and heritable rights in revenue from temple lands, called inam grants. Women of the devadasi community were favored over men in inheritance matters, as daughters inherited the bulk of devadasi estates. Devadasis were also the only women allowed to adopt children under Hindu customary law. They had a great deal of choice over their sexual partners and patrons and also performed in the Thanjavur courts and at important domestic ceremonies of elite families, being considered a prestigious adjunct to domestic institutions, rather than their avatars (Srinivasan n.d., 183). They were also forbidden from exerting themselves in domestic labor.

The devadasi community was divided into two sections: the peramela and the cinnamalai. The former consisted of offspring from marriages within the community, the latter were the offspring of the devadasi and her patron. The former produced the dance teachers and players in the large orchestra and were considered the pure section of the community, while the latter provided accompanists for the devadasi's dance and were considered the "mixed" or "impure" section of the devadasi community (Srinivasan n.d., 181). The devadasis were also stratified into various classes, a classification that arose during the hegemony of the Tanjore kingdom. At the top of the hierarchy were rajadasis (royal dassis), who performed various sacrifices for the king; next the nattum dassis (dancing dassis), who were able to perform Bharat Natyam dance services for the deities in the temples, and finally sannidhi dassis, those who belonged to the shrine. Another class of dassis, the Kannalambal prasramanam, were considered to belong to the "house of the consort" of the deity, and hence were of lower ritual status than the first three classes of dassis. It is probable that the lowest class of dassis practiced temple prostitution and did not have the same financial autonomy and status as the nattum dassis and the rajadasis (Kersenboom-Story 1987, 184).

The relative legal and financial autonomy of devadasis placed them in an unusual and somewhat marginal position in early-twentieth-century South Asia. According to most schools of Brahminical Hinduism, women's sexuality, although auspicious and activating, had to be controlled through spatial restrictions and arranged marriages. In addition, intimate social contact between upper and lower classes and castes, especially sexual relations, was highly regulated in Brahminical Hinduism. Upper castes equating caste endogamy with high status. Hence, the relative status of a family was judged partly by the fidelity of wives and their conduct as mothers, as upper-class women were viewed as symbolic gatekeepers of their family's status or honor (Engels 1987, 425). The values of fidelity, chastity, and purity were especially marked among Brahmins, for whom even remarriage of widows was disallowed. Indeed, although maintaining a pure lifestyle, widows were considered exemplars of female inauspiciousness: the death of their husbands was viewed as a part of their karmic burden. The devadasi, through her symbolic marriage at puberty to a deity who could never die, was considered permanently auspicious and life-enhancing. She was to be present at those critical life-moments that required the balancing of the auspicious and inauspicious. She was also required to remove the accumulated destructive force of the evil eye that the god might contract during a procession by waving the pot-lamp in front of him (Kersenboom-Story 1987, xix).

For the English middle classes who formed the bulk of the colonial administration in the Victorian and post-Victorian eras, sanitary reforms, social hygiene and purity movements were linked with evangelical values of progress, thrift, sobriety, respectability, and self-improvement (Davidoff 1988, 17-23). Middle-class British ideology also valued the chastity of daughters and fidelity of wives. However, this was justified through eugenics and social hygiene discourse. Extramarital sexuality, especially that of women, was dangerous because it could spread disease and degeneration throughout the body politic. In fact, the British intelligentsia was largely accepting of eugenicist views in the early part of the twentieth century. The British Eugenics Society and Social Hygiene Council examined the health of family lineages through the pedigree and promoted laws that denied the rights of alcoholics and the medically and morally unfit to marry (Manzur 1992). In the eugenicist paradigm, extramarital female sexuality was a sign of degeneracy of families, as well as being a physical danger to the health of communities and families. Tendencies to prostitution could be identified by heredity and by certain physiological markers of degeneration, e.g., a large second toe and a Darwin's ear (Gilman 1985). Hence both Brahminical Hinduism and eugenics philosophy attempted to control female sexuality, albeit in different ways, since psychological, rather than spatial restrictions, were the main means of controlling women in middle-class Britain. In addition, Hinduism at least provided a marginal yet auspicious space for a minority of women who were trained as classical dancers in the devadasi tradition. This space came under attack in the early twentieth century, as eugenics views became an important defining discourse of health policies among the nationalist intelligentsia in India.

Equations between the health of mothers and the future health of the "race" gained increasing prominence internationally from the early twentieth century onward, as eugenics movements from Britain, continental Europe,
and North America articulated a supposed connection between national advancement and racial health (Whitehead 1996, 187–211). The development of Indian nationalism as an organized force dates from the first sitting of the Indian National Congress (INC) in Bombay in 1885. Despite lodging protests against the Contagious Diseases Act and Containment Regulations in early sessions, between 1880 and 1910 both male and female leaders of the INC developed a construct model of the ideal female citizen whose role was primarily that of an educated mother and wife. Indeed, the mother was simultaneously the repository of ancient traditions, an icon of the nation, an embodiment of _ashikini_, and the educated caregiver of future generations (Chakravarti 1990). The domestic sphere, symbolizing ancient traditions, thus became opposed to the outer world of politics and economics, a site where Indian middle-class men continued to experience subordination (Chatterjee 1990, 233–54; Sarkar 1987, 2011–15). The nationalist intelligentsia promoted female education that would improve the ability of women to be educated mothers, aware of domestic science and hygiene. In this process, less respectable expressions of female sexuality became devalued and marginalized, seen as a symbol of historical degeneration of a past great tradition.

Partly through the influence of the eugenics movement, the Western medical profession infiltrated social policy and legal debates concerning sexuality internationally in the first decades of the twentieth century. The Rockefeller Foundation, the major financier of tropical disease institutes after 1910, saw a close, causal connection between national progress, racial health, the health of mothers, and moral hygiene associated with monogamous familial sexuality. In fact, the health professionals of the Rockefeller Foundation believed this disease was a major cause of poverty, not vice versa (Farley 1991). After World War I, the League of Nations and the International Labour Office also adopted social hygiene policies and promoted hygienically educated motherhood as the goal for all emerging and developed nations. As a result of the dissemination of social hygiene models, the health of each nation became linked with the role of its mothers (Davin 1979).

Due to its enclaved character in the nineteenth century, the influence of Western medicine on most people’s lives in India was negligible before 1910 (Ramasubban 1988). However, by the second decade of the twentieth century, Western-trained physicians were offering real competition to _vadis_ and _hakims_, indigenous doctors trained in humoral and herbal medical traditions, in major cities through the growth of dispensaries. At the level of legal debate and jurisprudence, their influence was much more profound as nationalist concerns about the health and progress of the nation promoted a medicalized view of both the human body and the social body. This is shown not only in debates about the _devarassis_ in Madras, but also in most social reform issues relating to women during the 1920s and 1930s. These included raising the legal age of marriage, the reform of _purdah_, increased education for girls, concerns about tuberculosis, and the banning of mining work to women. The editorial in the first issue of the magazine of the first nationwide women’s organization, _Sri-Dharma_, reflected the equations that were constantly being made between the state of the nation’s health and the state of motherhood: “Women's health is important to national progress because women are the mothers of the nation, and if they are physically underdeveloped and sickly, then the whole nation will become weak and enfeebled” (1913, 2).

“Science,” it was argued, “should be brought into the training of the strong great race of the future children of India through its mothers (_Sri-Dharma_ 1913, 2–3). In fact, throughout the 1920s _Sri-Dharma_ continued to agitate against prostitution, seeing it as a social evil spreading potential disease to the body politic of “respectable society.” A 1921 editorial in _Sri-Dharma_ praised the Social Purity Committee of the Bombay Women’s Council for strenuously agitating to remove the “Bombay Blot.” “The increasingly immoral state of the city is becoming a menace to the health of even the purest women” (_Sri-Dharma_ 1921, 18). Dr. Muthalakshmi Reddiv, an editor of _Sri-Dharma_ and president of the Women’s India Association in the 1930s, argued that prostitution constituted a menace to children and that “mothers of the race could not tolerate places that were centres of moral and physical disease” (_Sri-Dharma_ 1928, 1).

The 1920s were a highwater mark in legal reforms for women, marking the first period in which the necessity for changes in the position of women acquired nearly unanimous consent from various currents of the nationalist movement (All-India Women’s Congress 1927–1936). Reformer pressure increased after the Montagu-Chelmsford reforms in 1919, which instituted a principle of dyarchy that enfranchised Indian-elected legislatures at the provincial level for an array of domestic matters. During this period, reformers and nationalists often criticized the colonial administration for inhibiting social reform and for its lack of concern with public health and social hygiene measures. As the family and the home were symbolized as the microcosm of the nation, the domestic roles of women as mothers were absorbed into various nationalist debates concerning the future progress of the Indian nation.

By 1920, most nationalist reformers accepted the unconscious distinctions between familial and nonfamilial sexuality embedded in Western medical discourse, as well as the oppositions between chaste and unchaste women that were, in turn, now linked to medicalized conceptions of normality and abnormality. Even Gandhi idealized the chaste _Sita_ as the role model for both male and female nationalists and expelled the Barisal prostitutes from participation in the Bengal Provincial Congress Committee. Clearly, for most nationalists and reformers of the 1920s, the respectable icon of the self-sacrificing mother figure excluded the _devarassi_, whose sexual relations with their patrons were increasingly interpreted as a recent degeneration from a pure past when they were supposedly chaste temple servents and dancers.
Prostitution

Given the prominence of the eugenics model in international and national health policies, it is perhaps not surprising that the leader of the anti-devadasi campaign in Madras was a prominent doctor. In fact, she was the first woman doctor to graduate from medical school in India, Dr. Muthulakshmi Reddy. Dr. Reddy was a prominent member of the Women’s India Association, an editor of Stri-Dharma, a member of the British Social Hygiene Council, and finally the first female member of the Madras Legislative Council. Born into a Brahmin family of modest means in Pondicherry, she was sent to a boys' school, where she excelled in the sciences, passing among the top ten students in matriculation exams and finishing her intermediate schooling at Pondicherry Boy’s College. Admitted to Medical College in Madras in 1907, she obtained her medical degree in 1912. In the next ten years, she set up her own obstetrics and gynecological practice, married another doctor, and completed postgraduate study in London in 1925 (Reddy 1964, 45). Although specializing in the treatment of cancer in London, she became active in the Child Welfare Movement there and joined the British Social Hygiene Council, of which she remained a member throughout her life. Her year in London persuaded her that lack of hygienic practices of Indian mothers and venereal diseases were among the most important medical dangers facing India and other emerging nations. Upon returning to Madras, she was elected the sole woman member to the Madras Legislative Council in the anti-Brahmin Justice Party Ministry headed by the Raja of Panagal. From this position, Dr. Reddy campaigned relentlessly against the devadasi institution until she resigned in 1931 to protest Gandhi’s arrest. She introduced the law that was instrumental in spelling an end to the devadasi institution, the Madras Hindu Religious Endowments Act of 1929, which unlinked temple service from the granting of jumla lands and revenue rights to the devadasis. In her medical practice and legislative career, Dr. Reddy was a major proponent of eugenicist views, by which the application of hereditary principles to practices of sexuality, childbirth, and socialization was thought to increase national fitness and economic progress. In the legislative debates on the devadasi land grants, she criticized the devadasi system thus:

It is beyond my comprehension how in a country which can boast of innumerable saints… irresponsibility in vice has been ignored and even encouraged (through the devadasi system) to the detriment of the health of the individual and of the future race. … Modern science has proven that continence is conducive to the health and wellbeing of the individual, family, and the future race, and that sexual immorality harms both the individual and the community. Venereal disease is responsible for 50 per cent of child blindness and deafness, much insanity, and other diseases such as paralysis, liver and kidney diseases and heart disease… and it is a racial poison capable of being transmitted to one’s children, the second, or even the third generation. (Reddy 146-47)

In Stri-Dharma, Dr. Reddy further editorialized on the devadasi "problem," attempting to convince Indian feminists and social reformers that the institution was an example of backwardness, disease, and irrational tradition:

I would advise my country people to shut the stable before the horse is stolen. Who does not realize that "prevention is better than cure?" Why then this nervousness on the part of our people to put an end once and for all to a practice that disfigures and defiles our sacred temples, that contaminates the youth of the country, a practice that brings ill-health, disruption, discontent into happy families and is thus a menace to family life and finally poisons the future race through venereal diseases. If we want to come up as a nation to command the self-respect of the world, I feel very strongly that all the social diseases must be cured, because to my knowledge India is the only country in the world that conduits a particular class of girls into prostitution. … What is more deplorable is the prevalence of the popular belief that this iniquitous custom has the sanction of our holy religion—hence should not be interfered with…. Hindu Society…. is neglecting a most dangerous disease and so deserves the serious attention of all healthy-minded citizens, of all earnest reformers, patriots, and statesmen. Only an… amendment of the Hindu Religious Endowments Act will save the future race from further mental, moral, and physical decay. (Stri-Dharma 1927, 103)

In Dr. Reddy’s conception of the “nation,” medical health and moral boundaries become conflated. The future of the nation and the health of the “race” were linked to sexual continence, motherhood, and the hygienic education of young girls and women. Although Dr. Reddy was more explicit in her social hygienic views than many others, most of the nationalist intelligentsia shared her views linking motherhood, female suffrage, increased female education, and national independence. The health of the nation was linked to the goal of swaraj through self-governance over physical, moral, and spiritual aspects of life. Hence those aspects of Hinduism that exalted sexual continence and purity were praised, while those traditions that viewed female sexuality as potentially auspicious, if controlled, were criticized and rejected. Dr. Annie Besant, the president of the Theosophical Society, leader of the Home Rule League, and first editor of Stri-Dharma (from 1917 to 1925), opined that the devadasis were originally virgin devotees attached to Hindu temples whose status had fallen in recent centuries due to invasions (Besant 1919). K. Gandhi, a cultural nationalist in many respects, viewed the abolition of devadasis as a positive step:

The whole of enlightened public opinion that is vocal is against the retention of the system in any shape or form. The opinion of the parties concerned in the immoral traffic cannot count. ... The Devadasi system is a blot upon those who countenance it. ... I hope that Dr. Reddy will receive the hearty support of all lovers of purity in religious and general social life. (Reddy 115-14)
For most of the nationalist intelligentsia, it was only the revered mother role that was emphasized, while other roles for women were cast into shadow. Another important political force in Madras politics in the late colonial period was the anti-Brahmin movement, which also condemned the *devadasi* institution, but for apparently different reasons. Anti-Brahmin activists in early twenty-century Madras promoted the nationalist idea of a separate country, Dravida Nadu, which would encompass all non-Brahmin castes in the region, theoretically excluding South Indian Brahmins and all North Indians. The anti-Brahmin movement became an important political and intellectual force in the Madras Presidency at the turn of the century, and remained so throughout the twentieth century. The strength and persistence of the anti-Brahmin movement in Madras has been explained by the numerical, commercial, and landed predominance of non-Brahmin castes in Tamil Nadu, who were called that this predominance was eroded by the professional gains made by Brahmins through colonial education. Anti-Brahminism acquired a mass appeal after the creation of the Self Respect Association in 1926, which was founded by Periyar, one of the most prolific and erudite leaders of anti-Brahmin reform organizations.

The grievances of the various anti-Brahmin movements centered around the dominant position accorded Brahmins in social hierarchy by Hindu scriptures, the pre-eminence of Brahmins in ritual practice, and the influential roles played by members of this caste in the public spheres created during colonial rule. Such leaders as Periyar and Amrutha argued that “traditional” Brahmin status dominance enabled and reinforced their “modern” professional dominance. Through its various later transformations into the Dravida Munnetra Kazhagam and the Annuradha Dravida Munnetra Kazhagam, the anti-Brahmin movement emerged as the most important political force in late colonial and post-colonial Tamil politics. Non-Brahmin reforms were the central focus of the Justice Party, which predominated in the Madras Provincial Legislative between 1925 and 1936, the years during which the most anti-*devadasi* laws were enacted. Elements of the Justice Party merged with elements of the Self Respect Association to form the Dravida Munnetra Kazhagam in 1947, which became one of the major political parties in Tamil Nadu in the post-Independence period.

Anti-Brahmin activists attacked almost all symbols of scriptural Brahminism in a series of inversion rituals that were meant to shock society into awareness about caste hierarchy. These included the denigration of Brahminic norms; abuse of Hindu deities, epics, and scriptures; and derision of the acts of godmen who claimed divine inspiration. The Self Respect movement that Periyar created in 1926 to raise the pride of backward castes promoted intercaste marriages, widow remarriages, and marriages of consent. These marriages were conducted without Brahmin priests and recitation of religious texts and did away with the ceremonial of *tali* tying. Some also took place at midnight, an auspicious time in Brahminical astrology. Periyar also raised questions concerning the relationship between the monogamous family and norms of chastity prescribed for and enforced upon women. He viewed women and lower castes’ lack of property as the cause of their ritual low and impure status (Anandhi 1991).

Periyar and other leaders of the anti-Brahmin movement articulated a notion of bounded Tamil community. However, this notion was constituted by a layered concept of community identity and “honor.” At the center of this identity was the *sudra* of Tamil Nadu, and in successive concentric circles around this center, Tamil Christians and Muslims, Tamil-speaking Scheduled Castes, and other South Indian non-Brahmins. Groups clearly beyond the pale were Brahmins from Tamil Nadu and other parts of South India, as well as all North Indians; these groups were deemed “Aryans.” Periyar called for a separate country in which the Dravidian as *sudra* would enjoy primacy, and Christians, Muslims, and Scheduled Castes would also find a place. As for the “Aryans,” their ideological hold through Brahminism over the Dravidian Tamils was to be broken and, at times, he said that they should be expelled from South India.

Although Periyar viewed property as the basis of the caste system, and the nonproperty of women and lower castes as the reason for their subordination, he strongly opposed the *devadasi* system. Periyar and other leaders of the anti-Brahmin movement saw it as almost equivalent to prostitution. Women who were dedicated to temples and trained in classical dance and music were almost invariably from non-Brahmin castes. Their patrons, however, were usually Brahmins, and indeed a wealthy Brahmin patron was the desired ideal of most *devadasi* households. Periyar’s disapproval of the *devadasi* was due to his view that it represented the prostitution and concubinage of *sudra* women for Brahmin men. He argued that Brahminical codes had treated non-Brahmin women as *dasis* (prostitutes) of gods. Periyar argued that the word *sudra* implied in the scriptures that someone was born out of wedlock, while *parayan*, or untouchable, carried no such connotation. This, he argued, showed that the *sudras* were more dishonored by Brahmins than were the untouchables, because they had mythically arisen from “dishonorable” unions between Brahmin men and non-Brahmin women. He saw the *devadasi* institution as an example of Brahminical dominance over *sudra* women, and therefore as a tradition that had to be reformed in the emergence of Dravida Nadu. Hence, while appearing to support the liberation of women, the ideology of the anti-Brahmin movement placed the control over women’s sexuality securely within the boundaries of the *sudra* community.

A few former *devadasis,* apparently believing Periyar’s feminist rhetoric, joined the Self Respect movement, becoming important activists for the anti-Brahmin cause. For example, Mooyartham Ramanirtham Annamaiyar, who was born in 1883, brought up in a *devadasi* family in Thanjavur district and initiated as a *devadasi* at puberty, later left the community to join first the Congress Party.
in 1920 and then the Self Respect movement, after Periavar’s break with Gandhi and the Indian National Congress in 1926. She acted as a relentless campaigner against what she viewed as women’s sexual and domestic slavery, elaborating how Brahminical Hinduism and upper-caste men were legitimizing women’s oppression. In a widely read Tamil novel that is thought to be autobiographical, she wrote, “The women of the lower castes have been suppressed in all spheres. The legitimisation of the suppression given through the shastras is evident in the manner in which women have been assigned the role of religious prostitutes and concubines in the devadasi system” (Anandhi 1991).

Unfortunately, Annapariv, who joined the Self Respect movement apparently out of its liberatory potential for women, lived to see intercaste marriages, free choice marriages, and the critique of female chastity and propriety jettisoned by the anti-Brahmin movement when it became a formal political party, the Dravida Munnetra Kazhagh (DMK), in 1947, on the eve of India’s independence. One of the first pieces of legislation of the newly independent DMK-led provincial government in 1947 was the Madras Devadasi (Prevention of Dedication) Bill, which made any performance of the devadasi dedication ceremony a penal offense.

Thus by the late 1920s, there were a number of converging discourses that linked together community identity with communal or national honor and articulated these with a conception of sexual boundaries that was tied to monogamous familial sexuality. Missionaries and Western medical doctors opposed commercial prostitution in both medical and moral terms. This condemnation converged with a modernist and eugenicist conception of the nation, most clearly articulated by Dr. Muthulakshmi Reddi and the Women’s Indian Association. In addition, the anti-Brahmin movement that played such an important part in the political arena of Madras and Tamil Nadu in the late colonial and post-colonial periods also opposed the devadasi institution on the basis of defending adra honor. Finally, men from the devadasi community, who occupied a subordinate position as musicians and accompanists to the devadasi’s dance ceremonies, joined the Self Respect movement in large numbers. The aggressive anti-Brahminism and anti-ritualism of the Backward Classes Movement of the south provided the men of this group with a powerful ideology to fight for dominance both within the household and the wider society. Men of the devadasi community also gained from the denial of property rights to female devadasi members as they could now inherit the shares of land that had earlier been kept aside for their sisters (Srinivasan 1933). Pressed from both above and below, the criminalization of devadasis was an almost foregone conclusion.

Actual laws criminalizing devadasis in Madras included a 1924 amendment to the Penal Code to make the dedication of girls under eighteen a crime, the 1929 Amendment to the Madras Hindu Religious Endowment Act, which disallowed devadasis from being renumerated in land and revenue-collecting rights on temple lands, and the 1947 Madras Devadasi (Prevention of Dedication) Bill. All these laws were introduced and passed in a Legislative Assembly dominated by the Justice Party, the successor to the Dravida Munnetra Kazhagh, or by the DMK itself in 1947. The crucial bill spelling an end to the devadasi institution was the 1929 Amendment, which eliminated any financial incentive accruing to the devadasi institution, and was introduced by Dr. Reddy during her term as the Deputy President of the Legislative Council. The amendment detached the inam grants—with land and revenue rights—from the requirement of temple service (Jordan 1989, 276). Future and potential generations of dancers were therefore precluded from receiving any lands whatsoever. By the time the law preventing any dedication of women to temples was passed in 1947, most devadasis had stopped dancing and the institution was completely eroded.

The devadasis themselves provided a vigorous defense of the system during the 1927 Legislative Debates. They first differentiated themselves from commercialized prostitutes per se, objecting to reform efforts to equate the two systems. If some devadasis were practicing prostitution, then existing legislation against prostitution was in place to deal with it, they argued. Rather than focusing on their dance activities and traditions, they dealt almost exclusively with the religious and ritual side of their lives, emphasizing that the dedication ceremony was a means of making a lifelong commitment to God and the Hindu religion. The marriage of religiously inclined individuals to deities was found throughout devotional Tamil literature and they pointed out the importance of dance aesthetics to the worship of both Siva and Vishnu. They also argued that since their right to property would be eroded by the proposed legislation, their freedom of worship would be infringed upon (Government of Madras 1927).

However, the devadasis were not able to mount an effective challenge to the increasingly hegemonic discourse of Western medicine with its hygienic discourse that conflated public health with private morality, and which used apparently universalistic and scientific proof of the causal relation between prostitution and deviant sexuality and venereal disease. Neither were they able to effectively challenge the male members of their own community who viewed the devadasi institution as a mark of community dishonor and subservience to Brahmins, and who may also have been somewhat jealous of the devadasis’ relatively greater fame and acclaim. In addition, the Brahmins, who formed the community from which the patrons of devadasis were typically drawn, were too numerically, economically, and politically weak in Tamil Nadu to offer an effective challenge to the views of the anti-Brahmin movement. Although they had gained an early lead in the professions during the colonial period, they only constituted 3 percent of the population of Tamil Nadu, were concentrated in two major river valleys in the presidency, and had to share economic power with a variety of other non-Brahmin castes.

By the late 1940s, the devadasi institution was virtually dead, while their
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dance. Bharat Natyam, was unlinked from temple service and reborn in a more "respectable" form. The devadasis themselves fared quite badly. Although a few were able to marry wealthy patrons, and some were able to maintain themselves as dance teachers, the majority became increasingly impoverished and destitute.

What ties these various anti-devadasi discourses together is the idea that women's sexuality belongs to and is the property of the community, rather than to the individual who has the right to dispose of that sexuality. The public health model that idealized the role of motherhood repeated the distinction between respectable versus unrespectable sexuality that socially organized the class relationships of women through their sexual relationships to men. It tied the expression of female sexuality to an idealized mother figure, who was envisaged as the icon of tradition, the site of spiritual solace, and the modern mother of future generations. The anti-Brahmin movement, while articulating connections between propriety and property, caste and gender oppression, still viewed women’s sexual choices as a matter of community honor and anti-Brahmin closure. Honor for women was thus aligned with the suppression of concubinage from within the siddha community. The notion that family and home were the microcosm of the nation imbued the domestic sphere in each community with the imagery of cultural defense against outsiders, and hence pulled the question of sexuality into a discourse concerning intra- and intercommunity boundaries. In all these discourses, it was the motherhood figure who typically became the metaphor of ideal femininity, an icon that signaled the respectability and power of the nationalist middle class through its symbolic and legal exclusion of the unchaste female. Through the reform movement that suppressed the devadasi institution, as well as instituting other legal changes for middle-class women in India, the subcontinent’s patriarchal structures were reconstituted in a new, modernized form.

Notes

1. Tamil Nadu is the post-Independence term that applies to the region in south-east India around Madras. During the colonial period, it was referred to as the Madras Presidency.

2. This was very evident in debates concerning raising the age of marriage in the 1920s. See J. Whitehead, “Modernizing the Motherhood Archetype: Public Health Policies and the Age of Marriage (Kandha Act of 1929),” in State, Sexuality and Social Reform, ed. P. Uberoi (Delhi: Sage Publications, 1996).

3. The siddhas were the fourth and lowest caste group in a ritual hierarchy, which placed Brahmins in the top ritual and status position. In Tamil Nadu, many economically and commercially successful castes were non-Brahmin, and after the British census operations starting in 1880, they were considered a part of the siddha class. There

was not a one-to-one correspondence between ritual status and economic predominance in either pre- or postcolonial India. In a number of regions, siddha castes may be economically predominant in terms of landownership and commercial success.

4. "Scheduled Castes" is the term the British government, and later the Independence government, applied to groups who were considered untouchables. Gandhi referred to them as "harijans," or the children of god, a term which many of them find patronizing.

5. The similarities between a eugenicist conception of the pedigree and feudal conceptions of family honor has been often noted. Both seemed to have fulfilled the same functions, in that they regulated the sexual choices of women and defined respectable and healthy sexuality as that contained within monogamous marriages. See M. Foucault, The History of Sexuality, vol. 1 (New York: Penguin, 1980).

6. In the precolonial period, Brahmins constituted only about 3 percent of the Tamil population, much less than in northern India. The extent of their control over land was also less than in Kerala, Malabar, Uttar Pradesh, and Bihar and they were largely concentrated in two river valleys, the Kaveri and Tamiraparani. Even in these regions, they shared land control with other groups. For this reason, the anti-Brahmin movement in Tamil Nadu was able to mount a strong challenge to early colonial Brahmin predominance in Madras professions and politics, which the Brahmin community was never able to successfully counter. Indeed, the DMK and ADMK (Adi Dravidas Munnetra Kazhagam) have successfully formed most of post-independence state governments in Tamil Nadu. See N. Subramanian, "Ethnicity, Populism, and Pluralist Democracy: Mobilization and Representation in South India," Ph.D. diss., 1995, Cambridge, Mass., MIT.

7. In fact, the most vociferous demands for devadasi reform came from within the community and not from the pernemal or “pure” section.


References

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