

The difficult path of psychotherapy in developing countries

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Historical notes

- Psychotherapy always existed since the very first healers/sorcerers, for at least 300,000 years; most of it was spiritual and religious
- The word 'Psychotherapy' was first coined by Arrazi 10 centuries ago (Al 'Ilaj Annafsani) in Bagdad

Maristans in Arab-Islamic civilization

- In all big cities: Bagdad, Damascus, Cairo, Kairuan, Granada, Cordoba, Marrakech, Fez,... 4 medical specialties
- Music was played weekly to the mental patients till 1944 in Maristan Sidi Frej in Fez
- 1409: first psychiatric asylum in Christian Europe (Valencia, Spain) inspired by Maristan of Fez

Western psychiatry

- Along with colonization; the only cultural question was asked by Kraepelin in 1904 in Java
- Asylum style, but also psychoanalysis (René Laforgue in Morocco); first psychiatric unit 1908
- First Moroccan psychiatrist in Morocco in 1968, many trained in France

Psychotherapy in Morocco

- Driss Moussaoui and Najat Bennis, 1979, interviewed all persons who might use psychotherapy; less than 10 psychiatrists for 18 million inhabitants
- Main question: how can we use a Western method in Moroccan culture?

Working with mental patients

- In the public sector: emergencies, psychotic patients, huge numbers
- In the private sector: mostly depression and anxiety disorders, one private clinic for the whole country

Psychotherapies

- Psychoanalysis: a few associations (main representative Jalil Bennani)
- Cognitive and behavioural psychotherapy: one association (Nadia Kadri)
- Systemic psychotherapy: one association (Amina Bergach)
- Individual psychotherapy: one association (Mohamed Agoub)

Traditional 'healing'

- 70% of patients use it before, during or after modern care
- More expensive than modern care (Tazi, Moussaoui 1994)
- Case of Bouya Omar in 2016

Identity of psychotherapists

- Very strong decades ago, less now
- Psychotherapists among psychiatrists are also heavy prescribers of psychotropic medications
- Problem with administrative situation of psychologists; doesn't preclude them from working, mostly in the private sector

Culture or anthropology?

- Culture, including religion, is important for the expression of disorder/disease
- The foundation is and remains anthropological, fundamentally humane
- Case of jinn/jnoon
- Same as for gender

Future of psychotherapy in LAMIC

- Necessarily good, developing as it happened in Western countries
- More training than ever; scientific meetings taking place
- Numbers of psychotherapists increasing year after year; coach phenomenon

Concluding remarks

- The bio-psycho-social model is unavoidable
- No mental health worker is an island
- Bridges between various domains of psychiatry/psychology and practices
- How can we share this knowledge/experience with lay people?

Thank you

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