

***Unani Dawakhana*s and Reimagining the Idea of Health vis-a-vis Popular Print Culture in Urdu in Mid-twentieth Century North India**

Anab Naiyer

Unani medicine, which is one of the legitimized albeit heterogeneous forms of indigenous medical systems, is widely prevalent amongst Muslims (and Hindus) in South Asia, with a number of *hakims* and *dawakhana*s running across the subcontinent. However, it was not always this popular and its long evolutionary history and prevalence in the subcontinent have been traced through the early 12th century and its flourishing under Mughal patronage. This paper focuses specially on the post-colonial popular Urdu literature and the articles on health, human anatomy, scientific discoveries of human body along with a sustained focus on Unani medicine. How did the popular Urdu digests help readers educate themselves about their body and health? How did the publishing house and the *dawakhana* come together to advertise and establish a solid ground for *Unani* medicine? What were the major concerns and ailments that were written about? How did this literature create a renewed understanding of a healthy body using the new research? How did this literature combine the idea of a strong mind with health, particularly in post independent India where the idea of the Indian Muslim was still in its early phase?¹

¹ Mushirul Hasan in his article “Adjustment and Accommodation: Indian Muslims after Partition” elaborates how the Muslims who stayed back in India had to reconcile their faith, the idea of a secular nation, and being loyal to both ideologies. For more on this, see *South Asian Politics and Religion*,

The paper attempts to answer these questions through an assessment of articles, advertisements, and editorials from a selection of 'health and social' magazines that were published through the 1930s till the 1960s from various *Unani Dawakhana*s. The aim is to briefly outline the earlier resources of health i.e. the traditional understanding of cures through *Unani*. This view is then juxtaposed with the renewed social reimagining of health through the influx of new research to show how these two were amalgamated to suit South Asian sensibilities and concerns. The first section of this paper is an overview of the presence of Unani *tibb*² in South Asia and its movement from a scholastic mode to a more popular one; the second section delineates various kinds of popular print literature that were publishing material related to health during mid-twentieth century. Their affiliations to various dawakhana and an analysis of their advertisements and advice vis a vis physical health and anatomy is studied. The final section is dedicated to articles on mental health, cleanliness, representation of a healthy body, and a broader definition of *akhlaq*³ that constituted the parallel paradigm required for achieving and maintaining holistic wellness.

Unani *tibb* and its trajectory in South Asia

The word Unani is derived from *unan* which has its roots in Greek medicine and is a proponent of the four-humour theory, a disparity in which will lead to illness of several kinds. In other words, all illnesses can be traced back to the imbalance of humours and can be cured by identifying the excess or lack of humours and remedy it thereby. This also includes striking a balance between humours, nature, and the body.

ed. Donald E. Smith, also see *Indian Muslims Society and Economy*, by Omar Khalidi.

² *tibb* (Arabic) literally translates to medicine, however the phrase 'Unani *tibb*' was only introduced in the nineteenth century as pointed by Fabrizio Speziale. For more on this, Fabrizio Speziale, *Hospitals in Iran and India 1500-1950s*, Seema Alavi, *Islam and Healing: Loss and Recovery of an Indo-Muslim Medical Tradition 1600-1900*. Also see, Guy

Attewell, *Islamic Medicines: Perspectives on the Greek Legacy in the History of Islamic Medical Traditions in West-Asia*.

³ *akhlaq* (Urdu) translates to social conduct, but often extends to bodily and moral discipline. For further discussion on *akhlaq* see article "From Morality to Psychology, Emotion Concepts in Urdu, 1870-1920" by Margrit Pernau, also see "Unani medicine in the nineteenth-century public sphere: Urdu texts and Oudh Akhbar" by Seema Alavi

In the beginning of the 8th and 9th centuries, significant texts in the field written by Galen and Hippocrates were translated into Arabic. The Abbasids were deeply interested in acquiring new kinds of knowledge and considered engagement with Greek philosophy as essential to Islamic thought. The most famous names in the field that emerged were Ar Razi (864-925) and Ibn Sina (980-1037). It was also around this time that there was a notable and significant exchange between Ayurveda and Arabic medicine with regard to direction of medicinal plants and herbs. (Pernau 2009)

Although Unani medicine was introduced to India during the period of Delhi sultanate, it hugely expanded under the Mughal Empire. A person who was a practitioner of Unani medicine was known as a *hakim*⁴ (pl. *hukama*), and he could acquire this status by careful study of the texts that were seminal to Unani medicine, namely Avicenna, Hippocrates, and Galen. This would require a private study and presupposed a wealthy family that could have access to the mostly Arabic or Persian manuscripts of *tibb*, the other way would be to secure a madarsa education (Attewell 389). In the mid nineteenth century, in Shahjahanpur, the madrasas are reported to have been teaching a curriculum based on grammar, medicine, logic, and religious studies. This was evidence that the knowledge of *tibb* was by no means limited to practitioners of *tibb* but it was considered complementary and even essential to acquire knowledge of *tibb* by religious scholars and nobility. Even Sufi scholars were deeply interested in learning *Unani tibb*, and “there was a seamless harmony with Sufism, which advocates *ruhani*⁵ medicine, or spiritual healing for the soul” (Metcalf 214)

This knowledge was for any learned gentleman and does not result in the qualification of becoming an actual hakim, for which there was training to be received under a learned and practicing hakim, who after having taught the student everything there was to know would issue an

⁴ *hakim* (pl. *hukama*) means a practitioner; derives from *hikmat* or wisdom which constitutes both medical knowledge and worldly sagacity

⁵ *ruhani* derived from the word *ruh*, or spirit. Both Avicenna and Al-Razi who wrote treatises on physical maladies are known to have written about the art of healing through spiritual guidance as a way to attain equilibrium for the body. For further reference to this see Augustine Meier in *Spirituality and Health: Multidisciplinary Explorations*, and Guy Attewell in *Refiguring Unani Tibb: Plural Healing in Late Colonial India*

ijazah,⁶ a kind of certificate or degree vouching for the fact that the learning is complete.

Seema Alavi demonstrates how the hakim himself during the middle of nineteenth century was more than a practitioner of Unani, he was “a specialist of the ‘theory of medicine’ as encapsulated in such texts, which encompassed treatment, prognostics, and an appreciation of hippocratic experience.” (Alavi 102)

Under the British colonial rule, some turn of events however, pushed Unani medicine out of the scholastic mode into the public realm and transformed the puritan status of *tibb* into a heterogeneous and democratic mode of learning and medicine. The first was, as Alavi demonstrates, the use of the print revolution during the nineteenth century that introduced literature from over the world to the vernacular and especially in Urdu in the case for *tibb*. This print literature that came to the public realm after having spent a considerable amount of time through dynasties and behind closed doors of family lineages, created a new kind of understanding of health, body, and mind.

One of the first translations done in the field of *tibb* was of the book *Zakhirah-i Khwarazmshahi* originally written by Muhammad Ahmad al-Hasani al Jujani in the year 1110-11 in Persian, translated into Urdu by Hakim Hadi Hasan Khan Moradabadi and published under the same title in 1878 by Naval Kishore Press. Due to its origins as a popular text in Persia and its large scope of detailed instructions on diseases, preparation of medicines and potions, it was clear that the book was meant not only for hakims but anyone who could read Urdu and the general benefit of people and it quickly made its way into popular print culture in Urdu.

Alavi writes, “From the mid-nineteenth century, as Western medical knowledge engaged with Indian *materia medica*, the hakim came under attack.... It was the readers of these texts who led the attack on the old scholar hakims. Hindu and Muslim literati, especially of the service class, and newspaper editors argued that Unani could never compete with Western medicine if it remained closeted in its private domain, confined within linguistic and familial walls.” (Alavi 103).

The second phenomenon was a result of the print debates. Starting from the late nineteenth century there was a standardization of Unani medicine and its distribution through advertisements, clinics, and dawakhanas in modern packaging and neatly written descriptions and scientific claims (not necessarily accurate) to support that it closely resembled Western medicine. The madrasas that were set up for the

⁶ *Ijazah* literally translates to permission, signifying the importance of the teacher or senior hakim under whom learning is done.

professionalization of hakims, were also constructed on Western models of a fixed curriculum with conferences and journals, and similar kinds of knowledge production. Although Guy Attewell in his study on Unani medicine in South Asia rightly points out that this systematisation was not homogenous at all. He writes that only in 1971, a unified curriculum for Unani studies was forged, when the Central Council of Indian Medicine was established. Before that all schools were functioning independently with differing ideas of authenticity, allegiances to Ayurveda or Western medicine and although the schools were set up in the colonial fashion, they constantly negotiated their unique positions in the South Asian public sphere.

There were other external factors apart from the Western medicine that were affecting Unani knowledge production, since after the first provincial elections in 1937, which the Congress won in the United Provinces, there was a rise of local state investment in Ayurveda. Rachel Berger writes,

Muslim politicians felt that Unani medicine (associated somewhat simplistically, with the Muslim community of South Asia, and cast as a minority tradition) was receiving short shrift in the new schema of proto-independent public health planning. Ayurveda also came to be associated in official political and lay popular discourse with decidedly Hindu articulations of political nationalism. In the years following independence, Ayurveda emerged as a universally 'national' medical tradition, properly modernised and fit to be governed, while Unani was marginalized from state planning and cast off as the cultural practice of a minority community. (Berger, 2013, 4)

It was around this time, that major dawakhanas starting taking out publications of health journals in Urdu to spread awareness about perfect health and how it can be achieved through Unani medicine. These two phenomena were not mutually exclusive, but the knowledge derived through the translations of ancient texts into Urdu was instrumental in reviving the kind of debates and ideas on health that would continue for decades to come.

Unani *tibb* and Popular Print Culture in Urdu

Establishment of Unani schools, medical journals and allied magazines were in print through the late nineteenth century onwards, hand in hand with the Islamic reform movements. Hakim Abdul Majid Khan, founder of the Madrasa Tibbiya in Delhi and who later became famous as the leading voice of Unani *tibb* is known to have been associated with another famous Muslim leader, educator, and social reformer Sir Sayyid Ahmad Khan. Guy Attewell writes, "In an inaugural speech at the Delhi Madrasa, Sayyid Ahmed reportedly expressed hope that the Madrasa

would encourage western medicine as well as Unani *tibb* so that their differences would be overcome” (Attewell10). Hence, there was not only a scientific and logical temper to these publications owing to the need of the hour to reform, but they amalgamated the *tibbi* knowledge to suit the needs of the new sensibilities.

In this regard, the content of Urdu popular print magazines and digests provide useful and interesting insights for assessing the anxieties and concerns of the human body and mind vis a vis a new nation and a new role as the Indian citizen. As one goes through the various articles on physical, mental, and spiritual health in popular print culture of the 50s and 60s, the concerns seem recurring over a few themes. Some advertisements are for prevention falling hair, some for loss of virility, yet others for maintaining youthfulness or everyday ailments. Every dedicated health magazine coming out of an established dawakhana strategized to advertise and promote its own pharmacopoeia and credibility in the field.

In this context, the paper chooses to discuss health issues and advertisements from three dedicated health journals coming out of leading and possibly rival dawakhanas of Old Delhi area in independent India, i.e., *Chashma-e-Hayat* (spring of life) published from Hamdam Dawakhana, *Tibbi Duniya* (world of tibb) published from Bada Dawakhana and *Hamdard-e-Sehat* (well-wisher of health) from Hamdard Dawakhana. Spatially, these dawakhanas were situated in the lanes of Lal Kuan, Old Delhi often employing even the same printing press. Presence of other dispensaries in the surrounding areas is also documented, for example a Hindi journal *Rasayan* (chemicals) (estbd. 1948) edited by Dr. G.S. Verma, published out of Rasayan Pharmacy was also located in Daryaganj. Hence, it can be inferred that intellectually and geographically in the print media, Unani *tibb* had a strong and thriving social and cultural presence in North India, possibly intertwined with the Hindi publishing industry on Ayurveda and Siddh⁷. Competitively priced, the Urdu health journals cost anywhere between 2 annas-5 annas for each copy with heavy discounts on annual subscriptions making them affordable read for the general public. Since reading material is known to have been shared in families, neighborhoods, and friend circles along with being read in libraries, it is difficult to gauge the exact readership of these magazines.

The first Urdu journal in purview is *Hamdard-e-Sehat*, which started publication in 1931 under the aegis of Hakeem Abdul Hameed (1908-

⁷ Siddha comes from ancient Tamil traditions and is a system of medicine that combines spiritual and physical health through yoga, meditation, and herbal healing. For further discussion, see David Gordon White, *The Alchemical Body - Siddha Traditions in Medieval India*

1999), son of Hakeem Hafiz Abdul Majeed (1883-1922). Abdul Majeed is credited with starting a small shop called Hamdard⁸ to distribute Unani medicine from his home in Hauz Qazi, Old Delhi of undivided India in 1901. Unfortunately, he passed away when he was only 40 and his wife Rabia Begum sustained the enterprise with her son Hameed. Hakeem Abdul Hameed took over and expanded the organization Hamdard into what is known today as the largest manufacturer and distributor of Unani and Ayurvedic medicine in India. The journal *Hamdard-e-Sehat* was started in 1931, and subtitled a 'A Health and Social Magazine' making an interesting case for the study of the relationship between a dispensary and health concerns that were being discussed in the public realm during the mid-twentieth century well into 1950s.

Another Urdu journal that came out around the same decades was *Chashma-e-Hayat* from a certain Hamdam Dawakhana, Delhi established in 1916 about which much is not known. However, a photograph of the building of the dawakhana published in June, 1955 issue reads thus:

Hamdam dawakhana Delhi (regd) jis ko jadeed aur qadeem tareeqon se khaalis advayat taiyar karne ka fakhr haasil hai. Jis ki khidmaat meyaari aur jis ka nisbulain, dayanatdaari o taraqqi pasandi hai.

Hamdam Dawakhana, Delhi (regd.), that has the pride of a pharmacopoeia derived from ancient and modern methods; whose service is of superior standard and whose aim is honesty and progress.

This solidifies the establishment as not only respectful of ancient wisdom but also open to modern interventions and research and the content goes on to demonstrate as much.

It is also imperative to delineate that being healthy was pitched not as a necessity but as a requirement and responsibility for the modern postcolonial citizen. The cover page (Fig.01) of *Hamdard-e-Sehat*, with a quote from Socrates that reads,

No citizen has a right be an amateur in the matter of physical training. What a disgrace it is for a man to grow old without ever seeing the beauty and strength of which his body is capable!

This kind of inspiring and stimulating rhetoric is widely present in the magazines both in terms of physical and mental health.

Another Urdu journal *Tibbi Duniya*, associated with Bara Dawakhana, Delhi also was doing the rounds. The dawakhana was founded by Hakim Ghulam Kibriya alias Bhure Miyan and claimed allegiance to none other than Hakim Ajmal Khan, founder of Madrasa

⁸ *Hamdard* literally means someone who could share one's pain or well-wisher

Tibbiya. This journal was preoccupied with establishing high standards for Unani *tibb* and often published articles on the origins and benefits of *tibb*, multiple pages of pharmacopeia lists, often claiming guaranteed results. The cover page of the journal itself has a map of the world that includes all of Europe, Middle East, Africa, Russia, Asia, and even Australia but leaves out the Americas. The first page inside the March, 1955 issue of the journal writes that the Tibbi Board (associated with the journal) is the final destination for patients who have lost all hope or have tried all other kinds of treatments and are still suffering from any particular ailment. They address their dispensary as an ‘*ummeed-gaah*’ (place of hope) to stress that not all is lost even when the reader feels so. The journal pitches its dispensary and hakims as a notch above the rest of the mushrooming *tibbi* industry and offers free consultation through correspondence. It also has photos and biographies of famous hakims associated with the dawakhana and their qualifications for building credibility.

The importance of the placements of advertisements can be assessed from the fact that it is not only the medicine that is sold through them but along with it comes the idea of a healthy body which is essential for a fulfilled and successful life.

Although this paper does not deal with advertising per se, it is essential to delineate this trend that became popular through the twentieth century. The industrialization of Unani medicine went hand in hand with the rise in consumption of its products. Unlike its Anglophone counterparts where advertising has been studied as a pivotal juncture to the rise of homogenous national (or global) markets, Douglas Haynes writes:

The writing on South Asian advertising, suggests a more complex and uneven picture. In particular, it serves to illuminate the coexistence of important forms of small-scale vernacular capitalism alongside global, corporate firms. Advertising not only reflects the high degree of diversity in the socio-economic and cultural forms present on the Indian subcontinent but also played a major role in producing this diversity. (Haynes, 2015, 362)

Another important aspect of these journals would be the advertisements of the journal itself, sometimes to establish its credibility and sometimes to invite new readers to subscribe in case they are reading the magazine which is borrowed or in a library.

An advertisement for Hamdam Dawakhana in *Chashma-e-Hayat* June 1957, titled “*Hum aur Aap; zyada door nahi hain*” reads thus:

*“Faasle ki doori humare aur aapke darmiyan hael nahi ho sakti.
Aap Hindustan ke kisi bhi hisse me ho ya hindustan ke baahir,*

hum har jagah aapki khidmat kar sakte hain agar aap ko ya aapke kisi azeed ya dost ko koi beemari hai toh un ke muhsil haalat likh kar humari tibbi majlis ko bhej dijiye. Tibbi majlis un par achhi tarah gaur o fikr karne ke baad nuskha tajweez kar ke aap ko ravana kar degi, is ki koi fees ya muavza aap se vasool nahi kiya jayega. Is Tarah aap ghar baithe ilaaj kara sakte hain.”

‘You and I are not far away from each other’

Physical distance cannot affect us! If you reside anywhere in Hindustan, or even abroad, we are capable of serving you from anywhere. If you, your friend or relative is suffering from any ailment then we recommend you write to us in detail. We will go over it thoroughly and send you a prescription through post. This is a free service and no money will be charged from you. This way you can get treatment from the comfort of your home.

This passage substantiates that there was an unprecedented ease of access via correspondence to Unani cures. There was readily available literature on medicine and ways to maintain a healthy body; this helped consolidate a reading public that was not only aware of their anatomies but also knew how to take care of it and was actively encouraged to do so.

Let us look at some of the topics that were being written about in these journals.

A tract titled ‘*Ghizaiat*’ (diet) published in *Hamdard-e-Sehat*, April 1962 and subtitled “*Munasib ghiza istemal kar ke jawani ko qaem rakhein*” This article addresses the readers with a classic bait of ‘Manage your diet to stay Youthful’- something that can be achieved if one can afford to do so. It then proceeds to elaborate on latest research that most of the physical ailments are caused due to and can be controlled by correct diet. It elucidates that while one considers the body a machine, it is a highly sophisticated laboratory where various chemical processes are happening simultaneously. Whenever one of the components is not working correctly, the body responds to fix it. In this case, it is our duty (*farz*)⁹ to supply it with ingredients that will benefit this recovery. Keeping a light hand on our diet and daily activities and moderation in every aspect, above all else, is the key when it comes to food habits.

In the same issue of *Hamdard-e-Sehat*, an illustrated table of exercises titled, “*Baarah Varzishon ka ek Mukammal Course*” ‘A complete course of twelve exercises’ by Mohd Iqbal Hasan starts with a blurb about the magazine’s concern and understanding of how important

⁹ *farz* translates as duty, but also means obligatory in Islamic diction

exercises are for the body and mind, be it “*desi, videsi, or yoga*” (“Indian, foreign or yoga”) exhibiting the inclusivity of the magazine itself.

Advice on exercises is a regular feature of the magazine and it often advocates walking and running. The scientific findings of the benefits of regular exercise like increased metabolism and purification of blood through sweat are detailed in such articles. They also blame the sedentary lifestyles promoted by Western technological advances while offering indigenous solutions in Unani.

Interestingly the first article in the August, 1955 edition of *Chashma-e-Hayat* titled ‘*Khoon ka Dabav*’ is about blood pressure. It not only gives a table of the appropriate blood pressure window for different age groups but also lists various causes and home remedies that could benefit the patient. Apart from this piece, the problem of blood pressure and how the heart works, what could benefit or harm the smooth functioning was a popular topic through the 1950s in many editions.

To cite another one, *Huma* Urdu digest (edited by Maulana Abdul Waheed Siddiqui, founder of *Nayi Duniya* daily and a leading name in Urdu popular print culture in independent India), published in July, 1966 has a long article on ‘Ailments of the Heart’. The piece starts with an anatomical cross section picture of the heart and its insides so as to give an idea of a better understanding of the inner workings of organs that hitherto had only been subjects of speculation. Written by Mansur Ali Khan, who majorly seems to have translated the information from a UNESCO report. He quotes several doctors from Western countries, one particular research done in Hamburg on heart patients found out that a sedentary lifestyle has severe effects on heart conditions. Thereby, it advocates a more agile and energetic lifestyle, citing suggestions like walking and light exercise.

It is important to remember that the knowledge about the insides of human body was shared because it was necessary to understand it from the inside to be able to assess and address its needs. The ultimate aim was to remain as healthy and robust as possible. Diagrams and photos of the human nervous system, cross sections of the heart or brain were common features in the magazines.

Many articles related to weather, changing of weather, cautions for changing weather, foods for respective temperatures found readership in this genre. This was also indicative of the hyper-local presence of the journals circulating in North India and an understanding of the climate and its effect on the residents/readers making the procurement of the latest issue of the journal not only relevant but also urgent. This theme was a major contribution from the early translated *tibbi* texts that showed detailed understanding of weather and regions, often blaming Western

medicine and doctors for not showing enough sensitivity towards the effects of nature and climate on health; a condition particular to North India where seasons change from one extreme to another over a span of couple of weeks.

One article in *Chashma-e-Hayat*, Decemeber, 1957 edition reads, '*Aapki tandurusti aur mausam e Sarma*' (Your Health and Winter Weather); subtitled '*Mausam Sarma ke Tohfe*' (Gifts of the Winter Weather)- a list of four potions that are ideal for consumption in winter weather focusing on a regional and local understanding of health. This was followed by articles on special recipes with seasonal greens and dietary recommendations to keep away flu and cough naturally. Hence the magazine seems to be working both ways; at first it gives advice on how to stay healthy and in case one doesn't feel so, there are various recommendations on how to feel better.

One major category of supplement was a tonic or potion for increased male virility and vigor. This not only encouraged an active and robust sex life, vigor and confidence to face the world, but also gave information about conjugal relationships and married life although the language for these ads was highly sanitized and laced with innuendos. As Botre writes,

The emerging print media constituted an important source of knowledge. In particular, advertisements for sex tonics and related commodities in local newspapers conveyed extensive information...in regular suggesting that sex tonics thickened semen, heightened male vigour, and increased male capacity for reproduction, advertisements themselves were involved in the construction of middle-class sexual understandings. (Botre, 15)

This was often supplemented by page sized advertisements and a variety of pharmacopoeia that promote sexual virility and robustness. They often referred to degeneration or loss of male prowess caused due to masturbation which they call '*jawaani ki ghalti*' (follies of youth). These advertisements were often accompanied by a picture of a man and sometimes of a couple, who would represent a picture of conjugal bliss.

The importance of this can be gauged by a few advertisements published in the magazines which prescribe self-medication through energy tonics for a vaguely defined condition termed *neurasthenia*. The symptoms are often shown to be lack of energy, listlessness, debility, and an inability to partake the pleasures of life often meaning sexual but rarely mentioned overtly.

Since the advertisement is aimed at young or middle-aged men, it presupposes that these symptoms that otherwise set in at old age are a cause for concern and must be dealt with before it's too late. Unlike many

other serious illnesses that require the intervention of medical practitioners, the timely treatment of *neurasthenia* through over-the-counter tonics catered to a large market of self-medication.

Another reason why this system of selling and procuring medicine would work well was because of the anonymity and privacy it offered, as noted by an advertisement discussed below. Haynes in his work on advertisements observes:

By buying the advertised medical commodities, consumers could hope to address their health problems without the intervention of medical specialists, this saving themselves the awkwardness of revealing embarrassing details about themselves as well as the costs of paying fees that could strain middle-class family budgets. (364)

And rightly so, because this was a specially sensitive topic and any possibility of a word getting out in the family or social circle could fall heavily on their reputation. The correspondence solicited for these medications also offer secrecy and anonymity. They make it even more viable and accessible by printing disclaimers offering complete secrecy.

“*Quwat-e-mardi ka zaeef ho jaana, insaan ka jeete ji mar Jaana hai*” or “Ageing of male prowess is as good as a dead man walking” is the first line of the advertisement for this *Iksir-e-Mardumi* (Elixir of Male Virility) tonic from the house of Hamdam Dawakhana published in the June, 1955 issue of *Chashma-e-Hayat*. It goes on to reject the various quick fixes available in the market for loss of virility and sexual performance and instead advocates its own tonic for a sustained effect on strength and virility. Although, the advertisement admonishes self-gratification, it still offers hope for those who feel like their time of enjoying marital bliss is over. The photo of the couple (Fig. 02) in the advertisement offers a picture of a companionate and fulfilled marriage.

In another advertisement, from Hamdard Dawakhana in *Hamdard-e-Sehat*, issue August, 1954, (Fig. 03) a suited man is literally emanating energy, glow, and vigor after taking *Sherbet-e-Iksir-Khaas* (Unique Elixir). The text promises to treat vague symptoms of weakness and debility and even claims to make the brain sharper and more active through its ‘scientific formula developed at Hamdard Laboratories’. In this sense, the term weakness that usually refers to sexual problems also signified a general lack of physical strength and vigor and a dearth of confidence and assertiveness. Although this is more of a mental trait, to feel confident, this advertisement hints that vitality in body can boost self-confidence, thereby asserting the importance of looks and physique in society.

This can be seen from the claims of another advertisement from *Hamdard-e-Sehat* magazine in their issue of May 1954, for a tonic ‘Ma-

ul-Lahm do Atisha' titled 'New Life' for both men and women. Curiously enough some of the advertisements have labels and titles in English but this particular one had the supplementary text in English too,

Happy spirits, rosy complexion and keen appetite are concomitants of perfect health which is ensured by a pure bloodstream. Enjoy this sparkling condition by using Hamdard's Ma-ul-Lahm do Atisha. It transforms the weakling into a He-Man or She-Woman. It will give you confidence in your own powers. You will meet every one with a straight, bold look and not with blushing, downcast eyes which bespeak diffidence and lack of courage. Ma-ul-Lahm is made from rich fresh fruits and contains precious ingredients such as Saffron, Amber, Musk, etc. (*Hamdard-e-Sehat*, May 1954)

Notable is the fact that along with the price of a bottle which is listed as Rs. 5 in the ad, there is also a mention of sample bottle available at Rs. 1.40. This can be read as a marketing strategy to keep up with the rising competition in the market and building trust with their customer base. The ad and the formula must have worked because the tonic still remains widely popular and available across Unani stores in India.

Many advertisements claim hyperbolic confidence in the efficacy of their pharmacopoeia over others and offer money-back guarantee, free samples, testimonials of patients, figure of sales etc to pitch their products as being wildly popular and trusted by all. The advertisement of *Iksir-e-Mardumi* discussed above claims that over 30,000 people have benefitted from the tonic thereby establishing a strong case of customer satisfaction, a tried and tested formula for the advertising industry.

Strong mind, Ideal Body, and idea of *Akhlaq*

Apart from tracts on exercise, physical strength, diet, and anatomy the journals were also covered mental resilience and strength. Multiple pages of long articles are dedicated to issues like inferiority complex, mood swings, anxiety, and sometimes depression. The format is often in the form of a questionnaire with a dozen or so questions that help the reader assess how they feel about a certain situation and then advice is given based on the score.

Although the vocabulary for evaluating and understanding mental health issues that have been made available to us now did not exist then, Urdu popular print culture was aware of the changing times and how it may affect the common man. The independence movement, the partition, the renewed and somewhat precarious situation of Indian Muslims did develop some level of anxiety as citizens of a modern state. The emphasis on physical health is also emblematic of this because the body is the site

for political and cultural struggles and as well as a site for community and solidarity.

To start this discussion, an article from *Hamdard-e-Sehat* magazine could be relevant. One interesting questionnaire titled, “*Kya tum apne dost ho?*” or “Are you your own friend ?” by one Allama Nafees lists a dozen questions pertaining to whether or not one is comfortable with oneself. . It advocates the philosophy that before we establish ourselves as social beings who have active relationships with other people in the family and society, we have to come to terms with who we are. It also includes cultivating enough self-confidence and awareness that one may make their own life decisions and successfully stand by it, without being swayed by suggestions and advice given by others.

Yet another article, in the same *Hamdard-e-Sehat* issue that is titled “*Tanhai ki Musibat aur us ka ilaaj*” (The Problem of Loneliness and its remedy) with a subtitle, “*Khawateen ke liye*” (especially for women) elaborates on the lonely daily life of a widow who meets a friend per chance at the bazaar. This person who is a well-travelled scholar and has spent time in London advises her to cultivate some desirable and meaningful objective to life otherwise she might be plagued by loneliness for the rest of her life. In the next scene, we see that she has opened a kind of play school for disabled children and spends her day time with them. Although, it is a little far-fetched and a one-off solution to solitude of a widowed woman; it nonetheless addresses a problem that is socially relevant.

A long article titled ‘*Ehsaas-e-Kamtari*’ or Inferiority Complex published in *Chashma-e-Hayat*, June 1955 issue is a translated piece by one Norman Valent, a psychiatrist. He mentions his patient Jack at length who seems unsatisfied and unsure of himself and believes himself to be unworthy of any accolades or success. In order to understand his condition, Valent engages with him in deep discussions and finds out a common practice amongst families that has caused Jack to be so. He infers that being the youngest child at home, Jack was often compared to his brilliant elder siblings, bullied over not scoring well in exams, and addressed as stupid or silly. Consequently, he seems to have internalized all these projections over the years. Valent then strongly advises parents to inculcate the mental strength of children at a young age and avoid unnecessary criticism. He warns that such afflictions often go unnoticed and people think of these traits as their own nature and are unable to ever get rid of these insecurities and hence parenting should be done with care and sensitivity.

Another article in May, 1954 issue of *Tibbi Duniya* titled ‘*Biwi se Achha Sulook*’ or ‘Being good natured with wife’ which although is not

radically progressive in terms of modern feminism, still encourages a companionate view of marriage and advises men to share emotions and feelings with their wives and vice versa. The unknown writer of this article also deftly pitches this communication as a better foundation for a more satisfying sex life. He writes that the couple should be treated as a unit and honest conversation goes a long way in the smooth functioning of the household. Instead of advocating any romantic notions of idealized love, the writer suggests that developing a habit of sharing little things from the beginning of the marriage will provide a strong foundation especially because in arranged marriages, couples are practically strangers to each other.

One article in *Hamdard-e-Sehat* issue of March 1946, titled '*Jazbaat aur Uska beemariyon pe Asar*' lists how taking care of our emotions during an illness is essential for recovery. If someone around you is not well, then as a caregiver, one must be thoughtful and tender while dealing with them. In sickness, one should not give up hope of getting better nor take it upon oneself that the illness is a result of some sin and embrace it instead of getting treatment. One must also remember not to be overtly jealous of healthy people around and not let the disease take over one's entire existence.

Another article, '*Tafreeh-kash Tafreehaat*' (Recreational Activities) advises taking time off work and everyday mundane activities to give the mind a break from the routine but only when one feels that they deserve it. In the current times, with the availability of radio and cinema, one can avail these options on a daily or weekly basis. Just as food tastes best when one is famished, similarly, amusement should be well earned to be enjoyed thoroughly.

The underscoring of moral tenets like moderation, control over desires to indulge, working hard and with integrity to earn a living, maintaining a pleasant and clean countenance at all times are all part what is broadly categorized as good conduct i.e., *akhlaq* - one of the cornerstones of good health. Seema Alvi writes:

In a self-contained part entitled *Kitab-i-Zinat*, the *Zakhirah* shows that a healthy body can be maintained by good conduct and bodily discipline, i.e., *akhlaq*. It provides a template of social norms for good and healthy living. This part includes a section called 'purity and decoration' of the body. Here, purity of the human body is integral to health. And, interestingly, purity is linked to piety, beauty, deportment, and the relaxed and peaceful state of the body. Hence this section includes information on the healthy maintenance of hair and in discussing the cure of fevers,

it recommends not only medicines but also the key importance of bathing, bodily cleanliness, fresh clothing, and massages. (5)

Thus, articles on various kinds of baths, bath salts, and soaps are advised in the journal. Various advertisements for dental hygiene, clear skin, long and lustrous hair are proliferated throughout these magazines emphasizing the importance of maintaining a clean and beautiful countenance. Curiously, apart from the famous Hamdard tonic Safi, which is meant for blood purification and getting rid of acne, one could not find any advertisement for making skin fairer or the making the body slimmer although long hair seems to be a very desirable when it comes to standards of attractiveness. It can be safely argued that up until this point in the Urdu print industry that was dedicated to health and cleanliness and less to westernized standards of beauty which might have exerted more influence in later journals and magazines.

In conclusion, it is asserted that the history of the perception of body as represented in popular print culture in Urdu in mid-twentieth century was not a culturally isolated phenomenon and that the evolution of Unani *tibb* over the past several decades allowed for this public space to thrive as a ground for discussions of health and body which was a rising concern for the modern citizen. Centuries of knowledge exchange, colonial encounter, influx of Western medicine, and new forms of

knowledge had led Unani *tibb* to reconfigure its position in the South Asian market as a force of ancient wisdom that could withstand the storm of modernity and scientific development. The role of the journals hence becomes crucial as the print industry associated with dawakhana take it upon themselves to first, establish themselves as legitimate and authentic source of treatment with their vast pharmacopoeia and second, educate and inform the reader/potential client about their own bodies and the imperative to be healthy both physically and mentally and the role of individual self in this endeavour.

Fig. 01 - Cover Page *Hamdard-e-Sehat* April, 1962

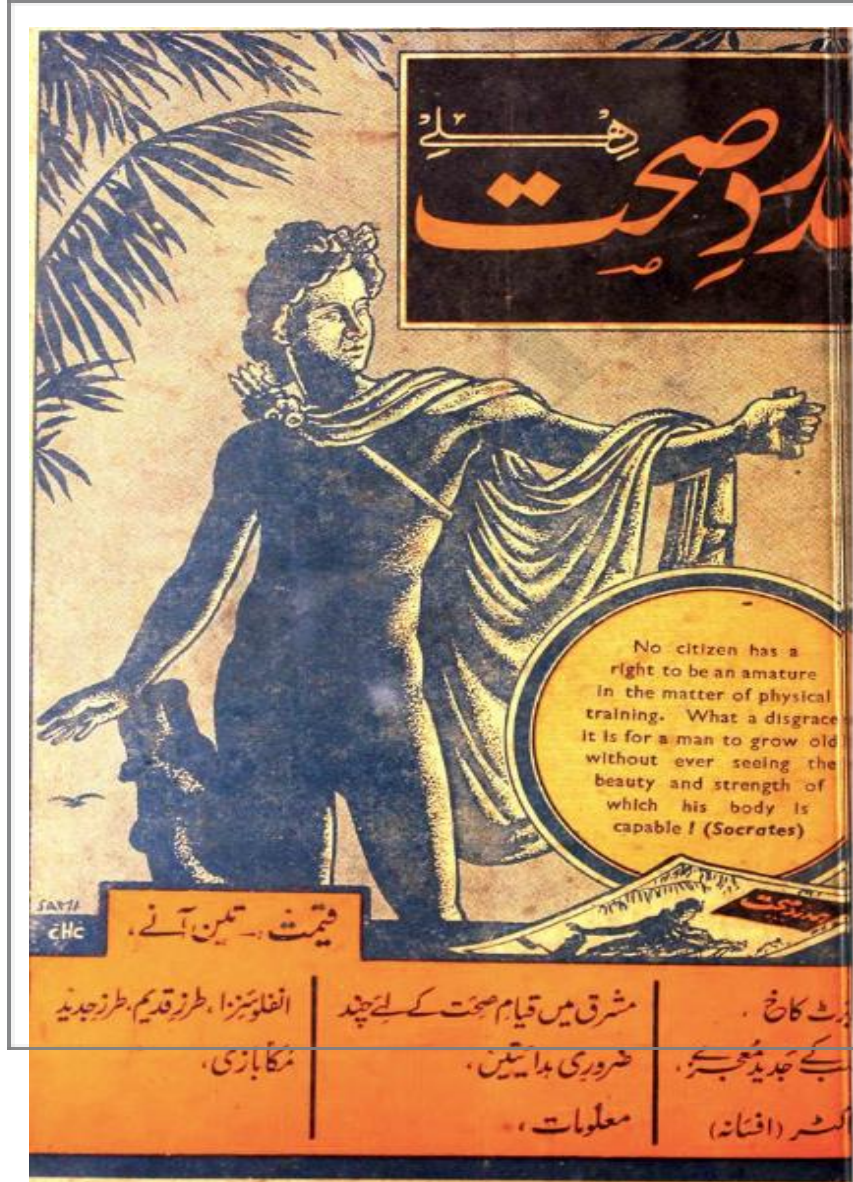


Fig.02 - Advertisement for tonic *Iksir-e-Mardumi* published in *Chashma-e-Hayat*, June 1955

There's glamour
in SEX



**IKSIR-I-
MARDUMI**

پچاس ہزار تجربے ہو چکے ہیں

اکسیر مردمی

توت مردمی کا ضعف ہو جانا ان کا جینے ہی مر جانا ہے۔ لو
شرم اور نامت کے سبب اپنا باقا عدہ علاج نہیں کرتے
اور عام دواؤں کے ناجائز کاراہہ استعمال سے اپنا مزید نقصان
کرتے رہتے ہیں۔ اس مرض کی ہزاروں دواؤں ہیں مگر اکثر کا
یہ ہے کہ نفسِ دقعی اور عارضی اثر پیدا کرتی ہیں جس طرح کھتے
ہوسے پرلغ کی جی افسادی جاتی ہے اور ذرا دیر کے لئے روشنی
بتر ہو جاتی ہے۔ پس اسی طرح محک اور تیز دوائیں کام کرتیں۔
اور زندگی کے چراغ کا باقی ماندہ تیل بھی گویا ضائع کر دیتی ہیں۔
خاص مردانہ قوت کی کمزوری خواہ وہ بڑھاپے کی وجہ سے یا جوانوں
کی خرابیوں اور حماقتوں کا نتیجہ ہو اس اکسیر کے باقا عدہ استعمال
سے جاتی رہتی ہے اس کا فائدہ دیر پا ہے اس کا اور عارضی اثر
اور جوش پیدا کرنا اور چراغ کے باقی ماندہ تیل کو ختم کر دینا نہیں
ہے۔ بلکہ اس کی تاثیر اندرونی طاقتوں کی بجالی ہے اس سے ہر
قوت کو ترقی ہوتی ہے اور مجموعی نتیجہ خاص مردانہ طاقت کی بہتری
اور ترقی ہے جو اس اکسیر سے حاصل ہوتا ہے۔ ہر موسم اور ہر عمر میں استعمال کی جاسکتی ہے۔
ترکیب استعمال دوا کے ہمراہ ہوگی۔ قیمت ۳۰ قرص پانچ روپے دس آنے (بٹیر)

Fig.03 - Advertisement for tonic *Sherbet-Iksir-e Khaas* (Registered) published in *Hamdard-e-Sehat*, August, 1954

خوش اور ایشاش سوچ سے زیادہ حسین اور دلکش اور تہنایت چہرہ۔ یہ ہے اس انسان کی تعریف جس کے لیے 'تقویت' کا لفظ استعمال کیا جاتا ہے۔

کیلیئم اور فولاد اور پھلوں کے جراثیم وہ ضروری عناصر ہیں جن پر ہماری تندرستی کا انحصار سمجھا جاتا ہے۔ شربت اکیسر خاص 'ان ہی اجزاء کا ایک سائنسی نمک مرکب جو جسے ہمدرد کی لیپورٹری میں تیار کیا گیا ہے۔ عام جسمانی کمزوری اور ناخوشی، خون کی کمی اور دماغ کی کمزوری کے لیے یہ اکیسر بہت جلد اثر کرتا ہے۔

خون کی فراوانی سے چہرے کی پھیاں چمک جاتی ہیں اور زندگی دور ہو جاتی ہے۔ ایکٹ ضرور آکر دیکھیے

ہمدرد دواخانہ، دہلی

قیمت فی شیشی (۱۰ دن کیلئے) ۲۵

پانچ روپے

۱۹۳۵ء

Fig. 04 - Advertisement for health tonic *Ma-ul-Lahm* published in *Hamdard-e-Sehat* magazine, April, 19

New Life

Happy spirits, rosy complexion and keen appetite are concomitants of perfect health which is ensured by a pure bloodstream. Enjoy this sparkling condition by using Hamdard's **Ma-ul-Lahm do Atisha**.

It transforms the weakling into a He-Man or She-Woman. It will give you renewed strength, create confidence in your own powers. You will meet every one with a straight, bold look and not with blushing, downcast eyes which bespeak diffidence and lack of courage.

Ma-ul-Lahm is made from rich fruits and contains precious ingredients, such as Saffron, Amber, Musk, etc.

Order right now before the cold weather is out.

Price per bottle	Rs. 5 0 0
Sample bottle	" 1 4 0

we positively
in 5 years off
shoulders,
What! Girlie!

Ma-ul-Lahm
wonder bottle
so delicious too!

JAS 7/14

HAMDARD DAWAKHANA DELHI.

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