

Beverly A. Tsacoyianis. *Disturbing Spirits: Mental Illness, Trauma, and Treatment in Modern Syria and Lebanon.* Notre Dame: University of Notre Dame Press, 2021. 370 pp. \$55.00, cloth, ISBN 978-0-268-20072-5.

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Anyone who has spent time in Syria or Lebanon has likely come across a representation of the evil eye, as three concentric circles set on a bright cerulean background, or as an eye alone or in the palm of an open hand known as a *khamisa*. The evil eye is mentioned in the Quran, as is the existence of spirits capable of interfering with the lives of mortals. A Pew Research Center poll in 2012 found that the belief in such spirits is widespread in the Middle East and North Africa (the English term “genie” derives from the Arabic for spirit, *jinn*).[1] People who become possessed by these spirits, or *junūn*, are considered *majnūn*, which translates in English to mad or crazy. A host of treatments may be prescribed to expel the spirits in a kind of exorcism, including the recitation of Quranic verses, visits to shrines and other holy sites, and the application of water from a so-called fear cup to the part of the body into which the spirits are thought to have entered.

It is the continued prevalence of these beliefs and practices that Beverly A. Tsacoyianis explores in *Disturbing Spirits: Mental Illness, Trauma, and Treatment in Modern Syria and Lebanon*. She argues that such “vernacular healing” survived the introduction of medical modernism to the region in the late nineteenth century, the moderate growth of mental health hospitalization and psy-

chiatric care throughout the twentieth century, and years of war and upheaval in both nations up to the present day. Both Christian missionaries at Asfuriyeh (Lebanon Hospital for Mental and Nervous Disorders) on a “civilizing mission” and secular nationalists at Syria’s Ibn Sina Mental Hospital intent on modernization tried to disrupt the connection between mental illness and spiritual beliefs in Syria and Lebanon. They promoted biomedical practices such as electroshock therapy and chemical treatments. In more recent years, war has both added to the number of people suffering from mental illness and trauma, and left the already insufficient state of institutional care in disarray.

The book begins with an overview of vernacular healing beliefs and practices in Syria and Lebanon from the late nineteenth century to the present. Tsacoyianis provides ample evidence of the widespread nature of these practices by using missionary travelogues, novels, and accounts by foreign and local psychiatrists and other scholars. Many are critical of “folk psychiatry” (p. 113), calling its practitioners “holy fools” (p. 29) and “ignorant Moslem sheik[s]” (p. 24) and sensationalizing descriptions of certain practices for European and American readers (pp. 113, 29, 24). It is not only the foreigners who are disparaging; Salafi re-

former Rashid Rida too derided the practices as backward in favor of a more “rational” approach. However, Tsacoyianis also brings in the voices of those who spoke positively about the practices in the 1960s and 70s, including Lebanese American psychiatrist John Racy and Sudanese psychiatrist Tigani El Mahi, then a mental health advisor for the World Health Organization (WHO). Racy and El Mahi promote the incorporation of vernacular healing approaches into biomedicine because of their cultural importance and the lack of available alternatives. El Mahi reminded leaders of the WHO in 1960 that “it is essential to make it clear that the concept of mental health is not exclusively a medical one” (p. 43). Indeed, Tsacoyianis notes that while the vernacular system was more holistic, biomedicine “was a system to heal only one dimension of the body, or in the case of mental illness, the brain—but it ignored the soul and, in some senses, the mind” (p. 43).

Alongside these enduring vernacular practices, the late nineteenth and early twentieth centuries saw the establishment of Greater Syria’s first medical and mental health institutions. The 1876 Ottoman Mental Health Hospitalization Act marked the first time the state took an official interest in standardizing care for those afflicted with mental illness, and it coincided with increased standardized health care in general. The development of medical institutions in the late nineteenth-century Ottoman Empire was part of a wider attempt to modernize in the face of strengthening European empires. The Ottoman Medical College, founded in 1903 in Damascus, was the first medical school for Syrians, who previously had to travel to Istanbul or Cairo for their training. The school was public, secular, and free to Damascenes, as opposed to the private, tuition-based, and religious Syrian Protestant College (later renamed American University of Beirut) and St. Joseph University. Tsacoyianis provides an interesting discussion of the nationalist project of the Ottoman Medical College, which switched its

language of instruction to Arabic in 1909 and in 1919 was renamed Arab Medical College.

Tsacoyianis’s most original research is found in the chapters on Asfuriyeh and Syria’s Ibn Sina Mental Hospital, both of which were forced to close because of war. For Asfuriyeh, Tsacoyianis uses annual reports, committee meeting minutes, and correspondence between administrators and hospital donors, while for Ibn Sina her source base is 110 patient case records from the 1920s to the 1950s which she was granted permission to view, an ethnographical study from the 1950s, and interviews and oral history research she conducted with Syrian psychiatrists and psychologists between 2008 and 2019. While for Asfuriyeh the source base is geared toward fundraising for the hospital and therefore attempts to send a positive message about its work, the material for Ibn Sina paints an overwhelmingly negative picture.

Tsacoyianis highlights two main threads in the Asfuriyeh sources that fit into existing historiography on foreign intervention into Lebanon in the late nineteenth and twentieth centuries. First, the European and American founders, donors, and board members of this private mental hospital, which existed from 1899 to 1983, spoke of the hospital as a key part of the “civilizing mission” of colonial projects worldwide. Appealing to donors to fund the hospital’s construction in 1895, the Swiss Quaker missionary Theophilus Waldmeier stated that “sound mental health is the basis of a progressive nation” and that “it is part of favoured Western States, such as our own, to help the East to a higher plan of life, religiously and socially” (p. 81). Much of the book’s foreign accounts of vernacular healing come from American Presbyterian missionary Henry Jessup, who spent five decades in Syria and Lebanon and was the first secretary of Asfuriyeh mental hospital. He described such practices in chapters called “The Ignorance” and “The Superstitions” in his 1874 book, *Syrian Home Life*, and recounted in his 1910 book, *Fifty-Three Years in Syria*, that people in the region

“prefer[red] to bring their sick children to some sheikh’s tomb, or to use some charm or relic on them, or get the sheikh to read the Koran over them, or follow some senseless advice, rather than trust the apparently more senseless doctors” (p. 81).[2]

Second, Asfuriyeh administrators and staff tried to avoid any impression that the hospital contributed to sectarian tensions in Lebanon, likely aware that foreign missionaries and diplomats had indeed played a large role in igniting them.[3] The hospital actively proselytized into the 1950s, and Tsacoyianis includes correspondence between doctors expressing anxiety that the community would look negatively upon transfers of patients between Asfuriyeh and a nearby Catholic hospital. Tsacoyianis calls this “anti-sectarian Protestant mission work,” explaining that “they conflated their definition of modernity with biomedical psychiatry but they also conflated modernity with Western forms of Christianity” (pp. 108, 104). The hospital’s fundraising appeals well into the twentieth century highlighted its diverse patient population. Tsacoyianis includes a photograph of female patients at Asfuriyeh from the 1924 annual report showing a Christian from Aleppo, an Armenian from Aintab, a Jewish woman from Beirut, a Lebanese woman, a Muslim, a Zionist Russian Jewish woman, and a Christian from Damascus (p. 217).

In contrast to Asfuriyeh, Syria’s Ibn Sina Mental Hospital, which existed from 1922 to 2018, was state-run and secular. Tsacoyianis’s analysis of this hospital therefore focuses on the state’s aim to “supplant local knowledge with a standardized, universalized, ordered, rational, and scientific knowledge through the use of technology and planning, from physical institutions to urban and rural spaces” (p. 110). She notes that the state’s main goal in hospitalizing patients therefore was preserving public safety. The firsthand accounts of Ibn Sina from the 1950s and ’60s by Lebanese American psychiatrist John Racy and Dutch psy-

chiatrist Gerard Kraus paint a grim picture, which is corroborated by Tsacoyianis’s review of the patient records. Doctors administered electroshock therapy extensively with no documented improvement in the health of the patients. Many patients were considered “incurable,” and “the hospital was for these Syrian men a place of control, not cure. They were inconvenient for doctors, many of whom were so overworked that they left little record of treatment” (p. 127).

Peering into the private lives of families seeking out treatment for loved ones suffering from mental illness is a challenge, and Tsacoyianis’s formidable decision to tackle it is complemented by her success in gaining access to patient files at Ibn Sina and the depth of research undertaken for the project. However, the central argument that vernacular healing practices are widespread and have withstood decades of upheaval relies on little evidence, most of it anecdotal. The one statistic offered twice in the book—that over 90 percent of mental health patients at Ibn Sina sought vernacular healing before being admitted—is from one interview with a doctor there. The amount of documentary evidence on the topic is likely thin; anthropological fieldwork or further surveying such as the work by Pew cited above would help to bolster her argument.

One way that Tsacoyianis gets around this lack of empirical evidence is by examining literature in her final chapter. Here she presents a discussion of work by writers in Lebanon and Syria who have confronted the trauma faced by their fellow citizens in wartime, a topic which is repressed by state and society. Because of this work, Syrian writers Yassin Al-Haj Saleh and Samar Yazbek have been forced into exile, and Lebanese author Hanan al-Shaykh’s novel *Beirut Blues* (1992 in Arabic; 1995 in English) has not received much attention. Tsacoyianis also discusses in this chapter the recurring appearance of the mad person as unreliable narrator, permitted to discuss forbidden topics because of their mental

illness. This chapter is rich with material although it is only tangentially related to the rest of the book.

Though the central topic of *Disturbing Spirits* is mental illness and treatment, Tsacoyianis covers wide territory in her time period and thematic approaches, and she uses an eclectic mix of sources. This leaves the reader with occasional whiplash and disorientation, as when the text jumps from a missionary's account of a famous exorcist in Palestine in the 1920s to an anthropological study of Twelver Shi'is in the 2000s at the Sayyida Zaynab shrine in Damascus and then back again. Because Tsacoyianis's argument is for continuity in prominence of these practices, she does not discuss how the practices, or their reception by others, changed over time. Additionally, a wide net is cast for examples of mental illness, from those who suffer schizophrenia to trauma survivors, and another for instances of vernacular healing. As a reader unfamiliar with the literature on these topics, it was difficult at times for me to know where (and whether) there is a dividing line between the broader topic of social bonds and that of vernacular healing. For example, when Yazbek is reeling from having been at the site of a bombardment in Syria, a group of women comforts her by surrounding her, holding her hand, and reciting Quranic verses. Tsacoyianis calls this "ad hoc psychosocial and religious support" and emphasizes the significance of Yazbek relating this story, rather than anything related to antianxiety medication, psychotherapy, or other biomedical treatment, as evidence that vernacular healing remains the treatment of choice for Syrians suffering from mental illness and trauma to this day (pp. 170-171).

Notwithstanding these critiques, Tsacoyianis's book is a highly empathetic look at the history of mental illness treatment in Syria and Lebanon from the late nineteenth century to today. The importance of vernacular healing practices should not be neglected by historians simply because they

are difficult to document or quantify. The sources she shares are a valuable and previously unexplored window into the everyday experiences of people experiencing mental illness in general, as well as the trauma brought on by famine, colonial and state mismanagement, and war, over more than a century.

Notes

[1]. "The World's Muslims: Unity and Diversity," Pew Research Center, August 9, 2012, <https://www.pewresearch.org/religion/2012/08/09/the-worlds-muslims-unity-and-diversity-4-other-beliefs-and-practices/>.

[2]. Henry Jessup, *Fifty-Three Years in Syria*, vol. 1 (New York: Fleming Revell, 1910), 153-54.

[3]. For more on the role of European intervention in igniting Lebanese and Syrian sectarian tensions in the nineteenth century, see Ussama Makdisi, *The Culture of Sectarianism: Community, History and Violence in Nineteenth-Century Ottoman Lebanon* (Berkeley: University of California Press, 2000); and Bruce Masters, *Christians and Jews in the Ottoman Arab World: The Roots of Sectarianism* (Cambridge: Cambridge University Press, 2001).

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