

Response to Ellen Amster's *Medicine and the Saints*

Neil Kodesh, University of Wisconsin-Madison

I should state from the outset that I read Ellen Amster's chapter, "Healing the Body, Healing the *Umma*: Sufi Saints and God's Law in a Corporeal City of Virtue," from the perspective of an historian of health and healing in precolonial East-Central Africa. I raise this point both to declare my lack of knowledge about the history of Islam in Morocco and, more significantly, to highlight my pleasant surprise with how familiar Amster's work appeared. For a variety of reasons that fall beyond the scope of this response, the history of North Africa is often severed from the history of sub-Saharan Africa and instead situated within the study of the Middle East and the Mediterranean world. That this chapter seemed so familiar serves as a testament to Amster's ability to meld Islamic Studies with the methodological approaches and analytical insights of Africanist historians. Her work provides a model for future studies and will open a dialogue between sets of scholars who do not speak to each other as frequently as one might expect.

Like historians of precolonial sub-Saharan Africa, Amster in this chapter faces the challenge of unearthing the history of a place for a period prior to a series of momentous transformations that accompanied the implementation of colonial rule. In Amster's case, the particular challenge lies in reconstructing a period in Morocco's past in which Sufi saints – "knowers among the people... who achieved intimacy with God" (18) – acted as political leaders who provided for the well-being of both individual bodies and the broader community (*umma*). The disappearance of this political imaginary resulted from the reforms initiated in the early twentieth century by the Moroccan sultan `Abd al-Hafiz and his court officials. Confronted with

the threat of European colonialism, the sultan's court adopted modernist Islamic *salafiyya* philosophy and European scientific reforms, with the result that Sufi saints disappeared as political leaders. The consequences of these reforms for understanding the history of colonial rule in Morocco – and the relationship between Islam and science in particular – presumably form the basis of subsequent chapters in Amster's book. For the purposes of this chapter, however, their significance lies in the historiographical effects of `Abd al-Hafiz's “war on saintly intermediaries and invisible knowledge.” According to Amster, one of the effects of the “triumph of sultans over saints, of positivism over *batini* knowing” in early twentieth-century Morocco has been the near absence of Islamic saints in contemporary historians' narratives of Moroccan history (20). This despite the fact that, according to Amster, “[s]ainthood was the essence of premodern Moroccan social reality” (18).

Seeking to rectify this void in the scholarship, Amster sets out in this chapter to write a history of a Moroccan Sufi polity that focuses on ways of knowing that were once central to notions of sovereignty – social, spatial, temporal – in this Islamic *umma* but now exist only in fragmented form. Amster draws on an impressive range of sources, including the narratives surrounding the shrines of Sufi saints, conversations with Moroccans about contemporary healing practices, and a three-volume hagiographical compendium of the Moroccan scholar Muhammad ibn Ja`far al-Kattani. The result is a masterful exploration of the relationship between knowledge, healing, and politics in pre-twentieth-century Morocco, a Sufi polity “imagined in and through the human body” (20). While there is much to comment on in this rich analysis, I focus the remainder of my comments on the section entitled “Dissection and the Divine: Autopsy as a Path to Sufi Illumination.”

In this section, Amster considers how we can square what she calls spiritual healing with the more rationalist Greco-Islamic medicine that spread in the Islamic world via Hellenic Greece. She expresses dissatisfaction with the tendency of anthropologists either to focus on saintly healing as a form of social ritual rather than medicine, or to draw on models of medical pluralism that make a distinction between “godly” and “worldly” diseases. Here Amster moves into analytical terrain that has been well traversed by scholars and health and healing in sub-Saharan Africa, who have spent considerable energy wrestling with the question of how to compare science-based medicine with so-called traditional healing. However, Amster’s efforts to reconcile Islam and Galenic medicine – or to demonstrate how historical actors incorporated Galenic medicine into Islamic medicine – differ in some respects from the approaches of scholars working in sub-Saharan Africa. Whereas the latter tend to reject the comparison between “traditional” thought and science, Amster argues that “Moroccan saintly healing was science, if by science we understand an organized intervention based on a paradigmatic understanding of the universe” (42). By this Amster means that Moroccans located, for example, illnesses attributed to organic disorders in the human body and illnesses caused by *jinn* within a broader overarching view of reality – what she variously refers to as an “Islamic cosmological model” (42) or a “cosmological hierarchy of sciences” (43).

At the same time, Amster steers us away from any attempt to reduce the variety of Moroccan medical practices to one theoretical system. This raises questions about the analytical reach of Amster’s “Islamic cosmological model,” which at times appears capable of incorporating a seemingly endless array of practices. This analytical umbrella seems to smooth over possible points of disagreement about the sources of illness and the types of therapies a sufferer might pursue. Disagreements of this nature rarely appear in Amster’s discussion of

bodily ailments. Were there, for example, practices that could not be reconciled within the broader “Islamic cosmological model”? This lack of tension also raises the question about how diagnostic and therapeutic decisions were made in a situation where “healing involved interventions at different levels of the body” (44) and medical practices ranged from drinking the saliva of a *talib* to exorcism to Galenic therapies. The answers to these and similar questions would further enhance our understanding of the politics of knowledge surrounding healing in pre-twentieth-century Morocco. These answers, however, may not be available to Amster given the sources at her disposal in this beautifully conceived, illuminating chapter.