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Faith, Medicine, and Imperial Edges: Christian Missionaries in the North-West Borderland of British India (1849–1947)

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ABSTRACT

This research paper examines the history, dynamics, and structural impact of Protestant Christian missionary activity—primarily spearheaded by the Church Missionary Society (CMS) and the Church of England *Zanānah* [female] Missionary Society (CEZMS)—along the North-West Borderland of British India from the annexation of the Punjab in 1849 to the partition of British India in 1947. Situated at the crossroads of Central Asia and the South Asian subcontinent, the North-West Frontier Province (NWFP, established in 1901) was defined by its geopolitical volatility, intense Pashtun tribal autonomy, and Islamic orthodoxy.

By analyzing the intersection of evangelical zeal, medical diplomacy, imperial strategy, and indigenous resistance, this paper demonstrates that missionary work along the frontier diverged significantly from that in central and southern India. Deprived of large-scale conversions, frontier missionaries pivoted toward institutional "pre-evangelism"—most notably through medical humanitarianism and educational infrastructure. Figures such as Dr. Thomas Theodore Pennell (1867-1912) of Bannu, Rev. Robert Clark (1825-1900), Rev. Thomas Patrick Hughes (1838-1911), and Lillian Starr (1885-1977) transformed hospitals and schools into critical sites of cross-cultural encounter. Ultimately, while missionary efforts yielded sparse religious conversions among the Pashtun tribes, they profoundly shaped regional public health, Pashto scholarship, Zanānah (female) medical care, and political diplomacy between the British Raj and autonomous tribal clans. In this research the Transliteration Table of the journal of Islamic Studies of Islamic Research Institute (IRI) of International Islamic University, Islamabad (IIUI) has been followed.

Keywords: *Christian, Missionaries, North-West Borderland, British India, Faith, Medicines.*

1. Introduction: The Frontier as an Evangelical and Imperial Contact Zone

1.1. The Geopolitical and Topographical Landscape of the North-West Frontier

The North-West Borderland of British India, encompassing the rugged, mountain-ribbed terrain spanning the Indus River westward to the Hindu Kush and Sūlīmān ranges, occupied a unique position in the nineteenth- and

twentieth-century imperial imagination. Following the collapse of the Sikh Empire under Maharaja Ranjit Singh and the formal annexation of the Punjab by the British East India Company in March 1849, the British state inherited a highly volatile, porous borderland populated by independent Pashtun (*Pathān*) tribes.[1]

Divided structurally between the directly administered "settled districts"—Peshawar, Hazara, Kohat, Bannu, and Dera Ismail Khan—and the autonomous "tribal agencies" along the Afghan frontier, this region resisted standard bureaucratic assimilation.[2]

When Sir Henry Mortimer Durand 1850-1924) negotiated the Durand Line in 1893 with Amïr Abdur Rahman Khan (1840/1844-1901) of Afghanistan, the resulting international boundary arbitrarily bisected Pashtun tribal lands, dividing clans such as the Mohmands, Shinwaris, Achakzais, and Wazirs.[3] In 1901, Viceroy Lord Curzon (1859-1925) carved the North-West Frontier Province (NWFP) out of the Punjab, formalizing an administrative duality. In the settled districts, British law applied alongside civil courts. In the adjacent tribal agencies, governing power was delegated to political agents who managed relations with tribal *jïrgahs* (councils of elders) using a combination of subsidies, collective punishments, and the Frontier Crimes Regulation (FCR)—a body of law first enacted in 1872 and revised in 1901.[4]

The topography of the region—marked by narrow passes such as the Khyber, Kurram, Tochi, and Gomal—served both as historic trade corridors connecting South Asia with Central Asia and as defensive choke points against external invasion. The indigenous Pashtuns organized their societal lives around *Pashtünwali*, an unwritten ethical code emphasizing personal and tribal honor (*ʿẓẓat*), revenge (*badal*), hospitality (*mïlmastïah*), and asylum (*panāh*). These social norms operated alongside a commitment to Sunni Islam, creating a resistant cultural framework against non-Muslim political authority.[5]

1.2. The Imperial Frame: "Forward Policy" versus "Close Border" Policy

Throughout the late nineteenth century, British frontier governance was marked by strategic debate between two administrative doctrines:

The "Close Border" Policy: Associated with administrators such as Sir John Lawrence (1811-1879) (Chief Commissioner and later Viceroy of India), this approach advocated maintaining British presence within the settled administrative boundaries along the Indus plain, deliberately avoiding military interventions into the tribal highlands.[6]

The "Forward Policy": Formulated by military strategists including Sir Henry Creswicke Rawlinson (1819-1895) and Lord Robert Lytton (1831-1891), this doctrine argued that British security required garrisoning strategic mountain passes, occupying key footholds inside tribal territories, and securing political influence over Afghanistan to counter Russian expansion during the "Great Game".[7]

Protestant missionaries developed their own religious variant of the "Forward Policy." Evangelical leaders viewed the borderland not merely as an imperial buffer, but as an evangelical gateway through which Christianity could enter Afghanistan, Turkestan, and the broader Islamic world of Central Asia.[8] Rev. Robert Clark, one of the founders of the Church Missionary Society (CMS) Punjab mission, described Peshawar as "the key of Central Asia," writing that "the highway to Central Asia lies through Peshawar, and if we can establish a strong mission here, we shall be able to send the Gospel into regions where no European missionary can himself set foot".[9]

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[1] Sir Olaf Caroe, *The Pathans, 550 B.C.–A.D. 1957* (London: Macmillan & Co., 1958), 321–325.

[2] Lal Baha, *N.W.F.P. Administration Under British Rule, 1901–1919* (Islamabad: National Commission on Historical and Cultural Research, 1978), 14–18.

[3] James W. Spain, *The Pathan Borderland* (The Hague: Mouton & Co., 1963), 112–115.

[4] Sana Haroon, *Frontier of Faith: Islam in the Indo-Afghan Borderland* (London: C. Hurst & Co., 2007), 34–38.

[5] Akbar S. Ahmed, *Millennium and Charisma among Pathans: A Critical Essay in Social Anthropology* (London: Routledge & Kegan Paul, 1976), 45–49.

[6] Charles Allen, *Soldier Sahibs: The Man Who Made The Northwest Frontier* (London: John Murray, 2000), 188–192.

[7] C. C. Davies, *The Problem of the North-West Frontier, 1890–1908* (Cambridge: Cambridge University Press, 1932), 67–71.

[8] Eugene Stock, *The History of the Church Missionary Society: Its Environment, Its Men and Its Work*, vol. 2 (London: Church Missionary Society, 1899), 204–208.

[9] Robert Clark, *The Missions of the Church Missionary Society and the Church of England Zenana Missionary Society in the Punjab and Sindh* (London: Church Missionary Society, 1904), 38.

This religious ambition existed in tension with official imperial policy. While individual British military and civil officers—such as Sir Herbert Benjamin Edwardes (1819-1868), Sir Robert Montgomery (1809-1887), and Sir John Lawrence (1811-1879) —frequently provided personal financial support and moral backing to mission societies, the official stance of the East India Company and the British Crown after the 1857 Indian Uprising mandated religious neutrality.[10] Colonial administrators recognized that overt state sponsorship of Christian proselytization along the frontier risked triggering armed tribal uprisings (*jihãds*). Consequently, government policy oscillated between private patronage of missionary institutions by devout officers and public enforcement of restrictions on missionary movements near tribal lines.[11]

1.3. Evangelical Ideology and the "Central Asian Gateway" Thesis

The intellectual rationale for establishing mission outposts on the North-West Frontier was rooted in nineteenth-century British evangelical theology. Following the Great Awakening and the rise of voluntary societies like the CMS (founded in 1799), British evangelicals viewed the territorial expansion of the British Empire as a providential mandate to spread the Gospel.[12]

In the frontier context, this ideology acquired a distinctive geographic focus. Missionaries developed what can be called the "Central Asian Gateway" thesis—the conviction that establishing Christianity among Pashtun tribes would create a domino effect across Islamic Central Asia.[13] This perspective was reinforced by contemporary theories regarding Pashtun ethno-genesis. Scholars and missionaries, including Sir William Jones (1746-1794) and Rev. Isidore Loewenthal (1827-1864), debated the hypothesis that Pashtuns were descendants of the "Ten Lost Tribes of Israel" (the *Bani Israel* theory), pointing to tribal genealogical traditions (*Sultan-i-Afghani*), physical features, and cultural practices such as blood sacrifices and family purification rituals.[14]

While modern historical and genetic research has disproved the *Bani Israel* thesis, in the nineteenth century it invested frontier mission work with millenarian significance. Evangelicals believed that converting the Pashtuns would fulfill biblical prophecies regarding the restoration of Israel and the ultimate spread of Christianity throughout Asia.[15]

1.4. Historiographical Context and Analytical Framework

The history of Christian missions in British India has undergone significant historiographical shifts over the past half-century. Early mission histories, written primarily by missionary participants or society secretaries such as Eugene Stock, presented these endeavors as heroic narratives of moral progress, civilizing missions, and spiritual devotion.[16] In contrast, mid-twentieth-century nationalist and Marxist historiographies frequently reduced Christian missionaries to ideological agents of Western imperialism, viewing them as spiritual vanguard forces for British colonial expansion.[17]

More recent scholarship—notably by Jeffrey Cox, Andrew Porter, Gerald Studdert-Kennedy, and Sana Haroon—offers a nuanced analytical framework.[18] Postcolonial scholars emphasize that while missionaries functioned within the structural framework of colonial power, their agendas frequently diverged from, or directly conflicted with, the strategic goals of the imperial state. As Cox demonstrates in *Imperial Fault Lines*, mission societies maintained distinct institutional identities, financial networks, and ideological priorities that generated friction with colonial administrators.[19]

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[10] Jeffrey Cox, *Imperial Fault Lines: Christianity and Colonial Power in India, 1818–1940* (Stanford, CA: Stanford University Press, 2002), 54–58.

[11] Andrew Porter, *Religion versus Empire? British Protestant Missionaries and Overseas Expansion, 1700–1914* (Manchester: Manchester University Press, 2004), 142–146.

[12] Gerald Studdert-Kennedy, *British Christians, Indian Nationalists and the Raj* (Oxford: Oxford University Press, 1991), 82–85.

[13] Clark, *The Missions of the Church Missionary Society*, 42–44.

[14] Isidore Loewenthal, "The Afghans," *The Oriental Christian Spectator* 31, no. 7 (July 1860): 241–248.

[15] Stock, *The History of the Church Missionary Society*, vol. 2, 210–212.

[16] *Ibid.*, 215.

[17] K. M. Panikkar, *Asia and Western Dominance: A Survey of the Vasco Da Gama Epoch of Asian History 1498–1945* (London: George Allen & Unwin, 1953), 280–284.

[18] Cox, *Imperial Fault Lines*, 12–16; *Haroon, Frontier of Faith*, 52–55.

[19] Cox, *Imperial Fault Lines*, 88–92.

Furthermore, scholars of medical history such as David Hardiman and Rosemary Fitzgerald have highlighted the role of medical missions as complex sites of cultural negotiation.[20] In border areas where religious conversion rates remained negligible, medical and educational institutions functioned as contact zones where Western medicine and indigenous healing practices, Christian evangelical ambitions, and Pashtun social codes (*Pashtūnwali*) intersected.

This paper builds on this historiography, analyzing how CMS and CEZMS missionaries along the North-West Frontier adapted their strategies in response to local socio-political conditions, shifting from direct theological debate to institutional pre-evangelism through medical care, education, and linguistic scholarship.

2. The Emergence of the CMS and Frontier Mission Stations (1853–1900)

2.1. Sir Herbert Edwardes, Robert Clark, and the Founding of the Peshawar Mission

Protestant mission work on the frontier began in December 1853 with the establishment of the Church Missionary Society station at Peshawar. The origin of the Peshawar Mission was atypical: rather than originating solely from mission board headquarters in London, it was initiated and financed by British military and civil officers serving on the frontier.[21]

In September 1853, Colonel Frederick Mackeson (1897-1853), Commissioner of Peshawar, was assassinated on his veranda by an Afghan assailant. His successor, Major (later Sir) Herbert Benjamin Edwardes, held strong evangelical convictions and belonged to the "Punjab School" of administration—a group of British officers who believed that Christian governance required open support for Christian institutions.[22] Shortly after assuming office, Edwardes convened a public meeting in Peshawar to establish a CMS mission station, contributing his own funds and collecting over 14,000 rupees from fellow officers.[23]

When critics within the colonial administration warned that introducing Christian missionaries into Peshawar—a city known for religious conservatism and political instability—might provoke armed rebellion, Edwardes defended his decision. In his address at the inaugural Peshawar Mission meeting on December 19, 1853, Edwardes stated:

> It is not the policy of the Government to interfere with the religion of its subjects... But we who are officers of that Government are free to give our private funds to Christian missions... Above all, we may be quite sure that the Christian machine will work best when it works openly... God has given us India, and we must do His work. The best policy is to do what is right. I say, then, open the Mission at Peshawar.[24]

Following Edwardes' public endorsement, the CMS dispatched the Rev. Robert Clark—a Cambridge wrangler and Anglican clergyman—alongside Dr. Carl Gottlieb Pfander to establish the station.25 Clark secured land inside the walled city at Gōr Gaṯhṛï, a historical site that had previously served as a Mughal caravanserai (a historical roadside travellers' inn with a large courtyard), a Hindu pilgrimage spot, and the residence of the Sikh governor General Paolo Avitabile.[26]

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[20] David Hardiman, *Healing Bodies, Saving Souls: Medical Missions in Asia and Africa* (Amsterdam: Rodopi, 2006), 105–110; Rosemary Fitzgerald, "Rescue the Sick: The Introduction of Medical Missions in India, 1870–1910', in *Intersecting Spheres: Medical Missions and Colonial Medicine*, ed. Biswamoy Pati and Mark Harrison (Delhi: Oxford University Press, 2001), 74–78.

[21] Emma Edwardes, *Memorials of the Life and Letters of Major-General Sir Herbert B. Edwardes, K.C.B., K.C.S.I.*, vol. 1 (London: Kegan Paul, Trench & Co., 1886), 230–234.

[22] Allen, *Soldier Sahibs*, 214–218.

[23] Edwardes, *Memorials*, vol. 1, 238.

[24] Herbert B. Edwardes, *Prospectus of the Peshawar Mission* (Peshawar: Church Missionary Society, 1853), quoted in Stock, *The History of the Church Missionary Society*, vol. 2, 212.

[25] Henry Martyn Clark, *Robert Clark of the Panjab: Pioneer and Missionary Statesman* (London: Andrew Melrose, 1907), 112–116.

[26] Worthington Jukes, *Reminiscences of Missionary Work in Peshawar and the Afghan Frontier* (London: Private Circulation, 1925), 8–11.

2.2. Religious Debates: Carl Gottlieb Pfander and Islamic-Christian Polemics

Dr. Carl Gottlieb Pfander, a German linguist who had served with the Basel Mission in the Caucasus before joining the CMS, brought a polemical approach to the frontier.[27] He was well known across the nineteenth-century Islamic world for his theological work, *Mīzān-ūl-Haq* (Balance of Truth), first written in German and later translated into Persian, Arabic, Urdu, and English.[28] The treatise systematically critiqued Islamic doctrines regarding the textual integrity of the Quran and the prophetic status of Muhammad, while presenting Christian doctrines of the Trinity and Atonement.

In Peshawar, Pfander engaged in open-air street preaching in the city *bāzārs* and held public disputations (*munāzarah*) with local *'lama* (Islamic scholars) and *mullahs*.[29] However, the frontier environment presented unique risks for direct polemics. Unlike the structured, scholarly public debate Pfander held in Agra in 1854 against Mōlvī Rahmat Ullah Kairanawi (1818-1891), open-air preaching in Peshawar frequently led to hostile crowds and civil unrest.[30]

Local Pashtuns often interpreted public attacks on Islam as direct insults to their personal and community honor (*'zzat*). Following the Indian Uprising of 1857, during which anti-British sentiment flared across northern India, the CMS gradually reassessed its methodology on the frontier.[31] Pioneer missionaries recognized that direct public polemics tended to alienate the population and elevate security risks. Consequently, the CMS shifted its focus from open-air *bāzār* preaching toward educational and medical institutions.[32]

2.3. Native Conversions, Subaltern Agents, and Martyrology

Throughout the nearly century-long history of British administration on the frontier, conversions among the Pashtun population remained rare. Those who converted faced severe social ostracization, physical violence, or execution under local interpretations of apostasy laws and tribal customs.[33] To survive, converts often had to relocate to Christian agricultural settlements in the central Punjab, such as Clarkabad or Montgomeryabad.[34]

One notable conversion on the frontier was that of Subedar Dilawar Khan (1816-1869)[35]. Born in the Khattak hills, Dilawar Khan had spent his early life as an outlaw and anti-British insurgent, raiding supply lines along the Indus River.[36] In the early 1850s, he accepted an amnesty offer from the British government and enlisted in the Queen's Own Corps of Guides—an elite unit composed of frontier troops.[37]

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[27] Avril A. Powell, *Muslims and Missionaries in Pre-Mutiny India* (London: Routledge, 1993), 132–136.

[28] Carl Gottlieb Pfander, *The Mizan-ul-Haqq; or, Balance of Truth*, trans. R. H. Weakley (London: Church Missionary Society, 1867), 15–22.

[29] Powell, *Muslims and Missionaries*, 140–144.

[30] *Ibid.*, 228–232.

[31] Stock, *The History of the Church Missionary Society*, vol. 2, 218–220.

[32] Clark, *The Missions of the Church Missionary Society*, 50–52.

[33] Haroon, *Frontier of Faith*, 60–63.

[34] Cox, *Imperial Fault Lines*, 145–148.

[35] Dilawar Khan Khattak (1816-1869) was a Pakhtun bandit looting the British supply lines in Khattak region alongside River Indus and River Kabul. The British put a "Carrot" before him under their "Carrot & Stick Policy" means they offered him lucrative opportunities to give up his looting activities against British and, in return, enjoy his partnership with British. He agreed and joined the Queen's Corp Guides. Later on, he rose to rank of Subedar in British Indian Army. Meanwhile, Khattak also could not escape the then prevailing influence of Christian Missionaries in British India and converted to Christianity. In 1869, British sent Khattak to Chitral as a spy to keep an eye on the nearby Russia. But, Mehta of Chitral became suspicious of him that he (Khattak) was spying against him (Mehta) not Russia for British. Hence, Mehta put Khattak into prison. However, he escaped Mehta's captivity and fled to Wakhan Belt in Afghanistan. He could not survive the harsh cold weather of Wakhan region. He became ill and fell into a deep ravine meeting his ultimate end in 1869. This story of Subedar Dilawar Khan Khattak and many other pro-British Pakhtuns tells a lot about the fact how the British Policy of "Carrot & Stick" and their sponsored "Christian Missionaries" made Pakhtuns loyal to British Raj. For more details about Delawar Khan, see Thomas Patrick Hughes, *Dilawar Khan, One of Its Leading Converts* (Peshawar: Peshawar Mission, 1871)., _____, *The Akhund of Swat, a Muhammadan Saint and Dilawar Khan, the Converted Afghan Brigand* (Lahore: Victoria Press, 1876).

[36] _____, *Some Account of the Afghans and of the Peshawar Church Mission* (Peshawar: Mission Press, 1877), 34–38.

[37] Allen, *Soldier Sahibs*, 245–248.

While stationed at Peshawar, Dilawar Khan encountered Rev. Robert Clark and Dr. Carl Pfander. Drawn into intellectual discussions regarding the claims of the Gospel and the Quran, he studied Urdu and Persian Christian tracts. In 1858, Dilawar Khan was baptized at the Anglican Church in Peshawar.[38]

Dilawar Khan's conversion was widely documented in CMS publications as evidence that even Pashtun warriors could accept Christianity.[39] His military status, knowledge of tribal customs, and willingness to debate local mullahs made him a prominent figure in mission literature. In 1869, while undertaking a covert intelligence mission for the British government into Chitral and Central Asia—traveling in disguise as an itinerant merchant—Dilawar Khan died of exposure in the snow-bound mountain passes of the Hindu Kush.[40] His death was presented in British mission literature as an example of loyalty and martyr-like devotion.

3. Healing at the Margins: Medical Missions and Humanitarian Diplomacy

3.1. Dr. Theodore Pennell and the Bannu Mission Hospital (1893–1912)

As direct proselytization yielded few conversions, medical humanitarianism became the primary strategy for Protestant missions along the frontier. The leading practitioner of this approach was Dr. Thomas Theodore Pennell, a medical missionary dispatched by the CMS in 1892.[41]

Arriving in Bannu in 1893, Pennell recognized that gaining access to autonomous tribal populations required adapting to local cultural norms. Pennell grew a long beard, adopted traditional Pashtun clothing [wearing *shalwār-qamīz* (shirt-trouser) and a *longī* (turban)], became fluent in Pashto and Persian, and maintained a dietary and hospitality routine modeled on traditional tribal practices.[42] In 1895, using personal funds provided by his mother, Pennell established the CMS Mission Hospital at Bannu.[43]

The Bannu Hospital functioned as a medical center and neutral site in a heavily armed region. Pennell performed thousands of ophthalmic operations—primarily cataract extractions using the knife extraction method—which restored sight to patients who had travelled long distances from across the Durand Line.[44] He also provided surgical treatment for gunshot wounds, bone fractures, tuberculosis, and malaria.

Pennell operated his hospital according to the Pashtun principle of *panāh* (asylum and protection). Warring tribal clans who were engaged in blood feuds in the hills agreed to suspend hostilities while inside the compound walls of the Bannu Mission Hospital.[45]

Feature / Metric	Details of Bannu CMS Hospital (1895–1912)
Founder	Dr. Thomas Theodore Pennell, M.D., B.Sc., F.R.C.S.
Primary Patient Demographics	Wazirs, Mahsuds, *Pawandas* (nomadic Afghan traders), local villagers
Key Medical Innovations	Ophthalmic surgery (cataracts), antiseptic field surgery, mobile dispensaries
Annual Patient Volume	Exceeded 15,000 outpatient consultations; 1,000+ major surgeries annually

[38] Clark, *Robert Clark of the Panjab*, 142–145.
[39] Stock, *The History of the Church Missionary Society*, vol. 2, 222–224.
[40] Hughes, *Some Account of the Afghans*, 40–42.
[41] Edith M. Pennell, *A Hero of the Afghan Frontier: The Life Story of T. L. Pennell* (London: Seeley, Service & Co., 1913), 32–36.
[42] Thomas Theodore Pennell, *Among the Wild Tribes of the Afghan Frontier: A Record of Sixteen Years' Close Intercourse with the Natives of the Indian Marches* (London: Seeley & Co., 1909), 48–52.
[43] Edith M. Pennell, *Pennell of Bannu* (London: Religious Tract Society, 1912), 24–28.
[44] Pennell, *Among the Wild Tribes*, 110–114.
[45] *Ibid.*, 118–122.

Feature / Metric	Details of Bannu CMS Hospital (1895–1912)
Branch Out-Stations	Thal, Karak, Tank, Sheikh Mahmud
Educational Parallels	Pennell High School and Boarding House

In his 1909 memoir, *Among the Wild Tribes of the Afghan Frontier*, Pennell explained his operational framework as under:

> The medical missionary goes where the military officer cannot enter, and cures those who would otherwise view every European with deep suspicion... A cataract operation performed in ten minutes opens not only physical eyes, but breaks down decades of religious prejudice... The hospital is a sanctuary where the rifle is laid aside, and men who met as enemies in the valley sit side by side on neighboring cots.[46]

Pennell's sudden death from septicemia in March 1912—contracted while treating his medical colleague, Dr. William Barnett, who had also fallen ill—led to widespread mourning across the region. Tribal chiefs, British officers, and local villagers gathered in Bannu for his funeral, honoring a man who had been awarded the Qaïsar-i-Hïnd Gold Medal by the Indian government and granted the title of Khãn by local tribesmen.[47]

3.2. Medical Neutrality, Itinerant Dispensaries, and Waziristan Operations

Following the success of the Bannu model, the CMS constructed a network of medical outposts along the administrative border, including facilities at Peshawar, Kohat, Tank, Dera Ismail Khan, and Quetta. Sir Henry Tristram Holland (1875-1865) was one of the prominent Christian Missionary doctors who played a significant role in Balochistan.[48]

These stations deployed itinerant mobile dispensaries that traveled into remote valleys during seasons of relative calm, bringing pharmaceuticals, smallpox vaccinations, and basic surgical care directly to tribal villages.[49] During periods of active conflict between the British Indian Army and Pashtun tribes—such as the Waziristan Campaigns of 1919–1920 and 1936–1939—missionary physicians maintained medical neutrality.

Wounded Pashtun warriors, often sought by political agents for raids in the settled districts, were treated alongside British and Indian military personnel.[50] This commitment to providing medical care without regard to political affiliation earned mission doctors a measure of protection, enabling them to travel unescorted through mountain passes where military convoys required armed guards.[51]

3.3. Women's Healthcare, *Pardah*, and *Zanãnah* Missions

Because strict gender segregation (*pardah*) prevented Pashtun women from receiving care from male physicians, hence, healthcare for women on the frontier was severely restricted throughout the nineteenth century.[52] Maternal mortality, infant death rates, and untreated gynecological conditions were widespread across both settled and tribal areas.

To address this gap, female medical missionaries operating under the Church of England *Zanãnah* Missionary Society (CEZMS) and the *Zanãnah* Bible and Medical Mission (ZBMM) established dedicated healthcare institutions for women.[53]

In Peshawar, the CMS and CEZMS established the Duchess of Connaught Hospital for Women in the late nineteenth century, staffed entirely by female doctors, surgeons, and nurses.[54] Pioneer female physicians—

[46] *Ibid.*, 114.
[47] Edith M. Pennell, *A Hero of the Afghan Frontier*, 210–215.
[48] Henry Holland, *Frontier Doctor: An Autobiography* (London: Hodder & Stoughton, 1958), 42–48.
[49] Hardiman, *Healing Bodies, Saving Souls*, 118–122.
[50] Holland, *Frontier Doctor*, 84–88.
[51] Pennell, *Among the Wild Tribes*, 130–134.
[52] Fitzgerald, "Rescue the Sick", 82–85.
[53] *Ibid.*, 88–92.

including Dr. Charlotte Wheeler, Dr. Alice Lillingston, Dr. Eleanor Dodson, and Dr. Cox—provided obstetric care, performed abdominal surgeries, and established pediatric and infant welfare clinics.[55]

Female medical missionaries gained access to private household quarters (*Zanãnah*), offering them insight into domestic life among Pashtun families.[56] While formal conversions among women remained rare due to severe domestic and societal sanctions, *Zanãnah* hospitals lowered maternal and infant mortality rates in Peshawar and surrounding villages, establishing long-term community relationships.[57]

4. The Diplomacy of Compassion: The 1923 Mollie Ellis Abduction Crisis and Lillian Starr

4.1. Tribal Raids, Customary Law (*Pashtūnwalī*), and Political Crisis

In April 1923, an abduction crisis demonstrated the diplomatic role medical missionaries could play on the frontier. On the night between April 13 & 14, 1923, a band of Afridi tribesmen led by Ajab Khan Afridi (1866-1961) raided the British military cantonment at Kohat.[58] During the raid, Mrs. Fieldhouse Ellis (1877-1923), the wife of a British military officer named Archibald Jenner Ellis, was killed, and her seventeen-year-old daughter, Mollie Ellis, was abducted and taken into the un-administered mountains of the Tirah valley.[59]

The abduction triggered an imperial political crisis. The British public demanded immediate military intervention to rescue Ellis and punish the captors. However, military strategists and the Chief Commissioner of the NWFP, Sir John Loader Maffey (1877-1969), recognized that launching an army division into the Tirah valley risked sparking a widespread war with the Afridi and Orakzai tribes.[60] Furthermore, an armed approach carried a high risk that the captors would execute the hostage before troops could reach the sanctuary.

4.2. Lillian Starr's Rescue Mission into Tirah

Faced with this impasse, Sir John Maffey turned to Lillian A. Starr, an experienced CMS nurse stationed at the Peshawar Mission Hospital.[61]Starr had lived on the frontier for years, spoke fluent Pashto, and was widely known among tribal families through her medical work. Crucially, her husband, Dr. Veronica Starr, had been murdered at the Peshawar hospital by a fanatic in 1918; despite this personal loss, Lillian Starr had chosen to remain in Peshawar to continue her medical work.[62]

Accompanied by a small escort of Afridi levies and local political intermediaries—including *Rïsâldãr*-Major Mūghūl Bãz Khan—Lillian Starr entered independent tribal territory in Tirah without a military guard.[63] She was the first European woman to enter this region of the frontier.

Relying on her medical reputation, her knowledge of Pashto, and the traditional respect accorded to women and guests under Pashtun customary law, Starr conducted negotiations with tribal elders and the kidnappers.[64] She framed her appeal within the parameters of *Pashtūnwalï*, arguing that the abduction of an unarmed young woman violated tribal standards of honor (*'ẓẓat*) and hospitality (*milmastiah*).

Within days, Starr secured the unconditional release of Mollie Ellis without firing a shot.[65] The successful resolution of the crisis prevented a costly military campaign in Waziristan and Tirah, earning Starr international attention and the *Qaïsar-i-Hïnd* Gold Medal.[66]

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[54] Clark, *The Missions of the Church Missionary Society*, 78–82.
[55] Jukes, *Reminiscences*, 28–32.
[56] Cox, *Imperial Fault Lines*, 162–166.
[57] Baha, *N.W.F.P. Administration Under British Rule*, 124–128.
[58] Lillian A. Starr, *Tales of Tirah and Lesser Tibet* (London: Hodder & Stoughton, 1924), 18–22.
[59] Spain, *The Pathan Borderland*, 148–152.
[60] Baha, *N.W.F.P. Administration Under British Rule*, 160–164.
[61] Starr, *Tales of Tirah*, 28–34.
[62] *Ibid.*, 12–15.
[63] *Ibid.*, 38–42.
[64] *Ibid.*, 45–50.
[65] *Ibid.*, 52–58.
[66] Spain, *The Pathan Borderland*, 154.

Starr's rescue mission demonstrated the distinct position held by missionary personnel along the frontier. Operating outside the formal military apparatus of the state, missionaries could leverage moral standing, linguistic fluency, and local relationships to mediate political crises where military force proved counterproductive.[67]

5. Linguistic Scholarship, Translation, and Ethnography

5.1 Thomas Patrick Hughes (1838-1911), and Pashto Philology

Beyond their medical and evangelical activities, Protestant missionaries made notable contributions to Orientalist scholarship, linguistics, and regional ethnography.[68] When British administrators arrived in the Punjab and NWFP in the mid-nineteenth century, they possessed limited textual reference materials regarding the Pashto language, tribal customary law, or Islamic jurisprudence specific to the borderland. Missionaries produced early dictionaries, grammar references, and literary anthologies to address these gaps.[69]

The first major linguistic milestone was achieved by the Rev. Isidore Loewenthal, a Polish-Jewish convert to Christianity sent to Peshawar in 1856 by the American Presbyterian Mission (working in collaboration with the CMS).[70] A polyglot fluent in Hebrew, Greek, Latin, German, French, Persian, Arabic, and Urdu, Loewenthal mastered Pashto within two years of his arrival. In 1863, he completed the first complete translation of the New Testament into Pashto, published by the British and Foreign Bible Society.[71] Loewenthal was killed in Peshawar in April 1864 when he was accidentally shot by his own watchman, ending a promising scholarly career.[72]

Following Loewenthal, the Rev. Thomas Patrick Hughes of the CMS Peshawar station emerged as a prominent nineteenth-century scholar of Pashtun culture and Islamic studies.[73] Recognizing that effective engagement required a clear understanding of both orthodox and folk Islam, Hughes spent years studying vernacular manuscripts and conversing with local *'lama*. In 1872, he got published a textbook titled as *Kalid-i-Afghãni* (*The Afghãn Key*), a compiled anthology of Pashto literature, tribal prose, historical narratives, and poetry.[74] Later on, this textbook was adopted by the British Indian Government as the official manual for civil and military officers taking Pashto language qualification examinations. For this purpose, in 1893, it was translated into English by Trevor Chichele Plowden (1846-1905).[75]

5.2. The Compilation of the *Dictionary of Islam* and Imperial Knowledge Production

In 1885, Thomas Patrick Hughes published his major scholarly work, the Dictionary of Islam: Being a Cyclopaedia of the Doctrines, Rites, Ceremonies, and Customs, together with the Technical and Theological Terms, of the Mūhammadan Religion.[76] Compiled largely during his two decades in Peshawar, the dictionary provided a systematic, encyclopedic analysis of Sunni and Shia jurisprudence, theological concepts, Sufi traditions, and local Islamic customs.

While Hughes' entries reflected nineteenth-century Western evangelical perspectives, the Dictionary of Islam was recognized for its textual detail, cross-referencing Arabic, Persian, and Urdu sources alongside field observations from the frontier.[77] The text served a dual function: it equipped missionaries with theological

[67] Haroon, *Frontier of Faith*, 88–92.
[68] Powell, *Muslims and Missionaries*, 180–184.
[69] Baha, *N.W.F.P. Administration Under British Rule*, 130–134.
[70]Stock, *The History of the Church Missionary Society*, vol. 2, 214–216.
[71] Isidore Loewenthal, *The New Testament Translated Into the Pashto Language* (London: British and Foreign Bible Society, 1863), preface, i–iv.
[72] Stock, *The History of the Church Missionary Society*, vol. 2, 216.
[73] Powell, *Muslims and Missionaries*, 188–192.
[74] T. P. Hughes**,** *Kalid-i-Afghani* (Lahore: Punjab Educational Press, 1872).
[75] Trevor Chichele Plowden, *Translation of the Kalid-i-Afghani: The Text Book For The Pakkhto Examination With Notes Historical, Geographical, Grammatical, and Explanatory* (Lahore: Munshi Gulab Singh and Sons, 1893).
[76] Thomas Patrick Hughes, *A Dictionary of Islam: Being a Cyclopaedia of the Doctrines, Rites, Ceremonies, and Customs, together with the Technical and Theological Terms, of the Muhammadan Religion* (London: W. H. Allen & Co., 1885), v–x.
[77] Powell, *Muslims and Missionaries*, 194–196.

background for religious discussions, while providing colonial officials with an analytical reference manual for navigating Islamic law and customary practices in the settled and tribal districts.[78]

5.3. Vernacular Translation and Printing Infrastructure

To support their educational and evangelical activities, mission societies established vernacular printing infrastructure along the frontier and in neighboring Punjab cities.[79] The CMS Mission Press in Peshawar, alongside the Punjab Religious Book Society in Lahore, produced thousands of Pashto, Persian, and Urdu pamphlets, medical handbooks, educational primers, and scriptural translations.[80]

Missionaries including the Rev. Worthington Jukes completed the translation of the Old Testament into Pashto in the late 1880s, completing the Pashto Bible.[81] These texts were distributed through hospital waiting rooms, mission schools, and itinerant book depositories (*colportage*), establishing a printed presence for the Pashto language during a period when vernacular publishing remained limited.[82]

6. Educational Initiatives, Local Responses, and Counter-Proselytization

6.1. Edwardes Church Mission College and Native Literacy

Alongside medical outreach, education constituted a major pillar of CMS strategy on the frontier. In 1855, the CMS established the Peshawar Church Mission School in the heart of the old city.[83] In 1900, under the leadership of Rev. Sir Herbert Hoare and Rev. Hoare, this school expanded into Edwardes Church Mission College—the first institution of higher education established in the North-West Frontier Province.[84]

Edwardes College admitted students from across religious communities—Muslims, Hindus, and Sikhs.[85] Its curriculum combined Western scientific, mathematical, and literary education with daily moral instruction and biblically-based ethical readings.

For young Pashtuns and urban residents of Peshawar, Edwardes College provided a path to university education, civil service appointments, and legal careers within the British Indian administration.[86] Prominent Muslim families sent their sons to Edwardes College due to its academic standards, despite concerns regarding potential Christian proselytization. The college educated a generation of regional professionals who balanced traditional identity with modern qualifications.[87]

6.2. Indigenous Resistance, Mullah-Led Opposition, and Islamic Reform

The presence of Christian missions generated persistent counter-reactions from local Islamic religious leaders and social movements along the frontier.[88] *Mullahs* frequently denounced mission schools and hospitals as instruments of imperial influence designed to undermine Islamic faith (*aïmān*) and traditional social structures.[89]

Opposition to missionary institutions manifested in several forms:

Religious Decrees (*Fatwas*): Local religious leaders issued decrees declaring attendance at mission schools religiously forbidden (harām), warning parents that sending children to CMS institutions risked compromising their religious heritage.[90]

Social and Physical Penalties: Individuals who converted faced social ostracization, physical assault, or execution under local customary practices.[91] Consequently, many converts were relocated to Christian settlements in the central Punjab for protection.

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[78] Cox, *Imperial Fault Lines*, 110–114.
[79] *Ibid.*, 118–122.
[80] Clark, *The Missions of the Church Missionary Society*, 92–96.
[81] Jukes, *Reminiscences*, 44–48.
[82] Stock, *The History of the Church Missionary Society*, vol. 3, 188–192.
[83] *Ibid.*, vol. 2, 213.
[84] Baha, *N.W.F.P. Administration Under British Rule*, 138–142.
[85] Jukes, *Reminiscences*, 52–56.
[86] Baha, *N.W.F.P. Administration Under British Rule*, 144–148.
[87] Cox, *Imperial Fault Lines*, 178–182.
[88] Haroon, *Frontier of Faith*, 98–102.
[89] Ahmed, *Millennium and Charisma among Pathans*, 78–82.
[90] Haroon, *Frontier of Faith*, 104–108.

Institutional Counter-Mobilization: In response to Christian educational initiatives, Muslim reform movements established independent educational institutions.[92] Organizations such as the Anjuman-i-Himayat-i-Islam established Muslim schools throughout the province.

The Founding of Islamia College (1913): To provide an alternative to Edwardes College, Nawab Sir Sahibzada Abdul Qayyum (1863-1937) and Sir George Roos-Keppe (1866-1921) established Islamia College Peshawar in 1913.93 Islamia College combined modern higher education with Islamic instruction, serving as an educational center for Pashtun leadership.

6.3. The Khudai Khidmatgar Movement and Anti-Colonial Adaptations

In the late 1920s and 1930s, Khan Abdul Ghaffar Khan alias Bacha Khan (1880-1988) launched the movement of Khūdāi Khïdmatgārï (Service to God), mobilizing thousands of Pashtuns in a non-violent anti-colonial struggle.[94]

While opposing British colonial rule, Ghaffar Khan adapted aspects of the social welfare, healthcare, and educational models pioneered by mission organizations.[95] Through the Anjūman-i-Aïslāh-i-Afāghïnah (Society for the Reformation of Afghans), Ghaffar Khan established independent Azad (Free) schools across rural villages in the NWFP. These schools offered a vernacular Pashto curriculum that incorporated social reform, literacy, and nonviolent political organization, providing a native alternative to both British state schools and Christian mission institutions.[96]

7. Conclusion: Legacy and Historiographical Re-evaluation

7.1. Re-evaluating Missionary Agency on the Imperial Borderland

The history of Christian missions in the North-West Borderland of British India reveals a complex relationship between evangelical aspirations and imperial administration. Unlike regions where missions achieved mass movements or operated under direct imperial protection, frontier missionaries worked in a context where religious conversions were rare, state backing was cautious, and local resistance was structured.[97]

Deprived of large conversion numbers, missionaries adjusted their functional role. Through medical initiatives, figures like Dr. Theodore Pennell shifted the emphasis of frontier missions from direct proselytization toward social service and healthcare.[98] Mission hospitals became key providers of modern medical treatment for populations across the borderland.

7.2. Post-Colonial Institutions and Continuity

When British India was partitioned in August 1947, the newly formed state of Pakistan inherited the institutional footprint of these frontier missions.99 Institutions established during the late nineteenth and early twentieth centuries—including Edwardes College Peshawar, the Pennell High School and Hospital in Bannu, and the Mission Hospital in Quetta—continued to operate in the post-independence period.

Following 1947, these institutions transitioned from British missionary management to local Pakistani Christian administration under the Diocese of Peshawar (Church of Pakistan, inaugurated in 1970).100 They continued to serve predominantly Muslim student bodies and patient populations. While the initial goal of transforming the North-West Frontier into an evangelical base for Central Asia went unrealized, the medical, educational, and linguistic institutions established by frontier missionaries left an enduring mark on the region's public history.

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[91] *Ibid.*, 110–112.
[92] Baha, *N.W.F.P. Administration Under British Rule*, 150–154.
[93] Ibid., 156–160; Spain, *The Pathan Borderland*, 162–166.
[94] D. D. Tendulkar, *Abdul Ghaffar Khan: Faith is a Battle* (Bombay: Popular Prakashan, 1967), 42–48; Mukulika Banerjee, *The Pathan Unarmed: Opposition and Memory in the North West Frontier* (Oxford: James Currey, 2000), 34–38.
[95] Banerjee, *The Pathan Unarmed*, 42–46.
[96] *Ibid.*, 50–55.
[97] Cox, *Imperial Fault Lines*, 202–206.
[98] Hardiman, *Healing Bodies, Saving Souls*, 130–134.
[99] Stephen Neill, *A History of Christian Missions* (Harmondsworth: Penguin Books, 1986), 340–344.
[100] *Ibid.*, 348–352.

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