

UC Santa Barbara

UC Santa Barbara Previously Published Works

Title

Joelle M. Abi-Rached. 'Aşfüriyyeh: A History of Madness, Modernity, and War in the Middle East . (Culture and Psychiatry, 1.) 344 pp., illus., index. Cambridge, Mass.: MIT Press, 2020. \$40 (cloth); ISBN 9780262044745.

Permalink

<https://escholarship.org/uc/item/0442c8nr>

Journal

Isis, 113(3)

ISSN

0021-1753

Author

Moore, Taylor M

Publication Date

2022-09-01

DOI

10.1086/721041

Copyright Information

This work is made available under the terms of a Creative Commons Attribution License, available at <https://creativecommons.org/licenses/by/4.0/>

Peer reviewed

Circulation" (Historical Studies in the Natural Sciences, 2016) and, with Alix Hui, of "Testing the Underwater Ear" (in *Testing Hearing* [Oxford, 2021]).

Joelle M. Abi-Rached. *ʿAṣḫūriyyeh: A History of Madness, Modernity, and War in the Middle East.* (Culture and Psychiatry, 1.) 344 pp., illus., index. Cambridge, Mass.: MIT Press, 2020. \$40 (cloth); ISBN 9780262044745.

Joelle Abi-Rached's *ʿAṣḫūriyyeh: A History of Madness, Modernity, and War in the Middle East* is a compelling and well-researched institutional history of one of the Middle East's first psychiatric hospitals—the Lebanon Hospital for the Insane (known colloquially as ʿAṣḫūriyyeh). The book weaves together the complex social, political, and economic conditions that mediated the hospital's founding by a Swiss Quaker missionary in 1896, its rise to regional and international prominence, and its ultimate untimely demise following the Lebanese Civil War in 1982. ʿAṣḫūriyyeh and its history, according to Abi-Rached, act as both "metonymy and metaphor" of the sociopolitical history of modern Lebanon itself (p. 21).

ʿAṣḫūriyyeh is composed of six chronological chapters and an epilogue. Chapter 1 combines accounts from European travel literature with those in Arabic medical journals to illustrate the discursive climate around "madness" and its treatment prior to the founding of ʿAṣḫūriyyeh, which intellectual elites in late Ottoman Lebanon heralded as a critical step in the region's modernization. Chapter 2 studies the birth of psychiatry in Lebanon as a by-product of the struggles for influence and power between Britain, France, and American missionaries. Chapter 3 charts the hospital's continued growth as an institution of local and international repute, as well as the short-lived attempts to make it a "modern" psychiatric institute between the 1930s and the 1970s. Chapter 4 uses data from ʿAṣḫūriyyeh's annual reports to analyze the socioeconomic makeup of the hospital's patients and to chart the "landscape of ailments" they were treated for. Chapter 5 chronicles the horrors endured by the hospital's patients and staff during the Lebanese Civil War. Chapter 6 posits ʿAṣḫūriyyeh as a uniquely "nonsectarian" institution in the region and contends that its official closure in 1983 resulted in the monopolization of health-care services by "various religious and political stakeholders"—a process that Abi-Rached calls "the sectarianization of health" (p. 160). *ʿAṣḫūriyyeh* ends with a meditation on ruination, failure, the political power of nostalgia, and medical institutions as critical sites of memory.

As an institution that was destroyed in a period of political turmoil, ʿAṣḫūriyyeh's biography naturally contains many silences. Abi-Rached implores us not to forget sites like ʿAṣḫūriyyeh that remain at the margins of history due to "deliberate acts of amnesia" (p. 192). However, she shies away from archival materials that contain the "voices, narratives, and singular stories" of some of these patients out of concern that they are weighed down by the "'tyranny' of [their] diagnosis" (pp. 98–99). Abi-Rached adheres to an institutional history approach, although recent scholarship in the history and anthropology of psychiatry has shown the possibility of writing social history against and along the archival grain using patient records of asylums and psychiatric wards. Instead, information about patients is aggregated into data sets compiled from the hospital's annual reports to create a "topography" of the patient population and their "mental pathologies" (p. 100), ranging from patients admitted for hysteria and substance abuse to Palestinian and Armenian refugees suffering from the mental effects of war, genocide, and displacement.

Yet the power of ʿAṣḫūriyyeh's story and its impact as an institution are most evident in the moments where Abi-Rached grounds its history in the lives and times of the hospital's staff and patients. The forced hospitalization of the famed patient and Lebanese-Palestinian literary figure Mayy Ziyadah in the 1930s, for instance, illustrates the stark realities of gendered discourses of mental illness and the role mental institutions played in the maintenance of patriarchal structures. The horrific treatment Ziyadah endured during her time at ʿAṣḫūriyyeh, such as force-feeding and being confined by a straitjacket, provoked public outrage against the hospital's methods and further stigmatized the treatment of mental illness in the region. The

writings and exploits of ‘Aṣfūriyyeh’s first Lebanese medical director, Antranig Manugian, provide similarly rich accounts. Manugian worked to transform the disgraced hospital into a cutting-edge psychiatric institute, only to have his dream shattered during the chaos of the Lebanese Civil War. Although ‘Aṣfūriyyeh prided itself on being a “neutral nonsectarian” establishment, the hospital soon became an active battleground. Abi-Rached uses Manugian’s director’s reports to reconstruct the chilling experiences of bombardment, physical violence, and assault, as well the kidnapping of hospital staff, students, and patients by militiamen. Deftly linking the psychopharmacological revolution with the traumas of war, she reveals how new chemical cures like tranquilizers and antidepressants, used by staff to “manage” unruly patients in the 1950s and 1960s, became the only way to calm patients *and* staff during episodes of heavy shelling.

‘Aṣfūriyyeh is an important and timely contribution to the history of psychiatry in Lebanon and the Middle East more broadly. It will be of interest to scholars and students of psychiatry, war, and memory. Abi-Rached reminds us that histories of medicine and medical institutions are always political. She urges us to reflect critically on the importance of institutions like ‘Aṣfūriyyeh and their role as “memory spaces,” not only for investigations into the past but for understanding the present and imagining our future.

Taylor M. Moore

Taylor M. Moore is an Academy Scholar at the Harvard Academy for International and Area Studies and Assistant Professor of History at the University of California, Santa Barbara. She is a historian of science, magic, and medicine in late Ottoman and interwar Egypt.

Bharat Jayram Venkat. *At the Limits of Cure.* 304 pp., bibl., index. Durham, N.C.: Duke University Press, 2021. \$27.95 (paper); ISBN 9781478014720. Cloth available.

At the Limits of Cure is a richly researched and methodologically creative “anthropological history” (p. x) of what it means to cure illness in colonial and postcolonial India. In the much-charted historiography of the social, cultural, and epistemological history of tuberculosis, *At the Limits of Cure* has taken a different route. Bharat Jayram Venkat begins with the question, “What does it mean to be cured in the first place?” (p. x). Following cure and its epistemological, historical, and political limits through archival, ethnographic, and media sources, Venkat makes visible how a range of actors—imperial and postcolonial experts and physicians, British soldiers and Indian coolies, medieval poets and contemporary filmmakers—came to understand and grapple with declarations and conditions of cure. In the process, *At the Limits of Cure* illuminates how understandings of tuberculosis cure in turn shape conceptions of disease, bodies, and environments, as well as history and temporality.

Tuberculosis is an ideal case study for Venkat’s project. From nineteenth-century debates on bacteriological and environmental causation and cure, to midcentury questions over universal tools for measuring biomedical efficacy, like the randomized controlled trial (RCT), to early postcolonial political debates on who should or should not receive the cure, *At the Limits of Cure* successfully shows that tuberculosis became a “model organism” (p. 95) for grappling with a variety of epistemological and ethical conundrums in modern biomedicine.

In five rich and mediative chapters, Venkat productively uses the analytic of “limit” to explore colonial and midcentury genealogies of the current paradoxical place of TB as “eminently curable” (p. x) and simultaneously chronic. Chapter 1, “To Cure an Earthquake,” juxtaposes the life and writing of David Chowry Muthu, a twentieth-century Tamil Christian tuberculosis specialist, with social reformist debates on constraints of freedom in spaces like the Zenana and the colonial prisons. The limits of the vitalist imagination, colonial fiscal policy, and treatment scalability come together in the arrival and failure of the sanatorium as a technology of cure in colonial India. Chapter 2, “Cure Is Elsewhere,” reconstructs