Linguistic strategies of de-Islimization and colonial science: Indo-Muslim physicians and the yûnânî denomination

During the colonial period, Indo-Muslim physicians began to define and differentiate their traditional medicine from other traditional medicine by using the Arabic adjective yûnânî (or unani according to English pronunciation) literally meaning ‘ionic’ or ‘Greek’. Indo-Muslim physicians today would rarely, and never within (unani) healthcare and research institutions, define their medicine as Islamic, but as Greek. What were the scientific, political and linguistic motivations driving this terminological change?

The earliest known Indo-Persian medical work that uses its title is the Tak-mila-yi yûnânî (Greek perfection), a treatise on treatment of diseases ordered from head to foot composed by Shîh Abl Allâh (d. 1776), who also authored a work on Indian medicine entitled Tak-mila-yi hindî (Indian perfection). Abl Allâh was the brother of the leading religious scholar Shîh Wall Allât, in whose renowned madrasa in Delhi, later run by his sons, several eminent physicians of the city studied. Another eighteenth-century work using this adjective in the introduction is Ghiyâm Imâm’s Mu’âlifat al-nabawî (Prophetic treatments), a medical literature, the adjective yûnânî is quite uncommon; the discipline was simply called tôb (literally, medicine). In the Indo-Persian medieval literature this adjective is mostly found referring to the Greek philosophers.

After the establishment of the British Raj in 1858, the term unani acquired a new connotation: Muslim physicians used it to counter the accusations of colonial physicians that traditional forms of medicine were unscientific and unable to change. The Indian elite, including both Muslims and Hindus educated in Western colleges, absorbed these negative attitudes, Gandhi’s prescriptive speech on Indian traditional medicine expressed the same judgement. The idea was that Western medicine with its clear debt to Islamic science was not so different from unani, but a recent variant with some technological innovations which could easily be integrated.

This was not simply a claim to similarity - it also contained a fundamental corollary: if unani medicine was unscientific, the same judgement could be applied to the previous history of Western medical science. Conversely, stressing the ancient pre-Christian roots of their two-millennia old science offered leading writers such as Ajmal Khân another sound argument against the claims of colonial science: how can knowledge that keeps changing every day, such as Western science, be considered scientific? This argument about the impermanence of modern theories was echoed in the same period in the medical science. During the post-independence period, this process culminated in unani becoming the denomination of all official institutions of Islamic medicine established under the Indian Ministry of Health, while demonstrating the validity of traditional methods according to modern standards became a basic goal of these institutions. Unani is a key term for understanding the transformation of the tradition in the last century: the aim of being called unani and efforts to de-Islamize the tradition were and still are inseparable from the aim of being ‘scientific’ as Western medicine.

This latter aim was the strongest internal force that pushed for the globalization of the tradition, with its questionable effects: the shaping of the unani identity led, on one hand, to a surgical operation to remove all those concepts and methods that did not fit into the required modernized body of unani medicine, and, on the other, to the construction of an illusion with bio-medicine, perceived as the best guarantee of the institutional future of the tradition in a non-Muslim country like India where unani institutions depend on funding from the state. However, India remains one of the few places in the world, along with Pakistan and Bangladesh, and more recently Iran, where Islamic traditional medicine has been able to survive the threats of modern science and find new institutional recognition in the post-colonial era.

References

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