PROSTITUTION AND VENEREAL DISEASES IN EARLY SINGAPORE (1819 — 1889) — PART II

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Y. K. Lee, AM, MD, FRCP (Lond), FRCPE, FRACP, LL. B. Senior Physician, Clinical Professor and Head In Singapore, the Female Ward of the General Hospital (then in the Kandang Kerbau district) was converted into a Lock Hospital, and was completely fitted up for the reception of twenty patients.' Regular periodical medical examinations of prostitutes and admission into hospital did not commence until the beginning of 1873. Male patients continued to be treated in the other hospitals. In the European Ward of the General Hospital, ".... Rheumatism and Syphilitic affections, Diarrhoea and Dysentery formed the bulk of admissions....." In the Native Ward, "the members of the Police Force seek admission for Fevers, chiefly of a very mild type; also Rheumatism, Diarrhoea, Dysentery, Catarrhs and Venereal Diseases...."

The Governor submitted another report on 13th February 1873. He said that up to date the Ordinance had worked smoothly and had to a considerable extent achieved its main object, checking the spread of venereal disease. The Ordinance had incidentally given the Government a hold over a great part of the Chinese population, which with proper management he had no doubt could be turned to a very beneficial account. The most serious difficulty experienced in working the Ordinance was from the unwillingness of the Chinese women to submit themselves to medical examination; officers had been foiled by the inmates absconding and the keepers of brothels closing their houses. Several charges of spreading contagious diseases were brought against the inmates of certain brothels who, with their keepers, were brought before the Registering Officer, and the option given them of submitting to the law or suffering the heavy penalty provided for disobedience. After some hesitation, they all gave way; and examinations whenever found necessary were thenceforward conducted without any opposition amongst all nationalities (see below, quotation from a newspaper, amendment to the Ordinance and the first annual report of the Lock Hospital). Naval and Military Officers had been requested to report any case of venereal disease among their men. This led to women who had infected them being admitted to the Lock Hospital for treatment. At the time of writing the report, there were 12 women, Chinese, Malay and Kling, in hospital. A considerable doubt had been expressed by the Chinese gentlemen who had been consulted as to whether the prejudices of the Chinese women would prevent them from being treated in an European-run hospital. The care and attention of the officers concerned had removed all difficulty on this score, and the patients had expressed their satisfaction and gratitude for the treatment they had received.

The Governor, however, was too optimistic and had painted too rosy a picture. The Singapore Daily Times carried this news item in its issue of 2nd June 1873.³

"There is a very strong opposition among the class affected by it against the Contagious Diseases Ordinance. A few days ago, about a dozen women who refused to submit to the provisions of the Ordinance, were confined in the Sheriff's Jail, where they set up such a howling that the place sounded like a Pandemonium; and as they were only under sentence of simple imprisonment, threats and entreaties were alike unavailing to induce them to be quiet. They kept up their unearthly noise for about twelve hours almost without intermission, and neither the other prisoners nor the gaoler and his family could sleep.

This morning, a crowd of brothel keepers and others besieged the Registration Office and threw away their licences in disdain. We believe, however, they will be strictly prosecuted for any violation of the Ordinance."

To ensure that more women presented themselves, the Ordinance was amended on 12th June 1873 to make the keeper of a licensed brothel responsible for producing its inmates for medical examination when required by the Visiting Surgeon. The penalty was a fine or imprisonment not exceeding six months.

Some extracts of the 1873 Annual Report of the Medical Department⁴ and the first Annual Report of the Lock Hospital (1873)⁵ will be quoted. They help to give a more balanced view.

"General Hospital, European Ward, Admissions.

Primary Syphilis.		Gonorrhoea.		
1871	12.	1871	5.	
1872	16.	1872	18.	
1873	22.	1873	8.	

Syphilis therefore appears to be on the increase; possibly this may be due to the quick communication by steamers with other ports. In next year's report, I trust, I shall be able to show the number of imported cases. (In 1874, there were 30 cases of Primary Syphilis; in 17 the disease had been contracted in other ports. Gonorrhoea caused 13 admissions; of these, 8 were imported and 5 contracted in Singapore).

General Hospital, Native Ward. Admissions.

Primary	y Syphilis.	Gonor	rhoea.
1871	(no records)	1871	6.
1872	18.	1872	(no records)
1873	18.	1873	11. "

"... Regular examinations were commenced in January 1873. The first admission was on the 9th January, since which, as will be seen by the accompanying Annual Return, 118 patients have been treated. Of these, three cases were admitted who were found in brothels in an advanced state of disease. One of Scrofula and two of Dropsy. Of the last two, one died in four days, the other in about twelve hours after admission; the latter being in fact in a moribund state.

Of the 29 cases of Gonorrhoea, 5 had also Primary Syphilis. One case was that of an idiotic girl who suffered from very extensive Primary Ulcers and was in a very deplorable condition. After being under treatment from the 12th April to the 30th December, she was discharged well, and elected to go into the Convent. . . .

Of the first cases admitted, most of them suffered from very severe suppurating primary sores, and it was a matter of no surprise that with such extensive disease, there was in the majority of them a very callous state of the parts, rendering them insensible to pain. It was moreover evident that they had been plying their trade up to the day of admission. Nearly all showed signs of having had previous disease of more or fess severity, and in some, considerable sloughing had taken place

In carrying out this Ordinance, that of Hong Kong was adopted as a guide, so that only those women who received 'all nationalities' were examined; the remainder, frequented by Chinese only, though licensed, being exempted from medical inspection by order of the late Governor.

In many cases in Singapore, even in houses frequented only by Chinese, when information was given that Syphilitic disease had been contracted in a particular house, Summonses were issued for the inmates of such house to appear for examination, and invariably a large percentage of infected women were found. For example, out of 11 women belonging to one brothel no less than 9 were infected; in another, out of 16 women there were 7 infected; in another, out of 22 women, 8 and so on.

There exists no doubt an enormous amount of disease amongst our Chinese population, and that, very often of a very virulent type; the system of treatment adopted by the Chinese Doctors being calculated to aggravate it.

The beneficial effects of this Ordinance in Singapore amongst the soldiers and the sailors of Her Majesty's Navy have been sufficiently apparent to prove its utility. When a soldier or sailor has contracted venereal disease, the Surgeon of the Regiment or the man-of-war forwards a letter to the Visiting Surgeon stating the fact, and the Inspector under the Ordinance proceeds with the man, and if possible, the house is pointed out. A Summons for examination, whether it occurs at the time of the regular examination or not, is at once issued . . . Everything is done to encourage this information being given as early as possible, so as to prevent further infection. That it is not so effectual as it might be, is owing to the men being unable to point out the house.

The extension of the Ordinance to the rest of the brothels cannot but be productive of good, as the examination of all prostitutes will undoubtedly control the spread of disease, the only cause that has hitherto prevented it, is the alleged strong prejudice against the Ordinance amongst the Chinese.

At the commencement of the Ordinance there was certainly a great objection to its provisions, and the only way to combat that, was to act as gently and cautiously as possible. I (Dr Anderson) therefore at first made house to house inspections, but after the first three months, finding that the time taken up and the exposure incurred, were very great, I issued Summonses for the women to appear at the Lock Hospital. They willingly came as they had already experienced that the examination was not so formidable as at first represented to them. These examinations were held fortnightly.

The dieting of the patients in this Hospital differs from that of the contract system as adopted in others. The class of patients being peculiar, to avoid all appearances of the Lock Hospital being a place of punishment, and at the same time to afford every encouragement to induce them to enter the Hospital, a certain amount of licence is given to the women in the choice of their food according to their customs. By this plan a better diet is obtained, giving satisfaction to all at a very small increase of cost.

In consequence of an outbreak of Cholera in the month of July in the immediate vicinity of the Lock Hospital, the patients were removed to a hired bungalow at Craig's Hill, about two miles distant; occupation of which was retained until the 18th November. . . . "

Early in 1873, the Secretary of State wisely decided that any surplus money from fees collected under the Ordinance after payment of all expenses, should not be regarded as the Colony's ordinary revenue and used for ordinary purposes. The money was to be set apart and when occasion arose to be used for the improvement of hospitals, especially those devoted to the treatment of venereal diseases.⁶

In May 1875, there was another Contagious Diseases Amendment Ordinance. Under this Ordinance, the judicial powers of the Registering Officer were transferred to the Magistrate.

The examination of prostitutes receiving "strictly Chinese" clients was gradually enforced. They were, however, examined only once a month, whereas those receiving "all nationalities" were examined once a week (at the beginning it was once a fortnight).

On 4th April 1876, an Order of the Governor-in-Council was passed which stated that "in order to encourage as much as possible the sending of diseased women to hospital, all charges for maintenance in the Lock Hospital should be discontinued, and the monthly fee should be increased in lieu of all such charges." From 1st May 1876, a keeper had to pay \$1.00 a month for each woman in his brothel.⁷

On 23rd March 1877, "an Ordinance to make provision by law for the protection of Chinese Immigrants" was passed. It provided for the appointment of a Protector of Chinese Immigrants amongst other things. The Protector and the Chinese Protectorate were to play an important part in the problem of prostitution and venereal diseases.

The Report of the Committee to inquire into the working of the Contagious Diseases Ordinance was laid before the Legislative Council on 2nd April 1877.8 The Committee had been appointed as there had been doubts expressed regarding the efficiency of implementation and the benefits conferred by the Ordinance. Its findings and recommendations are briefly summarised. Inspection of the prostitutes at the brothels was troublesome, and it was difficult for the women to come to the Hospital at Campong Krabow, so the examinations were done at two houses, one in Merchant Road and the other in Chin Chew Street. Gonorrhoea was the most prevalent venereal disease. Monthly examination of prostitutes who received only Chinese clients was not sufficiently frequent to prevent the spread of disease. This was made worse because there was a lot of substitution and impersonation of women, i.e. healthy women were sent for examination in place of diseased ones. There were also too many clandestine prostitutes, e.g. posing as hairdressers and seamstresses. There were only 1400 registered prostitutes in 1875. In 1876 up till 30th November, the number was 1335 (Chinese, for Chinese only, 1056; Chinese, for all nationalities, 118; Malays 137; Europeans 21; Klings 3). The Committee also drew attention to the great disparity of the sexes as a cause of vice, and the ill-treatment of prostitutes by their keepers. They recommended: the more effective registration of prostitutes; their more frequent examination by surprise visits to the brothels by the Visiting Surgeon; the checking of substitution by photographing the women or by recording blemishes and marks on their bodies; the suppression of illicit prostitution; the removal from brothels of children between the ages of 5 and 14; the facility of making known to the authorities any cause of complaint; the removal of the influence of the Secret Societies; the introduction of a more efficient system for obtaining information and cooperation as the "detective system" had failed; the establishment of a reformatory for both women and children. Some of the recommendations were incorporated in later Ordinances and regulations.

In 1877, 2139 women were admitted into the Lock Hospital (Chinese 2065, Malays 54, Klings 3, Europeans 17). 43 absconded and 4 died. "Causes of death: Smallpox 1; Diarrhoea 1; Fever 1; Atrophy 1. The last three women were broken-down cases. Admitted to hospital in an advanced state.... Great practice of substitution carried on, in hiding the worst cases. ... Introduction of the Ordinance of much benefit to the women themselves."⁹

In 1878, Dr Simon, the Visiting Surgeon, also found that the greatest difficulty he had to contend with was identifying the women who were brought up for periodical examination. He therefore instituted an "identification register" in March:

".... took notes of various scars and other natural marks about the persons of the women of each house as they came up. The result has been very successful; in almost every instance that imposition was subsequently attempted, it was detected, and though there was much trouble in doing so, owing to the frequent removals from one brothel to another, and even changing of names, it is a subject of congratulation that so much has been gained."

The examinations continued to be held regularly monthly for the "strictly Chinese" class and weekly for those who received "all nationalities". There were 8883 examinations for the first class of women, and 7147 for the second class. There were 2291 admissions into hospital, this was 14.3% of the number examined. The percentage of Primary Syphilis to the total number examined was 1.3%; of Gonorrhoea, 11.5%.

"There can be no question that a large percentage of the venereal cases that have occurred either amongst the soldiers and residents of the place, or the men of the navy who land here from time to time, is owing to licensed brothels making their places a convenience to unlicensed women as had been often proved by surprise visits, when women were found there more or less diseased and who were not the inmates of the brothels as shown by the licensing sheet."

He also reported that the accommodation was very insufficient in the Lock Hospital immediately after the monthly examinations when overcrowding became very great. Luckily, a large number of those admitted were soon discharged so that the pressure was taken off in a few days. The inmates also preferred to remain in the verandahs or under the trees during the day, and the crowding was consequently experienced only at night, but the ventilation being ample, in fact, far more than they were accustomed to, no one had suffered.¹⁰.

In 1879, two new wards capable of accommodating 56 patients were erected in the Lock Hospital to relieve the problem of overcrowding. Because of the incomplete state of the fence around the hospital, 69 women absconded during the year. There were five deaths in "women broken down from the effects of syphilis and scrofula combined bringing about consumption and other exhausting diseases."

It was reported that the working of the Contagious Diseases Ordinance was gradually improving. The system of registering marks worked fairly well in spite of removals from brothels and changing of names. The practice of substituting healthy women to appear for examination in place of those who might be diseased was not regularly attempted, but a new ruse was tried. Women who were known to the keeper to be diseased had their names erased from the licence sheet, though it had been proved in many instances, that such removals did not always carry with it a removal from the brothel. Examinations continued monthly and weekly. As a rule, more cases of Primary Syphilis were detected on occasions of surprise checks than at the periodical examinations, although it was believed that the keepers were becoming more cooperative. The women themselves were found to be more amenable to discipline while in hospital hence better order was preserved.11

In the General Hospital, the admissions for venereal diseases were not decreasing. In the European Ward, "Gonorrhoea, 14 cases, principally contracted in Singapore or Penang. Syphilis, 43 cases, almost all imported. It is impossible to say with any degree of accuracy what were the exact numbers imported or contracted in the Settlement." In the Native and Police Ward, "Gonorrhoea, 9 cases, all contracted in the Settlement. Secondary Syphilis, 25 cases, one very aggravated case died, the rest recovered."¹¹ These figures, of course, did not reflect the true incidence. The Chinese did not believe in going to the hospitals. Those who were ever admitted, were either paupers or vagrants or those rushed to hospital for wounds and injuries.

The Protector of Chinese in his Annual Report for 1879 pointed out some of the defects in the working of the Immigration Ordinance (II of 1877);¹²

".... But (especially as regards females) numerous abuses must continue until means are adopted to provide for the satisfactory examination of immigrants.... The obstacles to satisfactory examination have hitherto arisen from regulations which oblige it to be conducted on board the vessel while, or immediately after mooring, but the establishing of landing depots (which I understand have now been in principle approved by the Home Government) will enable the intentions of the Ordinance to be properly carried out.... The refuge for kidnapped women has continued to be of much service, and would undoubtedly be of even greater utility, were it possible to induce many who are illegally brought into the Colony, to give their true histories, an end to which the landing depots, when established, will largely contribute....."

On 29th July 1880, a new Immigration Ordinance (An Ordinance to make provision by law for the protection of Chinese Immigrants) was passed. It repealed the 1877 Ordinance. The Protector of Chinese and his assistants were to be public servants within the meaning of the Penal

Code. It authorised the establishment of depots for the examination and detention of Chinese immigrants amongst other things. It was envisaged that this Ordinance, IV of 1880, by providing for the better examination of the immigrants on arrival would enable the Chinese Protectorate to give full protection to the immigrants without causing any delay or inconvenience to the merchants or vessels engaged in the passenger trade. ".... The new Ordinance will doubtless enable us to exercise a better supervision over the class of women brought here from China for the purposes of prostitution, and in co-operation with the Registrar-General, this office should be able to prevent a great deal of fraud and oppression now carried on by the numerous procuresses who ply their trade between Hong Kong and the Straits. . . ."13

In 1880, the reported incidence of venereal diseases in the General Hospital did not show much difference. "European Wards....There were 24 cases of Syphilis and 10 of Gonorrhoea. These were principally imported, though there would seem to have been an unusual number of cases of both diseases contracted either in Singapore or Penang.... Native and Police Wards.... Gonorrhoea and Syphilis had their usual prevalence, 7 being admitted for the former, and 13 for the latter complaint....."¹⁴

In his report on the Lock Hospital,¹⁴. the Visiting Surgeon drew attention again to the value of surprise checks, the spread of disease by unregistered prostitutes, the deception practised by the women lending each other their "Fit Certificates", and the deficiency of the Ordinance:

".... Total admissions, 1916. Causes of admissions: Primary Syphilis 186; Secondary Syphilis 3; Bubo 3; Leucorrhoea 2; Ulcer neck of womb 99; For observation 18; Gonorrhoea 1605.... 84% of admissions were for Gonorrhoea, 9.7% for Primary Syphilis. The examination of licensed prostitutes continued: 'All nationalities' 7183, 5.9% admitted; 'Strictly Chinese' 6700, 22.1% admitted. As a rule, the largest ratio of cases of bad Primary Syphilis was detected on the occasions of surprise visits. Two cases in point:

- 1. One morning, out of 6 extra women sent up from a single brothel for examination, all were found badly diseased and had to be admitted to hospital.
- 2. Two seamen were admitted in August last to the General Hospital from a man-of-war lying in the harbour, suffering from Primary Syphilis. In the ordinary way, the Contagious Diseases Ordinance Inspector was communicated with, and he in the company of the men proceeded to the house which they had been visiting. The two prostitutes with whom they had cohabited, were at once identified, sent to the Lock Hospital for examination and found diseased, yet these women were not only not licensed, but had actually in their possession certificates which they had shown to their unfortunate victims, and had been signed by the Visiting Surgeon to the effect that they were free from disease. These had been borrowed by them for the occasion from two licensed inmates.

This is of common occurrence, nor is detection always so easy as it was here, for either the men who become infected refuse from unwillingness to give the number of

the house where the disease was contracted, or they had been too intoxicated when there really to remember it. This indicates how easily the Ordinance may be evaded. and how necessary frequent surprise visits to brothels are. Where guilt is brought home, too heavy fines cannot be imposed on the keepers by the Magistrates. Much disease is no doubt spread in this way ... Fresh women coming here from Hong Kong and elsewhere are almost always diseased, and have to be at once admitted. Among the licensed women themselves, little disease of much importance exists. . . . A great deal of infection occurs, however, I feel positive, through covert unlicensed prostitutes, both in the town and outlying districts, women living alone, chiefly Malays, Klings and Portuguese, and until the Ordinance has powers, which it does not now enjoy, to reach this class, it will always be a faulty one...."

The new Immigration Ordinance, IV of 1880, came into force on 1st April 1881. In spite of every precaution taken by the Chinese Protectorate, there was no doubt that many women and young girls were brought to Singapore under false pretences and sold for prostitution. It was most difficult to induce the victims to tell the truth, as they had been carefully coached on the voyage what to say to the Examining Officer, and were also made to believe that the Government was anxious to get hold of them and put them in prison. Officers had separated girls for hours from the procuresses and explained to them fully that they had been duped by the person who had promised them honest and remunerative employment. Often to no avail, the victims begging to be allowed to go with their deceivers. In several cases, after a week or two, the girls had fled to the Protectorate and asked to be sent back to China as they had been forced into a brothel. But they had refused to give assistance in prosecuting the people who had injured them. The Protector of Chinese was, however, of the opinion that it would be very difficult to get successful prosecutions agains the unscrupulous Chinese who engaged in this nefarious trade, as the law did not meet the necessities of the cases. He recommended that legislation be made, as in Hong Kong, for the protection of women and girls. The whole question was, however, one which required very careful handling. While women and girls had to be protected, the paucity of females in the Settlement rendered it necessary to encourage their immigration to improve the condition of life among the Chinese in Singapore,15

The working of the Contagious Diseases Ordinance (excluding the medical aspects) was handed over to the Chinese Protectorate on 1st December 1881. This involved a lot of extra work for the staff as the Protectorate in addition to dealing with the multifarious activities of the whole Chinese population, now had to carry out an Ordinance which dealt with all nationalities, especially the large number of women prostituting themselves on the sly, of whom the Chinese females only constituted a small proportion.¹⁵

The new General Hospital at Sepoy Lines was opened on 1st August 1882. The Lock Hospital remained at Kandang Kerbau. There was no addition to the number of its wards in 1882 as the existing accommodation was more than adequate.

The number of prostitutes on the register on 1st January 1882 was 1127. 479 were added during the year,

and 561 had their licences cancelled. There were only three defaulters from examination during the year, as against 24 in 1881. This was chiefly due to the better working of the Ordinance, and the heavy punishment inflicted by the Magistrates. A diminution of cases of venereal diseases treated in hospitals was reported in 1882, and was believed to be due also to the better working of the Ordinance. The weekly Army and Navy returns showed that comparatively little disease had been contracted from the licensed women. The main source of infection for the armed forces and civilians was the class of women outside the control of the Ordinance.¹⁶

In Britain as a result of prolonged and continuous agitation for its repeal, the Contagious Diseases Act, 1866-1869 was suspended in 1883.

In 1883, an increasing number of European prostitutes were registered in Singapore. There was a reduction in the incidence of venereal diseases as shown by the statistics of women examined and the returns from the several hospitals, civil and military. During the year, an Order was passed by the Governor making the Lock Hospital a hospital also for the treatment of licensed prostitutes suffering from diseases other than veneral diseases.¹⁷

In 1884, the accommodation in the Lock Hospital for European and Japanese patients was inadequate as their numbers had been increasing. An influx of Japanese prostitutes into Singapore began at this time. An increase in the infection rate among prostitutes receiving "all nationalities" was attributed to them as many of them were found diseased. There were 8723 examinations and the percentage of diseased was 4.2 as against 3.6 in 1883. Of the 15,227 "strictly Chinese" examinations, the percentage was 4.6 as against 4.5 in 1883.¹⁸

The Protector of Chinese wrote his first report as the Registering Officer under the Contagious Diseases Ordinance in 1884. He made a number of pertinent comments:¹⁹

"Protection of Women and Registration under the Contagious Diseases Ordinance.

The work of this Ordinance is being carried on in a most satisfactory manner, as, owing to the cordial cooperation between the Medical and Protectorate Departments, the unfortunate inmates of registered brothels receive almost every possible protection from illtreatment, and assistance if desirous of leading a respectable life.

Owing to the disorderly conduct of Chinese samsengs, it was considered necessary to increase the Police Force in Sago, Smith and Tringganu Streets, and at the suggestion of His Excellency the Acting Governor, nine Chinese constables were added to the Police Force and paid out of the Contagious Diseases Ordinance Funds, to preserve order in these streets amongst the licensed brothels. This interesting experiment has so far been tolerably successful. . . .

The unsatisfactory state of things regarding female Chinese immigrants from Hong Kong still exists. I cannot help thinking that if, before allowing these women to embark in Hong Kong, some such examination and inquiry as to their conditions and circumstances were made, as is done in Singapore and Penang on their arrival, the evils now so prevalent would soon cease.

At present, every female brings her photograph for the

purposes of identification, but nothing further seems to have been done. If any examination takes place, it must have been quite perfunctory, as in the Passenger List furnished to the Boarding Officer of the Protectorate, all the girls who come for the purpose of prostitution, are entered as coming here to join their husbands, and the procuresses are described as being their mothers or as coming to join their sons in this Colony.

During the year under review, 33 women have been received into the Refuge; 49 inmates of brothels have left to live as wives with Chinese; and 3 females have been assisted with passage money to return to their homes in China

The large numbers of children born in brothels, or brought down from China in almost every steamer arriving from Hong Kong, to be trained for prostitution are becoming a difficult question. The Registrars refuse permission for any children between the ages of 5 and 15 to reside in brothels, so they are necessarily brought up in private houses, where, however, they are under bad influences and educated solely to fit them to a future career of vice.

It would be a great blessing had Government power to take charge of all these female children, and place them in some institution where they would be brought up and educated, so as to fit them for marriage to respectable Chinese. Besides saving the girls from an immoral and in most cases, a miserable life, this scheme would greatly benefit the Colony by ameliorating the unsatisfactory state of things now existing among the Chinese, owing to the great disproportion between the sexes...."

In 1885, accommodation in the Lock Hospital for European patients was increased by removing the partition wall between the two European Wards, but was still inadequate. Statistics showed a steady improvement in the working of the Ordinance in that the percentage of diseased prostitutes had considerably decreased, and admissions for venereal diseases into the Civil and Military Hospitals had been small. In the Lock Hospital, there was an increase in admissions which could be accounted for by the increase in the number of women on the Register. There were 1324 admissions (20 Europeans, 131 Japanese, 24 Malays, 50 Klings, 1099 Chinese). The principal causes of admissions were Gonorrhoea 980; Primary Syphilis 276.²⁰

The Protector's comments in 1884 regarding female immigration from Hong Kong caused some unhappiness in that colony, but in 1885 he was assured of the cooperation of the Hong Kong Authorities. He wanted more stringent legislation as he knew that the traffickers in females were very shrewd and cunning. They had circumvented the regulations by bringing the girls into Singapore as cabin passengers; or shipping them from Hong Kong to the Straits via Shanghai, Saigon, Bangkok and North Borneo, in order to evade the Protector's power of supervision and protection on their arrival. During the year (1885) there were indications that Government might move in the direction of protecting the numbers of young girls who were being trained for prostitution. The Protector was certain that not much good could be accomplished without the cooperation of the Chinese community leaders. "I would hope that in time the Chinese may enter heartily into our plans, and by their knowledge of their countrymen assist us to counteract the

nefarious cunning of the bad characters who gain money by kidnapping girls and young Chinese for the vilest purposes." The first step was taken when the Secretary of State for the Colonies ordered "Po-leung-kuks"(保良局) or Societies for the Protection of Women and Children composed of Chinese gentlemen to be established.²¹ (See Appendix for Rules and list of members).

In the early part of 1886, an extension was made to the European Ward of the Lock Hospital making the accommodation for the time being ample. Inspections of all brothels continued to be made twice a year by the Visiting Surgeon, who reported their sanitary condition as being satisfactory. There were 1852 women on the Register at the beginning of 1886. During the year, 831 names were added and 778 struck off, leaving a total of 1905, of which 189 were "all nationalities" and 1716 "strictly Chinese". 52 weekly examinations were conducted during the year for the "all nationalities" class, at which 10,113 women were inspected, giving an average of 194 at each examination. The rate of admission was 5.7%. For the "strictly Chinese", 12 monthly examinations were held, at which 17,496 women were present, the percentage of admissions being 3%. 1475 women were admitted during the year (28 Europeans, 189 Japanese, 27 Malays, 99 natives of India and 1132 Chinese).22

The Chinese Protectorate did much during 1886 "towards bringing to punishment the increasing number of samsengs who frequent the neighbourhood of the brothels, annoying and assaulting the keepers and their girls".²³

In the United Kingdom, an Act (49 & 50 Vic. c. 10) was passed on 16th April 1886 to repeal the Contagious Diseases Act, 1866-1869. As expected, its effects were soon felt in the Colonies.

The Secretary of State wrote to the Governor on 25th October 1886:²⁴

".... I desire to remind you that the operation of the Imperial Acts for the prevention of Contagious Diseases (1866 and 1869) was decisively condemned in the Parliament before the last, and that the Acts were repealed in the late Parliament.

In these circumstances, the policy of maintaining similar laws in the Crown Colonies-will no doubt be called in question in Parliament, and I desire, therefore, that if your Government should be of opinion that the interests of the Colony imperatively require the continuance of those laws, I may be furnished with the special reasons which they have for that opinion."

On receipt of the Secretary of State's despatch, the Governor asked Mr Pickering, the Protector of Chinese, for his opinion whether the interests of the Colony demanded the continuance of the Contagious Diseases Ordinance in force. Pickering's opinion was that the laws were "absolutely necessary for the protection of women and children and that to abolish them would be to relegate a very large number of females to a state of slavery, to which in many instances, death would be preferable". Similar reports were submitted by the Principal Civil Medical Officer and the Military Medical Officers emphasising the medical benefits conferred by the Ordinance. The Governor transmitted these reports to the Secretary of State and expressed his concurrence in the opinions expressed and recommended that it was not advisable to interfere with the existing law.25

In the meantime, on 9th May 1887, "An Ordinance to make further provision for the Protection of Women and Girls" was passed (and to continue in force until 31st December 1888). Under this Ordinance, the Protector of Chinese had power to require persons suspected of bringing women into Singapore by fraud for immoral purposes to give security for the production of such women when required. In default of such security, the Protector could order such women to be removed to a "place of safety". He also had authority to remove girls under sixteen used or trained for immoral purposes to a place of safety. The Protector and his officials were empowered to search "any ship, house, building or other place" for women and girls who might be liable to be dealt with under the Ordinance and remove them to a place of safety. Women and girls escaping from detention might be arrested and persons abetting their escape or harbouring them were liable to punishment by fine or imprisonment.

The Secretary of State informed the Governor on 2nd July 1887, that he had to act in accordance with the decision of the Imperial Parliament. There was to be no more compulsory examination of women. He instructed the Governor as follows:²⁶

".... It is desirable, if there is no strong reason for maintaining the practice in the Colony, to follow the course which has been resolved upon in this country, viz. to discontinue the system of compulsory examination, while retaining in the fullest force the registration and supervision of brothels and all parts of the Ordinance which are directed against brothel slavery..... I have considered reports by Medical Officers and others from a purely medical point of view, and the increase of disease that would result.... These arguments were strongly urged in this country, but were over-ruled by Parliament, and I feel compelled, in the absence of any special local reasons, to act in accordance with the decision of Parliament.

I have, therefore, to instruct you to prepare an Ordinance for the repeal of all such parts of the law as enforce compulsory examination of women, but I hope that, with a free Lock Hospital and with knowledge brought to these unfortunate women that they can freely avail themselves of it, the danger arising from the change may not be so great as is feared.... Not prepared to do away with registration and supervision, a check to kidnapping girls and brothel slavery. Ordinance to have the following objects: (a) registration of brothels; (b) inmates to be free to complain to the authorities, to go to the Lock Hospital; (c) all fees for registration and treatment in hospital to be defrayed by Government, not by the keepers; (d)"

The Governor in reply said that he would issue orders to the Surgeon to examine women only on request, and that treatment in the Lock Hospital was to be free. At the same time, he protested that to abandon compulsory examination was to continue one of the gravest abuses resulting from brothel slavery, namely, that of enabling the brothel keeper to force the wretched women to continue prostitution until their physical system was utterly broken down and they were rotten with disease, when they might be left to die or even put out of the way expeditiously. Women admitted to hospital meant a loss of earning to the keepers. To abandon compulsory examination was to remove the humane interposition of the doctors. By law, the women were free, but they had no where to go to. They were dependent on the brothel keeper for food and clothing, and in fact called her "mother". Moreover, the abolition of fees meant a gift of \$35,000 annually to the keepers.²⁷

The Secretary of State refused to see the Governor's point of view, and also blamed the Protector of Chinese rather unfairly for not doing his job properly, not knowing the local conditions. ".... The difficulty must be met in another way, namely, by taking more effective measures to show to the women that they are absolutely free to go and come as they please The Protector of Chinese has failed in his endeavour.^{'28}

On 30th December 1887, the Governor replied.²⁹ He defended the Protector of Chinese and said that he was doing his difficult job well. He tried to explain that the inmates of the brothels were free agents only in the sense that they were not under actual physical restraint. There was always the shadow of the Secret Societies in addition to the moral and filial force ingrained in the Chinese, in the relationship between the keeper and her girls. He reported that he had issued instructions to come into force on 1st January 1888, that all compulsory examinations were to cease; that any inmate of a brothel voluntarily applying to be medically examined or to be treated in hospital, was to be so examined or treated entirely free of charge; that the existing system of supervision of brothels by the Protector of Chinese and his officers was to be continued, and where possible in the interests of the inmates, to be improved; that every endeavour was, as previously done, to be made to make the inmates of brothels understand and appreciate that they were free agents, and that they could make free use of the Lock Hospital. He also said that the Attorney-General was preparing an amending Ordinance.

The Departments concerned, namely, the Medical Department and the Chinese Protectorate, expressed their regrets:

".... These results are exceedingly satisfactory and show how much benefit the public has derived from the provisions of the Contagious Diseases Ordinance, especially when considered with the records of the Civil and Military Hospitals in the Colony. Dr Tripp closes his report with a regret that it has been decided to repeal the Contagious Diseases Ordinance, and by anticipation that grievous results will follow the repeal. These regrets and these anticipations must be shared by every Medical Officer who has had to perform duties under the Contagious Diseases Ordinance."³⁰

".... I need only state here that to the hundreds of unfortunate girls who, in spite of all we can do, are virtually the property of their mistresses, I have every reason to believe that the abolitlon of the medical examination will be a real calamity. This Department will, however, spare no pains to induce the keepers of brothels and their inmates to take advantage of the free medical treatment offered by the Government, and I trust that we shall be successful.....¹⁹¹

The Protector of Chinese also reported that the Poleung-kuk (Society for the Protection of women and children) had not been able to do as much good as hoped, because of the absence of a proper Home for the women and girls. A suitable building had just been provided by the Government and a sum of money voted for its upkeep. He hoped that during 1888, with the assistance of the Women's Protection Ordinance (passed on 9th May 1887, see above), much good would be done, and a permanent Home for the rescue of unfortunate females and children established with increasing benefit to the moral interests of the whole Colony. In 1887, 68 women applied for protection, 15 were sent back to relatives in China. 41 prostitutes left their brothels to live as wives with Chinese.³¹

"On the 4th January 1888, it was made known to the patients that their longer stay in hospital would be entirely voluntary on their part, and they could elect to stay or leave, on which the whole number left, and 141 centres of infection were thus scattered among the general population."³²

"The repeal of the compulsory clauses of the Contagious Diseases Ordinance has practically rendered the Lock Hospital useless. Very few women have sought admission, and of those admitted, many left before they were cured.....³²

"Only a few Japanese seen and treated "33

These facts were reported to the Secretary of State, but when the draft of the new Ordinance for the Protection of Women and Girls was forwarded to him for his approval, he promptly replied, "Introduce Ordinance at earliest opportunity...."³⁴ (For provisions of the Ordinance, see below).

At the Legislative Council meeting of 19th November 1888, the Attorney-General moved the first reading of the Bill "to amend the Law relating to the Protection of Women and Girls."³⁵

At the next meeting on 28th November, ³⁶ before moving the second reading, he drew the attention of the Councillors to the Memorandum of Objects and Reasons of the Bill. It was there stated that the principal object of the Bill was to repeal the Contagious Diseases Ordinances and to adopt an entirely new system in dealing with prostitution. The existing law endeavoured to protect the public against the consequences of vice. The Secretary of State was of opinion, and that opinion was shared by the great majority of the English people, that a system of that kind was radically bad, and he had therefore sent out peremptory instructions to abolish it. It was not proposed to interfere in future with prostitution except in so far as may be absolutely necessary for the protection of unfortunate Asiatic women against oppression and brutality on the part of persons who derived profits from the trade of brothel-keeping. It was considered that European women needed no special protection and were capable of looking after themselves.

Members of the Council knew that it was futile to protest, but all the same, insisted on having their say.³⁶

"Although, Sir, I fear anything that may be said at this table can produce any effect. Instead of the arguments being met with arguments, instead of meeting or contesting instances advanced and proceeding to deal with them, there has been the one stereotyped reply, that it is the will of the Imperial Parliament. In short, that the principle has been accepted at home, and whatever the effect, in all circumstances, in all events, it is to be indiscriminately applied, in spite of local requirements, in spite of local opinion and disastrous results. Singapore, the halting place between East and West

large numbers of vessels passing through, passengers and seamen.... 'prepared under the instructions of the Secretary of State and has been approved by him' — what does that mean?...."

".... Everyone is aware of the feeling at home, and of the pressure put upon the Imperial Parliament with regard to this matter, and no one can consider it without being aware that it is absolutely useless for this Council and the Colony to oppose itself to what is now the policy of the British Parliament with regard to it. We know perfectly well that the abolition of the Contagious Diseases Ordinances has been settled in spite of the protests of the chief officials in England, of officials in India and of the great bulk of the thinking people there, and I would say, has been enforced for what I may call sentimental reasons.... conditions different here.... enormous preponderance of males....."

The Governor apologised for being the mouth-piece and cat's — paw of the Secretary of State, while predicting the dire consequences that would surely follow:³⁶

"It is happily very rare that it devolves on a Governor to introduce legislation against which he has distinctly advised the highest authority he has to recognise in legislative matters. I have explained my objections in the strongest manner in my despatch to the Secretary of State but they have had no effect whatever, and in the result there is nothing for me to do but to pass the Ordinance through the Council.... Speaking on behalf of the unfortunate women who are going to a considerable extent, to be thrown upon their own resources by this Bill, I fear our legislation will have the most disastrous effect; and not only for them, but to Her Majesty's Forces, Naval and Military. It is no secret that throughout the East, the amount of contagious diseases which has already resulted from the partial repeal of the existing Ordinance, is excessive; and if it has become excessive during the few months that the Ordinance has by direction of the Secretary of State, been inoperative, it is not difficult for any sensible man to see what it will be in a few years. I regret being the mouth-piece of the Secretary of State on this occasion, but it is my duty, as I have stated, to ask the Council to pass this measure. . . . "

The Bill was read a second time. The Council went into committee on 12th December 1888,³⁷ and the Bill was read a third time on 19th December 1888 and passed³⁸ (Ordinance XIV of 1888).

A brief summary of the Ordinance would not be out of place. The Ordinance repealed the Contagious Diseases Ordinances 1870, 1873 and 1875, and the Women and Girls' Protection Ordinance 1887. Part I dealt with Offences against Women and Girls, e.g. selling, buying or hiring girls under sixteen years for prostitution; bringing females into the Colony by fraudulent or deceitful means for prostitution or receiving or harbouring such women. Part II was a re-enactment of the Women and Girls' Ordinance 1887 by which the Protector of Chinese was vested with powers for rescuing women and young girls from a life of slavery. Provision was made in Part III for requiring all brothels occupied by Asiatic women to be registered, and non-registration was made an offence. Brothels used or occupied exclusively by women who were not Asiatic were exempted. Part IV mainly reenacted the "general provisions". Section 18 gave the Governor widest powers to make all regulations for giving

effect to the objects of the Ordinance, which was to come into force on 1st January 1889.

As predicted, the effects of the Ordinance from the medical point of view were disastrous (see below). Immediate effects had, however, been felt when compulsory examination and treatment were stopped on 1st January 1888, on the instructions of the Secretary of State.³²

The Lock Hospital was converted into a voluntary institution. Certain alterations were made to the buildings. The Examination Ward and the ward near it were fenced in, and handed over to the Protector of Chinese as a Home under the Protection of Women and Girls' Ordinance 1887. Ward 8 was converted for examination purposes, and the remaining seven wards were reserved for the accommodation of patients; of these, only two were utilised during 1888.

At the beginning of 1888, there were 141 patients in hospital, the majority suffering from the worst type of venereal disease. When told on 4th January that the authorities had no power to compel them to remain in hospital, they all left, potential sources of infection.

The total number of examinations of women who came voluntarily (many were examined several times) during the year (1888) was 1,932, of which 181 were of Europeans, 1629 of Japanese, 89 of Chinese, 17 of Malays and 16 of natives of India. The percentage of diseased women was 14.5 as against 4.2 in 1887, a high increase within the lapse of so short a period after the abolition of compulsory examinations. "This result cannot but lead to the inference that with a longer interval, amuch higher rate of disease will be found", wrote the Surgeon in charge. The number of Chinese who came for examination was very small considering that the estimated number of Chinese prostitutes was well over 2,000.

Efforts were made by the medical authorities to save the situation. An out-patient department was started in the Lock Hospital for the benefit of women who wanted treatment but did not wish to be admitted. 391 patients were seen during the year, but the greater number attended very irregularly and discontinued their visits before they were cured, the result being far from satisfactory.

The number of cases of venereal diseases admitted into the General and Pauper Hospitals in 1888 far exceeded those in 1887, and the Principal Civil Medical Officer sarcastically remarked, "I am fully aware, of course, that this increased prevalence of venereal disease is not accepted as a valid reason against the repeal of the compulsory clauses of the Ordinance."

In 1888, there were 3,164 female immigrants, many of whom were connected with the brothels as prostitutes, servants or keepers. The monthly average of prostitutes registered in Singapore was 2,124, and the average number of brothels, 235. There arrived from China in 1888, 1218 women, who registered as willing prostitutes in Singapore and Penang. The Home established at Kandang Kerbau gave shelter to 32 women and girls under the powers given to the Protector of Chinese by the Women and Girls' Protection Ordinance 1887. Nine distressed women were sent back to their homes in China. 73 women from brothels in Singapore were married before the Protector. Most of these did so against the will of the keepers. During the year, the Protector personally questioned all the inmates of brothels as to their willingness to remain in them.³⁹

An interesting and relevant side-light will be quoted from the Hong Kong Telegraph of 4th January 1889, which referred to "The Traffic in Human Flesh for Singapore."⁴⁰

".... A man was charged in Court with having enticed a girl out of the Colony. He and his sister-in-law sold her to be a prostitute in Singapore, and a Chinese ship's steward found her there, re-purchased her for \$220 and brought her back....."

The new Ordinance for the Protection of Women and Girls came into force on 1st January 1889. To make matters worse, in early 1889 further instructions came from the Secretary of State.44 Under those instructions, in February 1889, periodical medical examinations (voluntary) and the granting of certificates of freedom from disease were discontinued. Orders were given that prostitutes were to be examined as and when they presented themselves. They were not to be given appointments for examinations as this gave the impression of compulsion. Certificates of having been examined and found free from disease were not given any more to women who asked for them. These had continued to be issued in 1888 in the hope of encouraging the prostitutes to come voluntarily for examination, but this step was considered by the Secretary of State as an attempt to circumvent his instructions regarding compulsory examinations and the Ordinance. Certificates had formerly been given after compulsory examinations. There was straightaway a falling off in the number of attendances. During January, 176 women came up for examination, whilst there were only 140 examined during the remaining eleven months, or a total of 316 for the year. Of these, 129 were found diseased, the majority with advanced disease, because in the absence of compulsory examination, early detection was difficult.

The practice of granting certificates was considered a necessary evil. It was not favoured by the Principal Civil Medical Officer as a certificate could easily be transferred by a healthy woman to a diseased one, and thus the grantor of the certificate might unconsciously become instrumental in spreading disease. But he did not think that Chinese and Japanese prostitutes would cooperate in the absence of this inducement, which was of benefit financially to them:³²

".... As I understand the new regulations.... I take it that the object aimed at is not to induce healthy women to come up for examination, but to encourage women who may be sick, or who may think they are sick, to do so, and if advisable, to seek treatment in hospital. Anyone who is acquainted with the character of Chinese women (at least of Chinese women as found in the Straits Settlements) cannot be but of opinion that any hope of success in this direction must be utterly futile. These women do not care in the least if they are sick, do not understand the gravity of the danger incurred by others to whom they may communicate disease, and are, in my opinion, quite unfit to act as free agents in the matter.

The Japanese women may not be quite so careless of themselves or others as the Chinese, but I shall be astonished if, now that no certificates are given, more than a few present themselves for examination...."

He was not far wrong in his opinion of the Chinese and

Japanese women. A number of petitions were sent in to Government by the women praying that the periodic examination be held and the certificates granted as previously. As it was not possible to grant these requests, the women obtained certificates from private medical practitioners. Some idea of the failure of the efforts of Government in encouraging voluntary examination may be gathered from the fact that although the estimated number of prostitutes was well over 2000, only 316 presented themselves for examination throughout the year (1889), this number including possibly in frequent instances, different examinations of the same women on different occasions.⁴¹

Voluntary admissions into the former Lock Hospital amounted to only 122 for 1889 (13 Europeans, 107 Japanese, 1 Malay, 1 native of India). No Chinese woman asked for or agreed to admission. Some of the cases came to hospital only as a last resort, e.g. one Japanese woman who had lost one eye as a result of venereal disease, was admitted for suppurative keratitis of the remaining eye and secondary syphilis. The eye was removed with her consent.⁴¹

In the Outpatients' Department of the Hospital, only 204 patients received treatment, of whom 45 were Europeans, 155 Japanese, 3 Malays and 1 native of India. Once again, no Chinese.⁴¹

In the European Ward of the General Hospital, there were 46 admissions for venereal diseases as against 22 in 1888.⁴¹

The Municipal Commissioners were also very concerned about the evil which had arisen as a result of the repeal of the Contagious Diseases Ordinance. At their September 1889 meeting, there was a proposal that in the interests of public health, steps should be taken to frame regulations to deal with it. Because of the law and the policy of Government, it was resolved that a Committee be appointed to study the problem and make recommendations to Government that provision be made in the forthcoming Municipal Amending Ordinance under which prostitution might be regulated.42 After receiving the report of the Committee, no further action was taken.43 Government policy could not be circumvented so easily. When the Ordinance to amend the Municipal Ordinance 1887 was passed on 12th December 1889, there was no mention of prostitution in it.

The new Ordinance for the Protection of Women and Girls worked smoothly during 1889. The Home for girls under sixteen at Kandang Kerbau was placed under the supervision of the Po Leung Kuk Committee. The effect of the arrests made in Singapore of girls brought up to a life of prostitution and their subsequent committal to the Home, was that large numbers were sent back to China or out of jurisdiction, to Johore. The people who had vested interests did not give up easily. All means were tried to maintain the status quo. An attempt was made during the year to upset the working of the Ordinance by an appeal to the Supreme Court, but on the case coming up before the three Judges, they declined to interfere with the action of the Protector.⁴⁴

The monthly average of prostitutes registered in 1889 in Singapore was 2067, and the num ber of brothels, 226.44

The situation in 1890 was about the same, possibly worse. Venereal disease was reported to be still increasing both as regards the number of cases met with and the severity of type. Very little work was done in the former Lock Hospital. Very few Chinese prostitutes came up for examination or admission, although disease of a virulent type existed among them as evidenced by the condition of the male patients treated at Tan Tock Seng Hospital and the Outpatient Dispensary. Malays and Indians also did not turn up for examination. The medical facilities were made use of most by the Japanese.⁴⁵

The Secret Societies continued to be active in "protecting" brothels and prostitutes.⁴⁶

Thus ends a brief account of prostitution and venereal diseases in early Singapore.

APPENDIX

RULES OF THE SOCIETY FOR THE PROTECTION OF WOMEN AND CHILDREN.⁴⁷

- The object of the Society is to aid in the suppression of the crime of kidnapping and to provide for the rescue and restoration to their families or friends of women and children who may require assistance or protection.
- 2. The Society shall consist of members who being residents of the Colony, subscribe two dollars a year.
- 3. The Society shall be managed by a Head Committee sitting in Singapore and by Sub-Committees in Penang and Malacca. Each Committee shall consist of not less than five nor more than ten Members. Three Members shall form a guorum.
- 4. The Protector of Chinese in Singapore and the Assistant Protector of Chinese in Penang shall be ex-officio Members and Chairmen of the Committees in those Settlements, and the Chief Police Officer shall occupy the same position in Malacca.
- 5. The Committees (with the exception of the ex-officio members) shall be elected annually by subscribers of the Society at a meeting to be called in January in each year. Vacancies, in default of election, may be filled up by nomination of the Governor.
- 6. The Committee shall elect one of its Members to be Secretary and Treasurer, who shall keep a record of the working of the Society, Minutes of the Meetings of the Committee and the accounts of the Society, which shall be submitted to the Government to be annually audited.
- 7. The Society will endeavour by correspondence and enquiry to assist in the detection and bringing to justice of persons guilty of kidnapping and kindred offences. It will adopt all available means to restore rescued women and children to their relations, and in the case of those who are friendless to make such provision as may be proper for their welfare. The Home already established by the Government of Singapore will be at the disposal of the Society.
- The Committee may, from time to time, make, vary or revoke rules for the management of the affairs of the Society and its servants; but no rule shall have effect until it has received the approval of the Governor.

31st March 1885.

His Excellency the Acting Governor has been pleased to appoint the following gentlemen to be the original

members of the Committee of a Society for the Protection of Women and Children, viz:47

The Protector of Chinese, ex-officio Chairman. The Consul for China, Singapore. Seah Cheo Seah, Esq. Tan Kim Ching, Esq. Than Chun Fook, Esq. Wee Boon Tek, Esq. Tan Beng Gam, Esq. Lee Cheng Yen, Esq.

By His Excellency's Command, A.M. SKINNER. Acting Colonial Secretary.

Colonial Secretary's Office. 25th June 1885.

Tan Keng Swee, Esq.⁴⁸ and Tan Kiong Sek, Esq.⁴⁹ were added to the list of Members in July and September 1885 respectively.

REFERENCES

ABBREVIATIONS USED

A.R.	=	Annual Report of the Medical Department Singapore.
A.R.,C.P.	=	Annual Report of the Chinese Protectorate, Singapore.
FROM S.S	. =	Despatches from the Secretary of State for the Colonies to the Governor of the Straits Settlements.
GAZETTE	=	Straits Settlements Government Gazette.
LEGCO	Ξ	Proceedings of the Legislative Council, Straits Settlements.
S.D.T.	=	Singapore Daily Times.
S.T.	=	Straits Times.
TO S.S.	=	Despatches from the Governor of the Straits Settlements to the Secretary of State for the Colonies.

- 1. A.R. 1872.
- 2. TO S.S (13.2.1873).
- 3. S.D.T. (2.6.1873).
- 4. A.R. 1873.
- 5. Annual Report of the Lock Hospital, 1873.

6. FROM S.S. (2.4.1873). 7. GAZETTE (7.4.1876). 8. LEGCO. (2.4.1877). 9. A.R. 1877. 10. A.R. 1878. 11. A.R. 1879. 12. A.R., C.P. 1879. 13. A.R., C.P. 1880. 14. A.R. 1880. 15. A.R., C.P. 1881. 16. A.R. 1882. 17. A.R. 1883. 18. A.R. 1884. 19. A.R., C.P. 1884. 20. A.R. 1885. 21. A.R., C.P. 1885. 22. A.R. 1886. 23. A.R., C.P. 1886. 24. FROM S.S. (25.10.1886). 25. TO S.S. (2.4.1887) 26. FROM S.S. (2.7.1887). 27. TO S.S. (10.9.1887). 28. FROM S.S. (8.11.1887). 29. TO S.S. (30.12.1887). 30. A.R. 1887. 31. A.R., C.P. 1887. 32. A.R. 1888. 33. TO S.S. (30.1.1888). 34. FROM S.S. (12.10.1888). 35. LEGCO. (19.11.1888). 36. LEGCO. (28.11.1888). 37. LEGCO. (12.12.1888). 38. LEGCO. (19.12.1888). 39. A.R., C.P. 1888. 40. S.T. (11.1.1889). 41. A.R. 1889. 42. GAZETTE (8.11.1889). 43. GAZETTE (6.12.1889). 44. A.R., C.P. 1889. 45. A.R. 1890. 46. A.R., C.P. 1890. 47. GAZETTE (3.7.1885). 48. GAZETTE (10.7.1885). 49. GAZETTE (25.9.1885).