

# Essay

## Medicine and the public sphere in colonial India

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In the current discourse on medicine, Unani system and its resistance against modern medicine (popularly known as Doctory) occupies little space. This is unfortunate for three reasons. Firstly, Unani's critique of Doctory is much more important than the critique offered by other indigenous systems such as Ayurved, for it claims to have given birth to a developed medical science in Europe. Secondly, Unani's resistance to modern medicine acquired an added dimension during the course of communally charged anti-British movement. For, Unani ultimately came to be identified with or always represented the Muslims who formed the second largest party in the anti-colonial struggle. Thirdly, one has to take into account Unani's critique of modern medicine in order to fully understand the view that the imperial west 'constructed' the colonized east 'in its own image and as a mirror to its own fantasies.'

### Core of Resistance

In the second half of the nineteenth century, the votaries of Unani increasingly perceived that modern medicine was turning itself into a colonial medicine by becoming an effective tool for colonial domination. At the core of this resistance was a thorough dislike of the projection of modern medical science as the only superior form of medical knowledge. Thus they challenged the view that Unani was 'unscientific', 'irrational' and 'irrelevant'. They invoked memory of the past to mock at the western world, pointing out that Europe itself was, till recently, in the dark ages, and its modern medical science could not have come into existence without the Unani/Arabian medical science. At the same time, they did not feel any hesitation in learning from some of the recent developments in the European medicine, especially in the fields of surgery, anatomy, and chemistry.

The dominant response to Doctory came from reformists who insisted on Unani being a distinct form of knowledge, and advocated for its retention not only as a system of medicine but also as a culture. But

their emphasis was on reforming the Unani by adopting the 'scientific' method without changing the fundamentals of the system.

The debate laid bare a peculiar situation: simultaneous approval and disapproval of colonial systems of knowledge, and of the processes of coming to terms with one's own culture and creating space for oneself in a colonially structured domain of medicine and the body.

The debate was not confined to the professional class alone. Practitioners of Unani blamed the elites of being an easy victim of the imperial propaganda about the Unani. Questions of medical ethics and concern for the poor were raised. Lack of governmental encouragement to Unani and of jobs for *hakeems* were pointed out as factors resulting in failure to receive proper education in Unani medicine. Sir Syed Ahmad Khan, Deputy Nazeer Ahmad, Altaf Hussain Hali, the famous poet, and several other public figures and writers actively participated in the debate.

Unani's resistance to modern medicine was not merely against the scientization of the body but also against the colonial project of hegemonizing cultural consciousness. Popular stories, constructed and reconstructed over a period of time, influenced crucially the thinking of even the well educated people about colonial manipulation. In the preface of his book *Tareikh-ul-Atibba* (1913) (*Eminent Doctors of the East and West*), Hakeem Ghulam Jeelani made an interesting observation, based on a popular story which has historically been disproved. He wrote: 'When in 1601 our present rulers came to India for the purpose of trade, they brought with them the developed Western medical science also. As we know from history, it is because of Doctory that the English trade achieved so much success in India, because in the year 1638 Emperor Shahjahan had called English Doctor Boughton from Surat to Delhi for the treatment of his daughter. By the grace of God the Doctor could treat the princess successfully. In lieu of that, the Emperor granted sev-

eral big trade rights to that Doctor... [The] Doctor...got similar benefits and facilities from the Subedar of Bengal.'

Contemporary accounts make it clear that princess Jahanara was cured by a well known *hakeem* of Lahore. Nevertheless, what is important is that Hakeem Ghulam Jeelani went by the popular belief and believed the story to be a historical fact. Interestingly, Dr. Boughton does not find any place in the long list of eminent doctors whose life history Jeelani has written.

The use of alcohol in Doctory medicine also became a crucial issue in the debate arousing public sentiment against modern medicine. Hakeem Ovais Qarni said: 'How can the deeply religious Indians accept the Western medicines in which spirit or immoral spirit extracts that destroy shame are used?' Similarly, the Maharaja of Darbhanga pointed out that 'Orthodox Sanatan Dharmis and Muslims do not use Western medicine for certain reasons. One of the reasons is that in these medicines alcohol is used excessively.'

Stories of patients 'thoroughly' disappointed by modern medicine and ultimately turning to practitioners of Unani were many and had become a part of popular medical folklore. These were sought to be used against Doctory. It was claimed that the popularity of the Unani system continued despite lack of state patronage, whereas Doctory enjoyed full support of the colonial state.

David Arnold (*Colonizing the Body: State, Medicine and Epidemic Disease in Nineteenth Century India*, 1993) notes that in 1900 even Calcutta, a metropolis of a million people, could support barely a hundred practitioners of western medicine. It had failed to displace its indigenous rivals. However, the perception among the practitioners and the literate circles differed. For instance, time and again *hakeems* claimed that millions of people benefited from their medicine as it was cheap, easily accessible, and suited their temperament and climate. But there were others who talked of 'magnetic attraction for the Empire.' Hakeem Ferozuddin gave a striking explanation for the attraction for Doctory: '[T]he requirements of the life of Indians have expanded so much that they get little rest, peace and satisfaction. Moreover, in their nature a kind of hastiness has come into existence...They always desire that whatever problems they are faced with should come to an end immediately with either good or bad result... This is the reason that when-

ever they fall sick, they run towards that direction from where they can recover fast...'

The power of western medicine was also profoundly felt and advocated by many Indians with western education including those who had genuine sympathy for Unani Tibb. Among these, Hakeem Ghulam Jeelani was the author of several books in Urdu on different aspects of medicine and medical practice. His principal concern was to bridge the gap between the two systems by introducing scientific elements into Unani, and standardize the Unani medicine and its practice so that it was able to meet the challenges of modern times. Another way to resolve the tension was to found a new system. He wrote: 'Since in India now Hindus, Muslims and English people reside, India today needs the unity of three medicines. Therefore, after assimilating Ayurved, Unani and Doctory a new system of medicine should be prepared which should be complete in every respect.'

### Spirit of Difference

The reformists faced two-pronged opposition: from the votaries of Doctory including some Indians and the colonial state, and from the purists who opposed taking anything from Doctory or Ayurved. The purists took pride in following the original principles as formulated by Hippocrates. Renowned Urdu writer Abdul Haleem Sharar captured the spirit of this difference. Lamenting the status of Unani Tibb in the Islamic dominions, in his book *Guzashta Lucknow*, he wrote: '[In] all the Islamic dominions such an ignorance existed regarding their own ancient science that when French and English doctors of Europe appeared on the scene, they were welcomed as Godly gift by both the common people and the elites, and nobody had a sense to think that this was originally our science or we too once had physicians.'

Sir Syed Ahmad Khan, on the other hand, while inaugurating Madarsa-e-Tibbia on 23 June 1889 at Delhi, declared: '...English medicines are very useful. Hakeems think that [they are] not useful for our country. If you do not have complete experience of the English medicine, how can you say such things? I believe that Madarsa-e-Tibbia will develop Doctory also along with Unani Tibb and will remove the difference between the two.'

Unlike Sir Syed, Deputy Nazeer Ahmad, renowned Urdu writer and a public figure, was not an uncondi-



tional admirer of modern medicine. He was unhappy that the Indians had uncritically accepted everything that was English and developed a total dependence on the British, while the latter treated them with contempt. These sentiments were expressed at the inaugural meeting of the Madarsa. He then added: 'This is the age of development of science and art, and invention of industry and of freedom, and Europe is the centre of all these things. By imitating them, and not on our own strength, we have progressed to the extent that few of us are now able to understand our condition...If Unani system of medicine has so far withstood this colossal demon, this itself is enough.'

He invoked the example of Ayurvedic College of Calcutta and expected that the defenders of Unani Tibb will derive proper lessons from it. This invocation is important, for it refers to self reliance and community efforts to raise funds so that one did not have to depend on the colonial state for the promotion and development of the Unani system. He made a crucial reference to the role that the will of the people can play in building something when faced with opposition from the rulers of the time: 'Thank God in India also people are developing an attitude of self help. In Bengal, community colleges and schools are so good that the government colleges and schools cannot compete with them. Muslims have also started opening colleges and schools for their religious and temporal education. In the backdrop of all this, I hope that all those fellow countrymen who are in favour of the Unani system will help this Madarsa.'

One can not miss the point that both the Hindus and the Muslims are mentioned in the same breath, as participating in the efforts to establish Madarsa-e-Tibbia. But the accent on the Muslims in the speeches by Sir Syed and Nazeer Ahmad was much more prominent. It was as if it were only the Muslims who had to save the Unani medicine.

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Politics and culture too came into play in the debate on medicine. Deputy Nazeer Ahmad had a dig at the European culture and the status it accorded to women: 'In Europe it seems women have got all the freedom. But I hear very few ladies making speeches...[O]n their behalf it is their husbands who express thanks. [A] Memsahab has no courage to

stand and say a few words.' It is significant that this was said in a speech at Madarsa-e-Tibbia's annual conference. In the conference both the Indian and the British officials were present. At the end of the lecture, he said: 'You know that now-a-days the English medicine is on the rise. In short, one can say that it is a government of Doctors. These people have encircled the whole country. It is courageous of Hakeem Abdul Majeed Khan that he has decided to fight the adversary.'

In February 1906, the All India Vaidic and Unani Tibbi Conference (AIVUTC) came into existence. The conference made serious efforts to forge unity between Unani and Ayurved. These efforts were hailed at the popular level as well. The talk of unity between Ayurved and Unani brought into focus the rift that had existed between the two systems. The division went along religious and communal lines in tune with the one in political, economic and cultural spaces. Speaking at the 5th annual meeting of the Tibbi Conference at Patna, the Maharaja of Dharbanga said: 'I welcome the meet more profoundly for another reason as well, that is, because of this meet unity between the two big communities — the Hindus and the Muslims — has increased. It is necessary that our *hakeem* and *vaid* friends interact with each other with a sense of friendly competition. But they should always remember to learn from each other...'

The Nawab of Rampur expressed similar sentiments: 'Due to our negligence we have ruined our systems. Now mutual rivalry among Hakeems should stop. We should then pay attention to proper education. Not long ago, hospital assistants, having read a few books in Urdu, used to bring bad name to Doctory. Similarly many Hakeems after reading a few books in Persian are bringing bad name to the Unani system. People should pay attention to hundreds of medicinal plants and see how Hakeem Ajmal Khan learns without prejudice from everything good, be it chemistry or Vaidic.'

Sahabzada Aftab Ahmad Khan tried to dispel the fear that Unani and Vaidic will be assimilated into Doctory: 'Lord Curzon had made a law for the protection of ancient buildings. Is it not necessary for us to protect ancient knowledge? I am fully convinced by the farsightedness of Haziqul Mulk (Hakeem Ajmal Khan). He has given a very useful prescription. This will be use-

ful not only in physical ailments but also in those ailments which can ruin the country. The world should be grateful to Doctory that it has expanded the frontiers of medical science, but crores of people benefit from Unani and Vaidic too.'

This fear of assimilation expressed regularly from all quarters presented not only the medical viewpoint, but also a fear of losing one's cultural identity, independence and the right to decide which medicine to use, that is, the right over one's own body. The body emerged as one of the sites of struggle against colonial domination, and medical systems were also seen as meaning systems and modes of socio-cultural representations. It was in this context that surgery and anatomy had been in the centre of the debate from the very beginning. A journal which was strongly in favour of reforming the Unani Tibb by borrowing elements from Doctory made the following observations in the early 1890s: 'It is because of the science of surgery that we have lost. How much insult and damage do we have to suffer! Although in Doctory the science of surgery is quite developed, and very sophisticated and useful instruments have been invented, this science was not absent in our ancient medicine. In fact, it had been formulated quite nicely, but our ancestors, because of their elitism and sophistication, handed over this science to *Jarrahs* [barber surgeons]. They themselves were expert in surgery and they would instruct *Jarrahs* in their own presence. But gradually a stage came when *Jarrahs* themselves started doing this work. Because they were generally illiterate and untrained, this science of surgery started declining.'

In the face of mounting pressure on the issue of surgery, even a leading reformist like Hakeem Ajmal Khan, who himself was extremely critical of Unani Tibb's shortcomings, reacted sharply against the ignorance of the west in this regard.

Finally, a letter writer who called himself 'N' ('noon' in Urdu alphabet) wrote in a newspaper that Unani was the best of all medicines. It worked slowly, and even if the *hakeem* committed a mistake, it could be corrected. 'No matter how poor the patient is, the medicine is administered till the end; he is not killed by administering acid. No matter what temptation the *hakeem* is offered, no matter how much unpleasantness be there, the method of treatment is such that he can in no case administer a

deadly medicine to anyone.' Doctory medicines, on the other hand, are instantly effective, and the patient becomes incurable if there is even the slightest of errors.

The letter writer was unhappy that there was no provision for the *hakeems* to get proper education in their profession. And there were no jobs for them in the government service. Nor did the leaders of the community bother about their plight. But the doctors were provided with all facilities for the development of their science.

Yet another letter writer, 'S', pointed out the success of the Unani Tibb in checking deadly epidemics. Mostly, it was able to confine epidemics to small areas. This was because of the superior diagnostic system of the Unani. He believed that the Unani system was in a bad shape because 'the rich and the noble' were indifferent to it. They had become blind followers of Doctory and considered it below their dignity to receive treatment from a *hakeem*. When they had to visit a *hakeem*, they would do it secretly.

The letter writer then made an important observation. According to him, only those branches of the arts and the sciences progressed in a colonized country that had links with the society and culture of the colonial rulers. Obviously, if a science did not get due respect and attention from the government, it would not develop.

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To conclude, Unani's encounter with modern medicine took place in the public sphere under the colonial condition. This condition led to the emergence of cultural memory as a contested and contesting site. History was deployed as an aid to this memory. Instead of constructing it in the European image, modern medicine was sought to be reconstructed in the image of Unani. Attempts were made to demonstrate that critical evaluation of the self need not necessarily be guided by the terms of discourse set by the colonial state. Thus, while defending Unani against Doctory, the specificities of a culture, society, religion, and the body were emphasized.

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