

Female Education and Domesticity in Colonial Lushai Hill

Lalramnghaki Ralte

Research Scholar of History & Ethnography, Mizoram University

&

Dr. Hmingthanzuali

Assistant Professor of History & Ethnography, Mizoram University

Abstract: *In the traditional Mizo society, the roles of men and women were demarcated within the public and private sphere. Prior to colonial intervention, the life of women centered within the domestic domain. With the advent of the colonizers, the domestic order was redefined and associated with femininity within the new patriarchal order. The missionaries from the Welsh Calvinistic Church and the Baptist Missionary Society played a crucial role in introducing Western education and healthcare as a part of their missionizing project. Though initially met with resistance, female education succeeded due to the efforts of missionaries. This led to the establishment of girls' school and gradually expanded to nursing education. Under the charge of women missionaries, these trained women played an important role in spreading western religion and medical practices. The study explores the ways in which the ideal women was constructed through the curriculum for female student and caregiving professions. Though educated and professionally trained, they were still confined to traditional feminine roles. This paper aim to highlights the contribution of women missionaries and Mizo women in carrying out the colonial project while contributing to understand colonial patriarchy in Lushai hills. By examining women's education and 'feminine' profession, the study reveals the 'civilizing' agenda of the colonizers to redefine 'Mizo women' and reinforce patriarchal control.*

Keywords: *Female Education, Domesticity, Colonial Patriarchy.*

Introduction

In the nineteenth and the early twentieth century, the construction of femininity through domesticity represents the intersection of gender and

imperial power within colonized state. Historical scholarship has extensively demonstrated that colonial expansion went beyond territorial and economic domination. It systematically restructured gender relations and redefined domestic space and femininity within existing patriarchal order. The link between women and domesticity was not entirely a new social construct but has a long genealogy continuing prior to the arrival of colonizers.¹ In the early Mizo society, gender was an important base of role allocation. Hunting, agriculture, and defense were men's job. Procreation, bringing up children and household chores were considered as the responsibility of women.² The gender-based division of labor revealed the culturally determined socially constructed power relations in traditional Mizo society. Joan Kelly in her essay 'The Doubled Vision of Feminist Theory', argued that economic and gender systems interact to produce social and historical experiences; that neither system was casual, but both 'operate simultaneously to reproduce the socioeconomic and male-dominant structures of . . . [a] particular social order'.³ Since the public sphere was considered as masculine, men usually occupied administrative position while women had no voice in the village and family administration. Old sayings such as "Hmeichhe Thu Thu Ni Suh, Chakai Sa Sa Ni Suh", (crab's meat is not a meat, so also women's word is not a word) and Hmeichhe finin tuikhur ral a kai lo" which means "a woman's wisdom does not reach to the other side of the village well" reflects the position of women. As gender allocate roles, there is a clear cut a labour division between male and female. Sangkima, a prominent mizo historian stated that in fact there was a higher distinction based on gender rather than social class.⁴

Colonial intervention institutionalized new form of patriarchy under new institutions. The four cardinal virtues prescribed for 'True Womanhood' in "The Cult of True Womanhood 1820-1860" includes 'piety, purity, submissiveness and domesticity'.⁵ This ideology of domesticity was linked with women and emerged a means of controlling 'native' women in colonial states. Anne McClintock, in reference to the work of missionaries suggested the function of mission station as a site for 'transforming domesticity rooted in European gender and class roles into domesticity as controlling a colonized people'.⁶ This was also evident in the Lushai Hill. The arrival of the Christian missionaries brought changes in the position of women through the introduction of education. The opening of girl's school gave them an opportunity to promote the idea of Victorian womanhood while evangelizing. As the number of converts increased, there was a huge demand for workers. The early converts were trained and employed as evangelists, teachers and nurses. The majority of the employed local women were trained in nursing. These trained women were useful in spreading the Western knowledge and practice of medicine while embodying an ideal Christian woman. The women missionaries and mission schools reinforced domestic roles as it enabled female literacy and limited professional training. Nursing schools and welfare clinics extended caregiving into hospitals

and villages. While new educated Mizo women were produced, they remained subordinated within the new patriarchal structure. By examining archival sources and missionary accounts from the approach of gender history, the paper investigates the link between domesticity and female education in colonial Lushai Hill from a gender historical approach.

Colonial encounter and the introduction of female education

The Charter Act of 1813 ended the monopoly of the East India Company and paved the way for a new era. It began the activities of missionaries in colonial India. The Christian missionaries in north-east India had a profound impact, changing the landscape of the region. Out of the northeastern states, Mizoram was the last state to come under colonial rule. Following the annexation of the hills in 1891, the northern half was under Assam while the southern portion was governed by Bengal. In 1898, the British decided to merge the two areas into a district under a Superintendent as Lushai Hill. The same year saw the start of a settled administration in the district, paving way for the missionaries. The colonial demarcation was then followed by the missionaries under which the north was under the Welsh Calvinistic Church and the south was under the Baptist Missionary Society.

The Christian missionaries brought transformation in several aspect of the society. Through education, medical work and evangelism they were able to bring changes. Although the colonial authority introduced modern facilities in the region, it was solely for the workers under the government. They showed limited concern towards the local population as they mainly focused on administration. With evangelism as their main purpose, they did not see themselves as the agent of the colonial project. They often believed that Christianity was closely related to Western civilization and that the global expansion of Western civilization would benefit everyone.⁷ Under the missionaries, colonialism accelerated in the Lushai Hill. Despite having different agendas, the colonial administrators and Christian missionaries benefitted from each other and co-operated in areas where their interest aligned.

Prior to the arrival of the missionaries, knowledge and wisdom of the past were preserved through oral tradition. Mizo language was reduced into written form by J.H. Lorrain and F.W. Savidge, the two pioneer missionaries. Before the advent of the missionaries, a few schools set up for the children of the sepoys by the colonial authority.⁸ They were not concerned with educating the masses on the hill. With a proselytizing spirit, the missionaries realized the significance of education to spread Christianity effectively. Soon after, the education of the people on the hill was handed to the missionaries by the colonial administrators. On the order of Sir Bamfylde Fuller, Chief Commissioner of Assam along with John Shakespear, the Superintendent of the Hill the mission schools were merged with the government school.⁹ The early mission school focuses on reading, writing, arithmetic and the Scriptures. Within a few years, schools

were opened in different parts of the Hill. Since majority of the students were boys, educating the female population became the concern of the missionaries.

Consequently, female education was introduced. As the female population was largely engaged in domestic work, they believed that they would have no time to attend school. The education of girls was perceived as unnecessary and received little support from the local population including women. They saw little value in sending boys to school and even less so for girls. While boys occasionally secured government or mission jobs, girls were not expected to pursue such opportunities. Additionally, young men expressed reluctance to marry girls who had received formal education.¹⁰ The Mizo man resisted the education of women until missionaries intervened. The curricula were designed to conformed to the patriarchal expectations in which 'women's craft' was introduced. However, imparting education to Mizo women was significant in the broader mission projects of conversion and cultural transformation.

Women Missionaries and Education: 'Domesticity' as Female Curriculum

The female missionaries spearheaded the education of Mizo women, while maintaining patriarchal authority. The women in the mission field were originally sent as wives of the appointed missionary. During the eighteenth and nineteenth centuries Europe, ideas about femininity often presented woman as the moral center of modern society. The ideal Christian woman was imagined as embodying traditional morality and the qualities of progress and modernity.¹¹ The evangelical wives were integral to the success of the missions as 'they bore the joint responsibilities of representing British and religious femininity.'¹² The efforts of the missionaries in female education were limited. It was after the arrival of the women missionaries that significant progress was made.

In the north Lushai hills, Mrs. Katherine Jones, the wife of Rev. D.E. Jones, took up the welfare of women and had a keen interest in educating women in health and hygiene, infant care and other crafts. Mrs Lorrain and Mrs Savidge, the wives of the two pioneering missionaries were actively involved in women's issues in the south. After the arrival of Miss Clark and Miss Chapman the education of women was taken by them in the South Lushai hills.

In 1904, a co-educational mission school at the mission compound in Aizawl was set up. Only a few girls attended due to a strong opposition against female education. With the special effort of Mrs Jones and Rev. F.E Sandy, the number of female students increased in Aizawl.¹³ In 1906, mission school was shifted to Sikulpuikawn for boys and later known as Sikul Sen. That year the school was intended solely for female in the mission compound.¹⁴ Under the women missionaries, the mission school became an important instrument in breaking down barriers to female education with Mrs Jones serving as the headmistress until 1916.

The contributions of Mrs Katherine Jones (here after Mrs Jones) for the development of school for girls were notable. She introduced a new curriculum

which included scripture and singing, needlework, hygiene and cooking.¹⁵ It was designed to meet the traditional expectations of Mizo women. The increasing number of female students reflects the success of the curriculum. Mrs Jones acknowledged the necessity for additional female teachers to support her pioneering efforts. She was joined by Miss Edith M. Chapman and Miss Olive E. Dicks, a trained nurse in 1919.

The school gradually developed and three pupils were able to pursue further education. Chawngthuami and Rosiami joined High School in Shillong while Kaithuami and Tlawmkungi received nursing training. The school was formally established after the Miss Kitty Lewis arrived in 1922. Under her charge, two divisions- Lower Primary and Middle English were introduced. To accommodate students from distant areas large girls' hostel was also constructed.¹⁶ In a letter to a friend, Miss Lewis stated that the female students were taught to be good Christians, wives and mothers.¹⁷ She was joined by Miss Katie Hughes in 1924. Due to her father's serious accident, Miss Kitty left in July 1925.

Under the charge of Miss Hughes, an innovative method of teaching younger children was introduced. She was aided by two or three Mizo teachers as female students increased.¹⁸ There was a growing desire to learn among women around this time. A women's meeting was held on Tuesday and Thursday providing a perfect opportunity. Through her work, the idea of women's education became a custom rather than an exception.¹⁹ The changing perception on female education can be seen as the first women to passed matriculation exam was recorded in 1927, before the establishment of High School in the Hill.²⁰ Miss Catherine Morfudd Davies looked after the school in 1927 while Miss Hughes took the lead in training the Mizo teachers.²¹ The two pioneer missionaries, Mr Lorrain and Mr Savidge had done considerable work in paving the way for female education in the south Lushai hills. In following the footsteps of their husband, Mrs. Savidge and Mrs. Lorrain took up the issue of women. Initially, the missionaries failed to attain success in enrolling girls to enter the school in daytime. They were threatened by a group of Mizo young men. They did not see the necessity of educating girls since they believed that they were destined for household work. However, a class with a few girls was started and gradually succeeded.²² Sundays School also became a place for educating girls as observed by Savidge.²³ In the south Lushai hill, school was opened in 1903 and the enrolment of girls in the mission school can be seen with the opening of boarding school for girls in 1907 at Serkawn.²⁴

The Girl's Mission School was established with the arrival of E.M. Chapman in 1921. They followed a similar framework to the mission school in north Lushai Hills. The missionaries prepared the subjects for girls in such a way that which girls were considered useful in their homes and villages. J. Herbert Lorrain in his mission report mentions that we do not want the school to unfit these girls for the duties which will again be theirs as soon as they return to their houses or are married.²⁵ With the arrival of Miss Clark, female education

in the South was combined with 'the development of Christian character, the care of children with the charge of a home farm, the cultivation of a garden with all domestic arts, and the experimental growing of tea, strawberry and indigo.'²⁶

The school for girls was promoted to middle school in 1931. The missionaries were also supported by the Mizo chiefs in educating girls and a large number of the students comprised of the chief's daughter.²⁷ As years passed, the Mizo's perception of educating women gradually changed and educated women was largely considered as an asset in the society. Therefore, the desire for education increased among women. Also, school for mothers was also started in Aizawl and Serkawn by the women missionaries. They were taught bible lessons in the classes held in the missionary bungalow. Apart from this, a lesson on health and hygiene and midwifery was given. There were days when it was difficult to attend classes but it was generally held every Friday. This weekly meeting of women was started by Mrs Jones. In these classes, general knowledge but also 'Scriptural truths' were taught.²⁸

Consequently, a number of Mizo Women trained in midwifery and scriptural knowledge started to emerged. In the north and south Lushai hill, the resistance was overcome not by challenging the existing patriarchal norms but by framing schooling as a preparation for 'good wives and mothers.' Since the women missionaries in colonial Lushai hill were the product of Victorian society, the ideal Christian womanhood was reinforced and the curricula was tailored to the domestic and reproductive roles of women while placing them among the newly educated class.

Training Mizo Women: Domesticity as Profession

The practice of Western medicine became a missionizing tool under the medical mission of the missionaries. Although the colonial authorities started the western health facilities, it was primarily for the government officials residing on the hill. Moreover, driven by their commitment to healing, the practice of Western medicine by the missionaries effective than that of the colonial government.

Upon the arrival on the hill, the health condition of the Mizo women and the high infant mortality rate caught the attention of the missionaries. Among them, it was the women missionaries or wives of the missionaries who took up the welfare of women and infants. As Mizo women were largely engaged in both domestic and agricultural works, it often results in premature ageing and ultimately leads to untimely demise, affecting the health and care of an infant.²⁹ Until the advent of women medical missionaries, the women missionaries contributed largely to the health of women. While they were concerned with the health of women, it also allowed them to accomplish their missionizing project.

A weekly women's meeting was initiated by Mrs. Jones in the north Lushai hills where she provided lessons on health, hygiene, and the Bible. It was

reported that Mrs. Jones took care of 12 orphans until she left the hill in 1925.³⁰ Under her initiative, a few Mizo women were trained in midwifery outside the hill. Pawngi became the first midwife³¹ while Kaithuami was the first Mizo woman to receive training in general nursing in Shillong, sponsored by the mission in 1926. They later assisted the missionaries and became highly sought after in the region.³² As interest in healthcare grew among women missionaries, Miss Hughes opened a welfare clinic in 1926. Local mothers attended weekly sessions where they were taught basic childcare.³³ The health of mothers and infants were examined and lectures were given on nutrition and health. A small room called the 'Nau Buk In' was set up to weigh babies, with prizes awarded to the healthiest and cleanest infants.³⁴

In following a similar pattern with the missionaries of the north Lushai hills, Mrs. Lorrain and Mrs. Savidge, the wives of the pioneer missionaries, worked towards the welfare of women. Besides offering care to babies and mothers, they extended their work to interact with as many women as possible and attend to their needs. They would often toured in the village and opened an ante-natal clinic and dispensary. Along with evangelizing missions, they would visit distant villages and treat the sick.³⁵ When Mrs. Lorrain entered the South in 1904, motherless babies became her portion.

The early converted Mizo women were trained and later employed to care for motherless babies. The story of Thangchhumi, as recounted in E. Chapman and M. Clark's *Mizo Miracle*, highlights this practice. Along with her mother, they were converted to Christianity, which led to their ostracization by the villages. When her aunt died during childbirth, they took in the new born, rejecting the superstitious belief surrounding motherless infants³⁶ and decided to care for the baby. They sought advice from the missionaries, and Mrs Savidge agreed to instruct her on how to care for her cousin.³⁷ Soon after the missionaries were able to train Thangchhumi to look after motherless babies, with Mrs Lorrain overseeing the daily care of infants, offering what was essentially a clinic.³⁸ She attended the mission school and assisted the missionaries with both school work and the care of motherless babies. On witnessing the effectiveness of the training received by Thangchhumi, it won the hearts of the Mizos in the south Lushai hill and more women were trained under the missionaries. In order to expand their reach to more villages, a few young men or women were sent from the churches in the district. They were trained in first aid, hygiene, home nursing and public health in the health centre for two weeks or ten days. Armed with this new knowledge, they were able to treat patients. Women working in midwifery cases made the best use of the items typically found in the Mizo household. Upon returning, they imparted the lesson learnt, and some were regarded as nurse-midwives in their respective villages.³⁹ The women missionaries upheld the patriarchal norms by preserving the male authority over women in both public and private sphere.

Nursing School

The medical mission of the missionaries grew rapidly with the establishment of the mission hospital. The efforts taken by the women missionaries in training the local women could be seen in the establishment of a hospital in the north. With the arrival of Dr. John Williams, the Welsh Presbyterian Hospital was established and assisted by Tlawmkungi, a Mizo nurse in 1928. However, she was soon replaced with the arrival of Miss Margaret Winfred, a missionary nurse in 1929.⁴⁰ Under the Baptist Missionary Society, a medical mission began with the arrival of Miss Oliver Dicks in 1919. The Serkawn Kristian Hospital was initially established as a women's hospital and developed into a full-fledged hospital in 1956.⁴¹ Without the service offered by both the missionary and Mizo nurses, the mission hospitals could have not been established.

Despite the presence of missionary nurses, they alone could not handle the growing demand of the mission hospital. To assist them, nursing was introduced as a job for Mizo women. The women missionaries laid the groundwork for training Mizo women. In the north, the Training School for Nurses was started by Dr Gwyneth P. Roberts and Miss Gwladys Evans.⁴² Initially, a three-month Preliminary Training School was opened. It was followed by Block Teaching on specific subjects. In meeting the demands of the mission hospital, the training was always directed towards efficient patient care, and skilled care on the Wards, at the Clinics, in the Operation Theatre and the Maternity and Labour Wards.⁴³ Since the education of women was hardly supported, it was challenging to conduct a long-term program in the early years of preliminary training

The selection process was also tough due to varying educational backgrounds. However, efforts were made to train women from all region. The selected trainees were accommodated in the nurse hostel.⁴⁴ Despite the textbooks being translated to Mizo language, as the syllabus was new, teaching was difficult in the initial years. Gradually, the Preliminary Training developed into Presbyterian Nursing School in 1937 largely due to the efforts of Dr. J.P Roberts.⁴⁵ With improvement in the standard of education, the trained Mizo women started to emerge as professional nurses.

The professionalization of nursing began with the establishment of a nursing school in 1937 under the Welsh Calvinistic Mission. However, the training of Mizo women had already begun in 1919 with the arrival of Miss Oliver Dicks and Miss E.M. Chapman in the south Lushai hills. Between 1919 and 1952, training was given in Junior Nursing, focusing on subjects such as midwifery, hygiene and first aid.⁴⁶ Some of the senior girls in the school were trained to improve the hygienic condition of the village. M. Eleanor Bowser, Women's Work Secretary of the Baptist Missionary Society, stated that 'while they may not all become qualified nurses, they are well fitted to improve the hygienic conditions of their own and their neighbours' home when they return to the villages, and help to lessen the terrible toll taken by disease and death'. With the appointment of Miss I.M. Good Nurse's Hostel was opened in 1928. Lalsiami

became the first trained nurse and took up work in other villages.⁴⁷ The Junior Nursing School gradually extended training in General Nursing and Midwifery in collaboration with the Presbyterian Nursing School. Before this, students were allowed to take exams at the Nursing School in north Lushai Hill. With Miss E.M. Maltby serving as the first Nursing Superintendent, the Serkawn Nursing School was officially established in 1952.

As a part of their missionizing task, the local women were also trained to be an ideal Christian woman. Early Mizo female converts often joined the nursing school with a religious fervour. This is evident in their responses when asked why they wanted to become nurses in 'Medical Mission to Mizoram' as follows: 'The answers varied a great deal, "I want to be trained to help people who are ill", "I feel it is God's plan for me to train to be a nurse"... and many other answers.'⁴⁸ The nursing students would attend the service held each evening by the staff of the hospitals. Upon the completion of training, they were considered as suitable wives in the villages with the knowledge acquired. Since most of the Mizo men were against marrying educated women, the training received by the local nurses succeeded in breaking the preconceived notion held against female education. Moreover, it also places them among the newly emerging 'educated class', attracting more female students to join the nursing school.

The introduction of nursing and medical knowledge and 'improvements' in public health in the colonies might therefore be presented as part of a civilizing project of the missionaries. This could be reflected in a story of a young Mizo nurse, Mawii, written by Imogen Roberts, a missionary nurse at Durtlang Hospital. The story represents the images of a 'new Mizo woman'. By embracing Christian values and through the training received, she was able to impart knowledge and provide medical care to her village. This narrative reflected the response of the local woman and highlighted the success of the missionizing project in colonial Lushai Hill.⁴⁹ While the missionaries' provided opportunities for employment and education, it was largely within the confines of traditional roles. This aligns with the broader colonial project, which often sought to 'civilize' the 'native' without challenging the existing power patriarchal structure. As women became more visible in public and professional sphere, the training received were crafted to reinforce traditional gender role. By emphasizing domesticity with femininity, the role of women was redefined within the new form of patriarchal structure.

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