Imphal Times

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The state today: blame the representatibes

The state today is reeling under serious crisis. Bandh , agitations and general strike on various issues have once more become a daily affairs. Students' now started facing disturbances, proposed midterm exam have to be postponed. private entrepreneurs have to remain shut and the old lady who use to come at Imphal Khwairambandh Keithel to earn a day meal for their children now were once more left with tears on their eyes. Bandh and general strike which had already forgotten by the people for nearly 2 and half years now is hunting the people once again.

The previous government led by Congress received maximum criticism due to the frequent bandh and blockade. And after the coming of the BJP government in March , 2017, the Chief Minister N. Biren Singh first agenda was to eradicate the bandh culture and he had shown that for around two years. There were relieves to the parents of the state as they felt safe to the career of their children. The private entrepreneurs felt that they can grow their business and the social thinkers thought that daily wage earner who live on hand to mouth would no longer starve.

It was after this government nearly completed 2 and half It was after this government nearly completed 2 and nair years that the same regalia that had witnessed by the people of the state during the previous government regime seem to return. After some Ministers and some BJP MLAs started demanding replacement of the Chief Minister, people started witnessing any things like bandh blockade, general strike etc. While saying so it is not that there might be possibility of the rebel MLAs inciting the various sections of people to create chaos in the state. But what Imphal Times felt is that the lack of coordination among the cabinet Ministers, MLAs had already made the government helpless in running the governance. At present the farmers are waiting for water, the manual

sand miner labourers are left with no choice but to go with the intense agitation by excavators and truck owners. As those running the government fails to seat together

and discussed the issue together to make a collective decision in solving the problem, how on the earth would one expect running a good governance. The present chaos in the society is the result of the

political instability in the state. It is over 2 months and keeping it in the way as it is without finding any solution is nothing but an attempt to crumble the government so that the center could impose President Rule in the state. Interlocutor to the government of India RN Ravi had taken oath of office as the overnor of Nagaland and when acting as the interlocutor, RN Ravi had made many assurances to settle the Naga issue.

Solving the contentious issue of the NSCN-IM - what would have been the best time. Obviously it will be the president rule.

geometric

Written By: John L. Berggren Craig G. Fraser Menso Folkerts Wilbur R. Knorr Jeremy John Gray

The geometric problems in the papyri seek measurements of figures, like rectangles and triangles of given base and height, by means of suitable arithmetic operations. In a more complicated problem, a rectangle is sought whose area is 12 and whose height is 1/2 + 1/4 times its base (Golenishchev papyrus, problem 6). To solve the problem, the ratio is inverted and multiplied by the area, yielding 16; the square root of the result (4) is the base of the rectangle, and 1/2 + 1/4 times 4, or 3, is the height. The entire process is analogous to the process of solving the algebraic equation for the problem $(x \times \frac{3}{4}x = 12)$, though without the use of a letter for the unknown. An interesting procedure is used to find the area of the circle (Rhind papyrus, problem 50): 1/9 of the diameter is discarded, and the result is squared. For example, if the diameter is 9, the area is set equal to 64. The scribe recognized that the area of a circle is proportional to the square of the diameter and assumed for the constant of proportionality (that is $\delta/4$) the value 64/81. This is a rather good estimate, being about 0.6 percent too large. (It is not as close, however, as the now common estimate of $3^{1/2}$, first proposed by Archimedes, which is only about 0.04 percent too large.) But there is nothing in the papyri indicating that the scribes were aware that this rule

was only approximate rather than exact. A remarkable result is the rule for

the volume of the truncated pyramid (Golenishchev papyrus, problem 14). The scribe assumes the height to be 6, the base to be a square of side 4, and the top a square of side 2. He multiplies one-third the height times 28, finding the volume to be 56; here 28 is computed from 2 × 2 + $2 \times 4 + 4 \times 4$ Since this is correct it can be assumed that the scribe also knew the general rule: $A = (h/3)(a^2 +$ $ab + b^2$). How the scribes actually derived the rule is a matter for debate, but it is reasonable to suppose that they were aware of related rules, such as that for the volume of a pyramid: one-third the height times the area of the base. The Egyptians employed the equivalent of similar triangles to measure distances. For instance the seked of a pyramid is stated as the number of palms in the horizontal corresponding to a rise of one cubit (seven palms). Thus, if the seked is 51/ and the base is 140 cubits, the height becomes $93^{1/3}$ cubits (Rhind papyrus, problem 57). The Greek sage Thales of Miletus (6th century bce) is said to have measured the height of pyramids by means of their shadows (the report derives from Hieronymus, a disciple of Aristotle in the 4th century bce). In light of the *seked* computations, however, this report must indicate an aspect of Egyptian surveying that extended back at least 1,000 years before the time of Thales

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Dr. Muthulakshmi Reddi: A Powerful Face of Nationalist Feminism

Courtesv The Wire By : Kamala Ganesh

She has a visible presence in Chennai; her statue stands in the premises of the Cancer Institute at Adyar, a leading centre for oncology in the country. The road leading to Besant Nagar from Adyar bridge is named after her. Yesterday, the Tamil Nadu government announced that her birthday would be celebrated every year as 'Hospital Day'

For the millennials and postmillennials in the city, however, Dr. Muthulakshmi Reddi is a hazy, hearsay figure of the nationalist era – feisty and articulate, but as to what exactly about, they would have to scratch their heads and think. On the other hand, the older generation of politically aware denizens of Tamil Nadu know about her accomplishments, but mostly as a chronological narrative of positions held and organisations established.

From the vantage point of hindsight, I think there is no doubt that Muthulakshmi was a powerful face of nationalist feminism in the first half of the 20th century, with all the complexities that this entailed. 20th Her voluminous speeches and writings are indeed ideologically driven, with elements from the discourses of social reform and nationalism combined with empathy for the issues espoused by the Justice Party and a bent towards international feminism. But it is in her concrete actions, specifically in establishing the Avvai Home in 1932 for destitute and abandoned girls and women, and the Cancer Institute under the aegis of the Women's Indian Association (WIA) in 1952 that we see the unique nature of her contribution. The protocols and ethos she created in these institutions are exemplars of an ethic of care, inspired both by feminism and Gandhian nationalism. But more on this later in Pudukkottai Born

Chandramma a former devadasi Chandramma, a former devadasi and Narayanaswami Iyer, principal of the Maharaja college, Muthulakshmi had to surmount huge obstacles created by her gender and caste, and struggle to get an education. In 1912, she became the first woman medical graduate from the

Madras Presidency: she went on to become an obstetrician. In an interview in 2010, Sarojini

Varadappan, a renowned social worker who worked closely with Muthulakshmi, remembers her as an impressive, even formidable, personality. Immaculately dressed in heavy Kanjeevaram saris pinned with a brooch, and shining diamond earrings, Muthulakshmi had a flourishing practice delivering the babies of all the rich Mylapore professionals.

Influenced by the women's movement and the national movement, Muthulakshmi turned her attention to politics and public life. From 1926 to 1930, she was a member of the legislative council in British India, the first woman to be so nominated. She became the first woman in the world to become the Deputy President of a legislative council

As a legislator she was an indefatigable campaigner and lobbyist for women's rights on a range of issues, including medical inspection in girls schools, exemption from school fees for poor girls, maternity and child welfare, and reservation for women in various structures of civic administration. She was closely associated with the All

India Women's Conference and the Women's India Association. She edited the multilingual quarterly journal, *Stree Dharma*, started in 1918. Most notably, Muthulakshmi

brought in legislation to abolish brought in legislation to abolish the *devadasi* system and child marriage. This campaign triggered stiff opposition from Congress stalwarts like Rajaji and S. Satvamurthi, When Satvamurthi argued in the Legislative Council that the devadasi system was an ancient religious custom with devadasis being custodians of the traditional arts, she famously retorted that if such a caste was indeed necessary and since the devadasis had done it for so long, why did the Brahmin women not take over?

Muthulakshmi would not have imagined that decades later she would be criticised by contemporary feminists and her campaign would be seen as a patronising gesture. Sociologist Amrit Sriniyasan's 1985 article 'Reform and Revival: The devadasi and her dance', was followed by much writing on the devadasis, their original putative respected social status and their later 'fall', and the loss for the classical performing arts traditions of South India.

In particular, Muthulakshmi's campaign was criticised as it was perceived as disenfranchising devadasis from traditional privileges and denying them subjecthood and agency. Historian S. Anandi, while lauding her undeniable commitment to women's rights, sees her as 'othering' devadasis and moralising on their their

nowhere to go. Immediately she took them into her own home and that became Avvai Home, later shifting to its own premises. It has since expanded to include a school and also a teacher's training school, and is one of the early and enduring examples of formalising the ethic of care in a public voluntary institution.

The other institution, the Cancer Institute, is an even brighter testimony to Muthulakshmi's qualities of head and heart. I experienced this personally in 2005, long after she had passed on. The institute was like no other medical institution I knew without the feel of either a government or private hospital. As I went through my own treatment, the institute's underlying approach gradually unfolded: accord priority to saving life at all costs, cutting out the frills, advanced technology for core treatment alone, no differentiation between different classes of patients in medical treatment. Much has been written about the

Cancer Institute as a pioneering oncology centre in the country its outstanding accomplishments in acquiring cutting edge technology, developing stringent protocols and yet giving affordable care; its challenges

and limitations. What struck me, above all, is how Dr. V. Shanta, at its helm for many decades, has kept patient care medical, psychological and social – at the centre. She verily embodies an ethic of care over and above medical protocols Shanta, however, attributes these features of the Institute to the



dynamism of her personality made this a major activity of WIA for many years, says Sarojini Varadappan.

Muthulakshmi went about her mission with, well, missionary zeal. Her son Krishnamurthi, then a doctor in the Royal Cancer Hospital in London, was not keen to get involved. In an interview with me in 2010, weeks before his death, he remembered with a smile, "I got a telegram, 'Mother serious. Start immediately'. I came back to find her hale and hearty and what else. I joined her mission."

No one - doctors, funders or the government – would take Muthulakshmi seriously. They thought it was a waste of time. There was a complete lack of public awareness about cancer as an illness curable with specialised treatment. Among the various documents of the institute is a printed appeal in 1935 to the King George V Fund Committee from five women's organisations in the city, mobilised by Muthulakshmi. She was tireless in her crusade



liberation from the clutches of the

system as the only way out. But look at it from Muthulakshmi's perspective. Given the humiliations she underwent, unsurprisingly she saw the devadasi system as a social evil. In fact, one could infer that to a large extent, her personal anger was what gave her campaign its sharp edge. Modern education was, for her, the answer again understandable given her own

achievements in her profession and in public service. The sincerity of her efforts to improve the situation of devadasi women is undeniable. Her tone inevitably echoed that of the entire social reform movement in that era, warts and all; it did not eclipse the basic drive for emancipation and equality.

In fact, Avvai Home and Orphanage, that venerable institution established by Muthulakshmi in 1931, started spontaneously when three girls from Namakkal, from *devadasi* families, arrived unannounced at her doorstep one night. They had run away from home with

inspiration and efforts of its founder, Dr. Muthulakshmi, whom she refers to as Mother, and her son Dr. S. Krishnamurthi who was the force behind the institute in Muthulakshmi's final days and after her passing. Krishnamurthi was a mentor to Shanta, she was his loyal colleague and together they steered the institute to reflect the values and ethos of Muthulakshmi, while striving

for excellence. Muthulakshmi herself was inspired to start the institute as a result of a personal bereavement. She lost her sister to undiagnosed cancer in 1923. She had nursed her through her last painful days. Amidst her grief, she vowed to establish a specialised hospital for the treatment of cancer. She was inspired by the emerging advances in cancer treatment in the West and in 1925 spent a year at Royal Marsden Hospital in London, to specialise in the subject. She got the Women's Indian Association involved in her mission. It was an unusual issue for a women's organisation to take up but the sheer force and and it was through the force of her individual convictions and the mobilisation of her social and political connections that Jawaharlal Nehru laid the foundation stone in 1952 for the first specialised hospital for cancer in South India. The character and thrust of the

institute thus become comprehensible only through the personal lives of its three protagonists and their inter-relations. The micro worlds of family and friendship and of ideology and emotion fuelled the dynamism of the macro arena of advanced oncology.

And behind the technological and organisational strengths of the institution lies an ethic of care that has evolved through the personal concerns of Dr. Muthulakshmi.

While the larger social and historical contexts no doubt impacted upon Dr. Muthulakshmi Reddi's life trajectory, in many ways, her story exemplifies the idea of ultimately the personal being the political.

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