

Psychiatry in Morocco during the French Protectorate

Dr Fouad LABOUDI^{1,2}, MDPH.D., Pr Allal RAGOUG³, Ph.D., Pr Jamal MEHSSANI¹, MD

¹Faculty of Medicine and Pharmacy, Mohammed V University, Rabat, Morocco

²Psychiatry Department, Ouarzazate, Morocco

³University Institute for Scientific Research (IURS), Mohammed V University, Rabat, Morocco

Abstract: *Psychiatry is a major challenge to the current Morocco despite the existence of other health priorities. The management of psychiatric disease was present in Morocco for centuries already with the existence of famous bîmâristâns like Salé or Sidi Fredj in Fez, a brilliant period for the Arabo-Andalusian medicine in Morocco. The Scientific decline in Morocco was accompanied by the presence of the supernatural and the irrational in front of the stage and this will continue until early a protectorate. But long before the signing of the A protectorate Treaty of March 30, 1912 missionary doctors participated in medical assistance. French psychiatry will thus mark for a period language organization of psychiatric assistance to Morocco. The objective of this work is to shed light on the contribution of the French colonial psychiatry in Morocco.*

Keywords: Psychiatry French protectorate, psychiatric assistance, civilizing mission, development

1. Introduction

Medical care for psychiatric patients was present in Morocco for centuries already with the presence of famous bîmâristâns such as Salé or Sidi Fredj in Fez during the brilliant period of medicine in Morocco.

The Scientific decline in Morocco since the seventeenth century was accompanied by a request for hospital psychiatric care rather rare, with the supernatural and the irrational in front of the stage [1].

The management was devolved to the insane « fkihs » and marabouts. The bîmâristâns gradually fall into disrepair and become asylums for a demand for traditional care in fkihs and marabouts consistent with demonic possessions as explanation of psychiatric illness.

This will continue until a protectorate. But long before the A protectorate Treaty signed March 30, 1912 missionary doctors, has participated infiltration, a "civilizing mission" well recognized in the overall strategy hidden by the veil of medical assistance.

French psychiatry will thus mark for a period language organization of psychiatric assistance to Morocco [2].

Our work will attempt to shed light on the history of psychiatry in Morocco during the colonial period.

2. Psychiatry before the French A Protectorate: Overview

In Morocco, general medicine and psychiatry in particular and for long periods was a reflection of the Arab-Andalusian medicine with Fars names like Avicenna, Razès, Averroës, Ishaq Ibn Imran and many others who had a rich semiotic psychiatric description.

The time of hospitals: bîmâristâns [3] a Persian term that etymologically **Stane**: a place and **Bimar**: sick, contained real psychiatric structures adapted to the mentally ill.

There were several bîmâristâns with specialized centers for the mentally ill in several cities. One of the most famous was that of Sidi Fredj in Fez [4]. They were built with traditional architecture in the middle of cities promoting the rehabilitation of the mentally ill. They could be well regarded, relatively speaking, as the university hospitals of the time [5]. With the decline experienced by Morocco to the 18th and 19th centuries became exclusively psychiatric bîmâristân to the point of finding no modern institution for the care of the mentally ill in the early 20th century [6].

The mentally ill, were considered to be "possessed" by evil forces, were locked at home, in bîmâristâns, next to the marabouts, or even in prisons. Often, they roamed the streets in the absence of family [7] insertion. They were considered victims of misfortune [8].

Mohamed Al-Kanouni in his book "History of Medicine Arabic in Morocco" recounts the catastrophic state of the Marrakesh hospital that has deteriorated around 1912, after several centuries, it became a refuge for fools and part of which became a prison for women [9].

A year before the signing of the Treaty of Fez of March 30, 1912 which established the protectorate system in Morocco, several doctors were sent to Morocco in the framework of peaceful infiltration. In this context the doctors Paul Serieux and Solomon Lwoff published in April 1911 report entitled "On some of restraint applied to the insane in Morocco (Presentation of instruments)."[10]

The report of Lwoff and Serieux noted severe state of the management of mental illness in the most important cities of Morocco and in prisons [11].

3. A Protectorate Period

1-The report of Lwoff and Serieux

- The report of Serieux and Lwoff established the severe situation of mental illness in Morocco especially in large cities (Tangier, Asilah, Larache, palat, Ksar Lakbir, Fez, Rabat, Salé, and Casablanca).
- The rapporteurs are denouncing the shortcomings in the care of the mentally ill and the poor state of mental institutions that housed mental patients routinely chained and also all marginal.
- Their conclusion was that there's a decline of the Arab-Muslim [12] psychiatry which there were only vestiges of its golden era [13].
- They noted the general deadlock paralyzing Morocco for centuries, the teaching plan of modern medicine with use of magic and religious treatments.
- They recommended an external intervention to bring the country out of the dark [14] ages that would be the beginning of modern psychiatry in Morocco during the period protectorale.

2-Recommendations

Serieux's recommendations and Lwoff beginning of the period protectorale insisted the French authorities [15]:

- The use and the gradual improvement of *mâristâns* (Tangier, Fez, Casablanca, Marrakesh ... etc which will be specially devoted to indigenous insane. The medical service of these *mâristâns* will be assured by the doctors of the French government.
- Creation Tangier, Fez, Casablanca three lunatic services specifically reserved for Europeans [16].
- Morocco's pacification as saw Marshal Lyautey gave a prime spot in medicine. It was created by hand a small group of French experts to organize a health service in Morocco; they had come to general medicine, radiology, bacteriology, experts in malaria, in Otorhinolaryngology and psychiatry [17]

In psychiatry, the French authorities had then prime concern through psychiatry understanding of native pathology [18] to avoid errors in the Algerian experience with the primitivism of the native magrébin and domineering vision from of the West [19].

3- Psychiatric action during the protectorate in Morocco:

- To lead has it's a protectorate authorities goals were using several doctors who work as installing medical assistance to Moroccans.
- With administrative support, France would introduce the concept of public service, correlative notion that social progress and modern state [20].
- The introduction of modern psychiatry in colonial Morocco was to start the rehabilitation, modernization and promotion of health structures, the abdication of channels for patients and strengthening the nursing staff.
- This introduction has allowed a gradual break with the field of magic-witchcraft beliefs in favor of scientific practices.
- Thus, elder's *bîmâristâns* would disappear to be replaced by psychiatric hospitals on the Western model.
- Several French psychiatrists and psychoanalysts settled in Morocco such that R. Laforgue, Mr. Igert or J. Bergeret.

- They assured their duties either privately or with government, replacing the military doctors whose function was limited thereafter to military hospitals or company troops.
- The increase in immigrant numbers experienced by the colonial Morocco also increased the number of these doctors but without any psychiatrist of Moroccan nationality.
- With the introduction of psychiatric assistance, the *mâristâns* gradually become obsolete and are less frequented [21].
- Psychiatric care demand was increasing and the traditional medicine field was moving modern psychiatry, trying to find convincing medical translations and interpretations replacing the discourse of different social actors in this popular medicine.

4-Psychiatric hospitals

Several colonial psychiatrists including Du Mazel, Dr. Pierson [22], Igert and many others, were able to develop at the same time a reflection on the Moroccan psychology and introduce later psychiatry as a therapeutic practice. The ancient *mâristâns* being built become outdated, we decided in 1931 to build the Neuro-Psychiatric Hospital Berrechid.

He served first field hospital consisting of some abandoned houses which were joined a first psychiatric ward for the reception of French patients. It was Dr. Du Mazel holding the position of the first Director of the first Moroccan psychiatric hospital Berrechid Hospital ten years after the mission of Lwoff and Serieux, its findings and conclusions do not differ much from those of his predecessors but more detailed [23]. This hospital was renovated in 1926 to serve in 1931 as public neuropsychiatric hospital [24] where Moroccan and foreign will be treated in the same way. Since it would be led by Dahir of 8 March 1931.

The hospital Berrechid was a direct emanation of the European asylum model. It is the first modern psychiatric hospital was built in the same architectural standards French (of pavilion type, distant from urban centers) and governed by the same rules of operation the medical teams were French and implemented the same therapeutic techniques. This hospital was under the technical and administrative control of management of public health, with a bed capacity of 170 initially, and over 1,000 beds to independence.

In April 1933, was held in Rabat the XXVIII session of Congress psychiatrists and neurologists from France and French-speaking countries under the chairmanship of Dr. Colombani, then director of the A protectorate of assistance and sanitation [25]. With the increase in requests for consultations from other units were created for the mentally ill in other cities, in 1935, a Marrakech departement for "Muslims" patients; and in 1947 the psychiatric hospital in Fez. Psychoanalysis has also been introduced in the 40s by Dr. René Laforgue and enrolled in current psychiatric thinking of that period [26].

The psychiatric assistance then behaved in 1949:

- Casablanca: a great service 50-bed hospital Jules Colombani, with insulation and external consultation and a small temporary isolation ward at the hospital Jules Moran.

- Berrechid: An extensive neuropsychiatric hospital provided at the time of modern facilities and is in liaison with all first aid services.
- Rabat: A temporary unit at Marie Feuillet military hospital.
- Marrakech: A hospital ward established in 1935.
- Fez: A psychiatric hospital built in 1947.
- Ben Ahmed: A convalescent home for elderly.

The psychiatric assistance then included services in general hospitals regions, responding to psychiatric emergencies, and services for the chronically ill with a separation between nationalities by introducing services to Moroccans and others to Europe.

In addition to general psychiatry, health administration has implemented some outpatient child psychiatry, a class for children with learning delays in Rabat and a rehabilitation center for young offenders in Sidi Ayachi and Azemmour. Thus, on the eve of independence, was seen to develop the psychiatric field in a colossal rate not outside the global development of this discipline. The Morocco enjoyed a diversity of currents of thought which then enabled by their complementarities a flourishing medical practice in attributing to this discipline a track to his progress.

All kinds of practices developed at the international level however we found at the therapeutic based on chemotherapy, psychotherapy or electric convulsive therapy, from which have continued to remain traditional practices. We must not forget the parts of Morocco were under Spanish a protectorate. It was only much later, around 1950, the Spanish a protectorate take care of psychiatry in northern Morocco, but the means were limited [27]. With the proactive action of the one Spanish psychiatrist who practiced in the northern area, Dr. Alfonso Turegano [28].

4. Conclusion

The management of psychiatric illness prior to the protectorate interfered with different mentalities and beliefs ranging from the magical-witchcraft pipes and rejection.

This support has experienced a revolution thanks to the protectorate era with greater socio-cultural understanding, better tolerance and better awareness of the problems of mental health.

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