

INTRODUCTION: BEING CRAZY IN BELGIUM

- *Benoît Majerus and Anne Roekens* -

I. The historiography of psychiatry

In Belgium, the history of psychiatry has long remained unexplored – much like the history of medicine in general¹. The first writings on the subject were produced by practitioners, as is often the case in the history of science. But psychiatrists have never been a particularly loquacious group when it comes to their history: the discipline has rarely made a concerted effort to draw on past experience as a way of shedding light on present practices – with the exception of the brief analyses found in obituary notices. Only two historical players rise above this sweeping amnesia and feature in all retrospective narratives: the alienist Joseph Guislain and the Geel colony.

Joseph Guislain rapidly became a figurehead of Belgian psychiatry, earning the nickname the “Belgian Pinel”². This nosographic theorist, director of the central Brothers of Charity asylum in Ghent and a member of several government committees alongside Edouard Ducpétiaux, was a central figure in several networks of influence, each of which claimed him as a key part of their heritage. Just a few years after his death in 1860, a first monograph recognised Guislain as a historically important figure³. As early as 1887, a statue of him was erected in Ghent. A series of shifting identities were successively conferred on Guislain, including “Belgian patriot”, the embodiment of a “higher destiny”, “Flemish activist”, “philosopher”, “genius” and “leader”. Notwithstanding these diverse posthumous interpretations, Guislain undeniably remains a key figure in the history of Belgian psychiatry. His central role is emphasised by the fact that he has been the focus of various public history initiatives: for the bicentenary of Ghent University in 2017, a publication and guided tour (via a smartphone application) were launched. But despite this general interest, no specific academic research has been conducted on the life and work of Joseph Guislain.

The Geel colony constitutes another key element of the Belgian collective memory of psychiatry. Although families in this small town in the Campine region began welcoming mentally ill patients into their homes as far back as the Middle Ages following the influx of pilgrims to St Dymphna, it was not until the late 19th century, and especially subsequently in the 1970s, that this practice began to inspire significant research. These two historiographical junctures both coincide with periods when questions were being raised as to the desirability of the traditional asylum model that recommended psychiatric patients being kept in isolation⁴. The 1970s in particular were characterised by a trend towards deinstitutionalisation and an exploration of practical alternatives to asylum⁵. Interest in the Geel colony also coincided more broadly with the recognition of psychiatry by the humanities and social sciences in the 1960s and 1970s. At a time when institutions and authority in general were the focus of widespread criticism, the academic discipline of psychiatry and the tradition of confinement associated with it attracted particular opposition. In Belgium, this new perspective mainly developed within the field of sociology⁶.

1. For a more detailed but dated historiographical overview: A. LIEGEOIS, “The historiography of psychiatry in Belgium”, *History of Psychiatry*, 1991, Vol. 2, No 7, pp. 263-270. For a recent, comprehensive overview of historical writing about psychiatry: GREG EGHIGIAN (ed.), *The Routledge history of madness and mental health*, Basingstoke, Taylor & Francis Ltd, 2017. 2. PAUL MASOIN, “L’oeuvre de Guislain (1797-1860)”, *Bulletin de la Société de Médecine Mentale de Belgique*, 1920, Vol. 181, pp. 187-224. 3. A. BURCIGRAEVE, *Études médico-philosophiques sur Joseph Guislain*, Brussels, Th. Lesigne, 1867. 4. On the anti-asylum movement in the late 19th century, see AUDE FAUVEL, “Témoins aliénés et “Bastilles modernes”: une histoire politique, sociale et culturelle des asiles en France (1800-1914)”, Paris, EHESS, 2005. 5. Notable publications on the Geel colony include K. VERAGHTERT, “De krankzinnigenverpleging te Geel 1795-1860”, *Jaarboek van de Vrijheid en het Land van Geel*, 1972, Vol. 11, pp. 5-148; M. KOYEN, “De gezinsverpleging van geesteszieken te Geel tot eind 18^{de} eeuw”, *Jaarboek van de Vrijheid en het Land van Geel*, 1973, Vol. 12, pp. 1-200; M. DE BONT, “De patiënten van de Rijkskolonie te Geel. Structurele aspecten van de gezinsverpleging van geesteszieken (1860-1970)”, *Jaarboek van de Vrijheid en het Land van Geel*, 1974, Vol. 13, pp. 11-60. 6. See the research by Lydwin Verhaegen and Jos Orenbruch.

Considerable legal research was also conducted on the “social defence law” and its application, the legal status of psychiatric patients and the *collocation* procedure (replaced in 1990 by a system which placed patients “under observation”). These subjects were the focus of parliamentary and medical debates from the 1960s to the present day, and several legal specialists produced significant publications in this area in the 1980s and 1990s⁷.

But apart from this occasional research, most of the historiographical production in the field of psychiatry comes from the institutions themselves, which since the 1990s have begun to make major efforts to preserve their heritage. Many psychiatric hospitals have recently published books or treatises on their history. The aim of these publications, often produced to mark an anniversary or commemorative event, is to create an identity for a community, a hospital group or a group of patients and care givers. These monographs are increasingly based on extensive archival work, sometimes in cooperation with or directed by historians⁸. The Brothers of Charity played a

key role in this work of historical preservation. This congregation, which became involved in treating psychiatric patients soon after it was founded in 1807, took the initiative of opening a psychiatric museum in Ghent in 1986. The “Museum Dr. Guislain” is now one of the most significant museums in this field in the world. Its permanent exhibition on the history of psychiatry – currently undergoing a complete overhaul – tells the overarching story of the history of psychiatry, from the early “dark ages” characterised by confinement and the absence of effective therapy to the more modern, humanist approach. This traditional narrative is complemented by temporary exhibitions (both artistic and historical), which offer a more critical perspective on psychiatry and its social function. An ambitious series of catalogues serves as not only to question the traditional historiography of Belgian psychiatry but also to address much wider issues⁹. Alongside these museum-based publications, René Stockman, current Superior General of the Brothers of Charity, has become a prolific author about the Brothers of Charity Congregation and, by extension, the history of psychiatry in Belgium¹⁰. However, while this

7. These include JEAN GILLARDIN (ed.), *Malades mentaux: patients ou sujets de droit? Émergence d'un nouveau statut civil*, Brussels, 1985. (Publications des Facultés universitaires Saint-Louis. Travaux de recherche; 6); JEAN GILLARDIN et al., *Malades mentaux et incapables majeurs: émergence d'un nouveau statut civil*, Brussels, 1994; MICHEL VAN DE KERCKHOVE, *Le juge et le psychiatre*, Brussels, 1982 (Facultés Universitaires Saint-Louis. Séminaire interdisciplinaires d'études juridiques. Document de travail; 22); Françoise Tulkens (ed.), *Généalogie de la défense sociale (1880-1914)*, Brussels, 1988. 8. Examples include C. DHAENE AND L. DHAENE, *Sint-Jozef Kortenberg. Van "Maison de Santé" tot Universitair Centrum. 145 jaar zorg voor geesteszieken, 1850-1995*, Kortenberg, Universitair centrum Sint-Jozef, 1995; JEAN VERMEYLEN AND LUCETTE SCHOUTERS-DECROLY (ed.), *Hors les murs! Naissance de la psychiatrie extrahospitalière. L'équipe – histoire & philosophie*, Brussels, L'Équipe, 2001; ANNE ROEKENS (ed.), *Des murs et des femmes: cent ans de psychiatrie et d'espoir au Beau-Val-Jon, Namur*, Presses Universitaires de Namur, 2014; RIA MOENS, *De geschiedenis van het Psychiatrisch Ziekenhuis Duffel. Van gesloten gesticht naar open centrum*, Duffel, Den Grooten Duffelaar, 2017. 9. The first catalogue focused on the history of psychiatry: RENÉ STOCKMAN, *Geen rede mee te rijmen*, Sint-Martens-Latem, Museum Dr. Guislain, 1989. Subsequent topics moved well beyond the narrow confines of psychiatry, while still remaining linked to the field, for example: Museum Dr. Guislain, *Schaamte*, Tielt, Lannoo, 2015. 10. RENÉ STOCKMAN, *Liefde in actie. 200 jaar Broeders van Liefde*, Leuven, Davidsfonds, 2006.

plethora of independent, institution-based material is a rich source, it is somewhat detached from more topical issues that are of interest to researchers in the fields of history in general and the history of psychiatry in particular.

In the history departments of Belgian universities, most research on the history of psychiatry is conducted for Master's dissertations. This research, lacking in visibility and rarely giving rise to publications, mainly takes place in universities in northern Belgium (where most of the country's psychiatric institutions are based) and tends to reflect contemporary trends in historiography: whereas in the 1980s and 1990s it was strongly inspired by social history, it has shifted its focus more recently to issues in the realm of cultural history¹¹. Finally, it is worth mentioning the work of researchers who, while they may not focus explicitly on psychiatry, nevertheless refer largely to the field. Although some research touching on psychiatry can be found in publications on the social history of medicine in the 1970s and 1980s,¹² the field has been afforded much more attention by cultural history scholars. Psychiatry has proved to be a rich vein of inspiration for researchers examining for

example the links between body, nation and medicine¹³ or exploring the establishment of gendered identities¹⁴.

II. Why Belgium?¹⁵

The history of psychiatry in Belgium as addressed in this issue will be of particular value for two broader historiographical fields: the history of Belgium and the history of psychiatry.

To quote a recent issue of this very journal on subaltern studies, we hope that this publication "can contribute to spurring on new discussions about Belgian society and the logics of in/exclusion in a historical perspective"¹⁶. Analysing the margins of society does indeed reveal a great deal about the human community that defines them; the treatment of individuals consigned to the fringes for the short or long term reflects a society's value system and priorities. The question of inequality has recently been the subject of renewed interest in the field of humanities and social science, especially since the Occupy movement and the publication of Thomas Piketty's best-seller¹⁷. There has been a particular focus on

11. We have identified 47 history dissertations, 33 of which were produced at Dutch-speaking universities (18 at the Katholieke Universiteit Leuven). The first dates from 1967, and the current decade is the most productive, with 18 dissertations up to 2016. No PhD theses have yet been specifically produced on the history of psychiatry. 12. For example the research by Karel Velle: KAREL VELLE, *De nieuwe biechtvaders: de sociale geschiedenis van de arts in België*, Leuven, Kritak, 1991. 13. See LIESBET NYS, HENK DE SMAELE, JO TOLLEBEK AND KAAT WILS (ed.), *De zieke natie*, Groningen, 2002. 14. VEERLE MASSIN, "Protéger ou exclure? L'enfermement des "filles perdues" de la Protection de l'enfance à Bruges (1922-1965)", PhD thesis, Université catholique de Louvain, 2011; WANNES DUPONT, "Free-Floating Evils. A genealogy of homosexuality in Belgium". PhD thesis, Université Antwerpen, 2015. 15. The ideas in this section arose from discussions with Joris Vanden Driessche about developing a medical history of Belgium, which will result in the publication of an edited book in 2018 entitled *Medical Histories in Belgium*, with contributions from around twenty researchers. 16. MAGALY RODRIGUEZ GARCIA AND AMANDINE LAURO, "Belgian history and the making of marginality and subalternity", *Journal of Belgian History*, 2016, Vol. 1, pp. 1439, p. 14. 17. THOMAS PIKETTY, *Le capital au XXI^e siècle*, Paris, Éditions du Seuil, 2013.

the phenomenon of vulnerability and how it is addressed¹⁸. From a historical point of view, the field of psychiatry has always been closely related to this topic: firstly, it treats mentally ill patients, who can clearly be considered as a marginalised population – especially those who are interned for long periods; and secondly, it has also long been involved in treating other vulnerable social categories (such as children, the elderly and the mentally disabled). In the early 19th century, asylums had a high bed capacity compared with other institutions; they therefore offered a place of refuge for those excluded from society and a leading role in managing marginalised populations considered impossible to integrate into society. Psychiatry thus serves as a useful vantage point for observing the development of Belgian biopolitics – especially since the history of psychiatry in Belgium is notable for its early legislation in this area (with the adoption of the Mental Treatment Act in 1850, amended in 1873) compared to other fields of social intervention: the interaction between the Belgian state, religious congregations specialising in psychiatry, private individuals who directed asylums, local and family communities, etc.

Over and above its specific characteristics, the case of Belgium is clearly of interest for the history of psychiatry in general. First, the field of alienism was one that developed at international level; the pooling of scientific

knowledge and experience and the links forged between medical journals connected psychiatry in Belgium with the discipline in other Western countries. Second, the fact that the history of psychiatry in Belgium is characterised by the strong involvement of religious players gives us a fascinating new perspective on the close relationship between religion and psychiatry. As Hervé Guillemain points out, not only were these two fields concurrent; they also worked in conjunction with one another to “guide public awareness”¹⁹. Moreover, the plethora of archives from religious orders (including the Brothers and Sisters of Charity and the Sisters of Our Lady of Mercy) offers an opportunity to explore the theme of “care” in greater depth, not only as a theoretical concept but as an everyday practice in a history from. This theme has emerged from the discipline of feminist studies and is inspiring history research on a broader scale²⁰. Historicising the notion of care; taking seriously the qualities needed to “look after others” such as gentleness and empathy (often seen as “feminine” characteristics); speculating on the vulnerability of “crazy” people; “degendering” the notion of care (because care givers are not always women, especially in psychiatry): these are all aspects that, seen through the lens of Belgium, can help us develop a new approach to the history of psychiatry. Since psychiatric treatment is not restricted to the medical context and to psychiatric institu-

18. Why and how the concept of “fragility” has begun to be relevant for historians over the past ten years: AXELLE BRODIEZ-DOLINO, ISABELLE VON BUETZINGSLOEWEN, BENOÎT EYRAUD, CHRISTIAN LAVAL AND BERTRAND RAVON (ed.), *Vulnérabilités sociales et sanitaires*, Rennes, PUR, 2014.

19. HERVÉ GUILLEMAIN, *Diriger les consciences, guérir les âmes: Une histoire comparée des pratiques thérapeutiques et religieuses, 1830-1939*, Paris, Découverte, 2006. 20. ANNE JUSSEAUME, PAUL MARQUIS AND MATHILDE ROSSIGNEX-MÉHEUST, “Le soin comme relation sociale: bilan historiographique et nouvelles perspectives”, *Histoire, médecine et santé*, 2015, No 7, pp. 9-15, and more specifically for psychiatry BENOÎT MAJERUS, “Surveiller, punir et soigner? Pratiques psychiatriques en Europe de l’Ouest du XIX^e siècle aux années 1950”, *Histoire, médecine et santé*, 2015, Vol. 7, pp. 51-62.

tions, research into care can also help “deinstitutionalise” the history of “madness”, which – for reasons of access to archives – often tends to remain focused on key institutions and closed environments²¹.

III. Presentation of the journal issue

This issue developed out of a study day entitled “History, archives and psychiatry: prospects for Belgium”, held in Namur in May 2014. Archivists, historians and hospital managers came together to discuss the question of how best to preserve psychiatric archives and make them available for consultation. On the fringes of this event, the idea emerged to bring together a number of historians specialising in psychiatry and give them the opportunity to present their recent research and reiterate the importance of safeguarding documentation on the field – a vital factor in its continued existence. The five contributions in this issue primarily reflect the historiographical trends outlined above: namely, the importance of postgraduate research on psychiatry – Eva Andersen and Gauthier Godart present the findings of their Master’s dissertations –, the relevance of psychiatry for other historiographical fields – Veerle Massin is a legal history specialist –, and the importance of commemorative research – Anne Roekens came to the history of psychiatry because of a commission from a psychiatric institution that was celebrating its centenary. At a more fundamental level, the five articles also represent current trends and research interests in the history of psychiatry in Belgium. The article by Eva Andersen tackles the transnational

dimension of the development of psychiatric knowledge in the 19th century and looks at the Société de Médecine Mentale de Belgique as a member of a very tight-knit international network. The paper by Véronique Deblon examines the two emblematic locations of Belgian psychiatry (the Guislain Hospice and the Geel colony) from the fascinating new angle of architecture, demonstrating that the way these spaces were designed reflected contemporary alienist thinking. The article by Gauthier Godart looks at the infamous Evere case and analyses the impact of the scandal on the legislation governing psychiatric patients in the late 19th century. The contribution by Benoît Majerus and Anne Roekens addresses the question of mortality and the provision of supplies to psychiatric institutions during the First World War, analysing the workings and shortcomings that were both characteristic of the Belgian political and psychiatric system and comparable to crisis situations in other countries. Finally, the article by Veerle Massin moves away from the institutional context of psychiatry to provide a detailed analysis of the consultation and treatment practices implemented in one of the country’s first mental health dispensaries from the 1920s to the 1940s.

It is immediately noticeable that the articles here focus on the “traditional” period of psychiatric historiography, in other words the late 19th and early 20th century. There is a notable reluctance to venture further into the 20th century, a period that is problematic for historians in several respects²². As well as this chronological tendency, four of the five contributions remain closely linked – one might

21. GREG EGHIGIAN, “Deinstitutionalizing the history of contemporary psychiatry”, *History of Psychiatry*, 2011, Vol. 22, No 2, pp. 201-214. 22. VOLKER HESS AND BENOÎT MAJERUS, “Writing the history of psychiatry in the 20th century”, *History of Psychiatry*, 2011, Vol. 22, No 2, pp. 139-145.

even say confined – to the psychiatric institution from which most of the sources were taken. However, beyond these very real limits, this issue reveals the rich diversity of the field of psychiatric history, which has now broken away from the local framework to embrace new research perspectives and is no

longer restricting itself to the positions and perceptions of physicians. The latter are now increasingly joined by nurses, architects, lawyers, politicians, members of religious communities, families and patients, transforming the history of psychiatry into a narrative with multiple voices.

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