



THE AGA KHAN UNIVERSITY

eCommons@AKU

Community Health Sciences

Department of Community Health Sciences

January 2001

Community health sciences and the legacy of Ibn Ridwan at the aga khan university

F White

Aga Khan University

Follow this and additional works at: https://ecommons.aku.edu/pakistan_fhs_mc_chs_chs

Recommended Citation

White, F. (2001). Community health sciences and the legacy of Ibn Ridwan at the aga khan university. *Eastern Mediterranean Health Journal*, 7(1/2), 280-282.

Available at: https://ecommons.aku.edu/pakistan_fhs_mc_chs_chs/415

Report

Community health sciences and the legacy of Ibn Ridwan at the Aga Khan University

F. White¹

SUMMARY This report briefly describes the Aga Khan University with particular reference to the Department of Community Health Sciences which was recently rehoused in the new Ibn Ridwan building. The building was named after Ibn Ridwan because of his significant contribution to community health, and some details of his life are given.

Background

On September 8, 1999, the newly constructed Ibn Ridwan building at the Aga Khan University, financed by donations from Ismaili health professionals in Canada, was formally inaugurated by His Highness Prince Karim Aga Khan.

The Aga Khan University (AKU), part of the Aga Khan Development Network, obtained its charter in 1985 with the inauguration of its Medical College, having launched a School of Nursing in 1983. These entities comprise the Faculty of Health Sciences in Karachi. An Institute for Educational Development was subsequently established in Karachi, and a decision taken to establish a Centre for Advanced Nursing Studies in East Africa. An Institute for Islamic Civilizations is to be developed in London, England, and a College of Arts and Sciences is planned for Karachi.

The Faculty of Health Sciences is committed to community-oriented education, emphasizing leadership for effective and

affordable health systems. An urgent need for qualified public health professionals in Pakistan and nearby developing countries prompted AKU to develop relevant undergraduate, graduate, specialty and continuing education programmes through its Department of Community Health Sciences (CHS). Assistance during the early phases of the development of CHS came from McGill University in Canada and the University of Toronto.

The modus operandi emphasizes learning through primary health care (PHC) interventions in community settings. CHS manages PHC projects in both urban and rural Pakistan. A measure of the success in urban squatter settlements is the > 50% reduction in infant and maternal mortality over a recent 5-year period. In addition, CHS currently manages approximately 20 research and development projects. As the largest academic department at AKU, the CHS faculty and staff (more than 150) had been housed for many years in temporary facilities.

¹Department of Community Health Sciences, Faculty of Health Sciences, Aga Khan University, Karachi, Pakistan.

Received: 05/04/00; accepted: 18/07/00

Naming of the building

Since a building's name is an important part of its identity, AKU buildings may be named after a donor's family or after a well known personality who has made significant contributions in a field relevant to the University's mission. In the present instance, a search was made to identify great Muslim contributors to community health. After extensive consultations, the name of Ibn Ridwan was recommended.

Ibn Ridwan

Abu'l Hasan Ali Ibn Ridwan Al-Misri, an Egyptian, also known as Ibn Ridwan (998–1061 AD), was the impoverished son of a bakery employee [1–3]. He supported his early education through astrological forecasting in the streets of Cairo. Studying exclusively from books (he could not afford a teacher), he pursued the natural sciences, logic, astronomy, metaphysics and medicine, devoting much time to examining medical compendiums translated or compiled in Arabic. He was strongly influenced by the works of Hippocrates and Galen. His own works were translated into Latin, Turkish and Hebrew. Appointed Chief Physician of Egypt during the rule of the Fatimid caliphs, his major contribution was in promoting public health and creating a better understanding of the impact of living conditions on common diseases.

Amongst Ibn Ridwan's extensive literary output is a treatise *Risala fi dafa madarr al-abdan bi-ard Misr* [*On the prevention of bodily illnesses in Egypt*], dealing with health conditions in Egypt, preventive measures and hygiene rules for the inhabitants, and a medical topography of Cairo. In it, he laments the lack of plan-

ning and the appalling situation that existed: dirty crowded streets, tall buildings, lack of public health services and a suffocating atmosphere during the hot summer months. He explains how to prevent plagues and pestilence, emphasizing unpolluted air and water, and sanitary living quarters. He points to the role that the physician can play by applying useful preventive and therapeutic measures. One sees, through the work of Ibn Ridwan, the beginnings of an integrated approach to health, and a greater awareness regarding the importance of prevention, rather than passively accepting ill-health as predestination.

Commentary

Ibn Ridwan, a leading practitioner of public health at the dawn of the second millennium, is but one among many Arab scholars who protected and advanced knowledge during the centuries-long war between science and medieval Christianity [4]. Aside from the religious schism between the Christian and Muslim worlds, which continues to this day, it is difficult to separate the two in terms of their medical and public health traditions [5,6]. The generosity of Ismaili health professionals in Canada, the recognition of a legitimate historical hero of public health in the naming of the Community Health Sciences building at AKU, and other important East–West links serve to illustrate the common aspects of Christian and Muslim worlds and help to bridge the gaps.

Acknowledgement

Asra Qureshi, Head Librarian at AKU, was very helpful in locating the three references on Ibn Ridwan.

References

1. *Encyclopedia of Islam*, Vol. III. London, Luzac and Company, 1979.
2. Daeratul-Maarif. *General encyclopædia of arts and sciences*, Vol. 3. Beirut, Lebanon University, 1960 (translated from Arabic).
3. Wright DL. *The legacy of Arabic medicine during the golden age of Islam*. Kuwait, Islamic Organization for Medical Sciences, 1996.
4. Hoodbhoy P. *Islam and science: religious orthodoxy and the battle for rationality*. New Jersey, Zed Books, 1991.
5. Porter R. *Medicine, a history of healing: ancient traditions to modern practices*. New York, The Ivy Press, 1997.
6. Loudon I, ed. *Western medicine: an illustrated history*. Oxford, Oxford University Press, 1997.

Primary health care support

Since the primary health care (PHC) policy was adopted by WHO more than 20 years ago, PHC has made an important contribution to achieving improvements in health status in many countries of the Region. However, the context within which PHC has to operate and the health issues it has to address are clearly changing. PHC now faces new economic, institutional and social challenges. The Regional Office is committed to collaborating with countries of the Region in their efforts to develop and strengthen national PHC policies and programmes to meet these challenges.

Source: The work of WHO in the Eastern Mediterranean Region. Annual Report of the Regional Director 1 January-31 December 2000. Page 33.