



Socio-Cultural Determinants of Public Perceptions of Mental Illness in Algerian Society: A Sociological Analysis of Beliefs, Therapeutic Practices, and Barriers to Professional Mental Health Care

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Keywords

Sociological variables; Mental illness; Social perceptions; Algerian society; Cultural beliefs; Traditional healing practices; Mental health stigma

Abstract

This theoretical sociological study examines the socio-cultural variables that shape public perceptions of mental illness within Algerian society. It seeks to analyze how deeply rooted cultural beliefs, religious interpretations, popular traditions, and inherited social norms influence individuals' understanding of mental disorders, their perceived causes, and the preferred modes of treatment. Particular attention is given to the persistence of non-scientific therapeutic practices—such as magical rituals, visits to saints, folk healing, and unregulated religious treatments—which continue to compete with or delay recourse to specialized psychological and psychiatric care. The study explores the ways in which these perceptions affect social attitudes toward individuals suffering from mental illness, including stigma, marginalization, denial, and avoidance of professional intervention. It further highlights the risks associated with relying on traditional and superstitious treatment patterns, especially when they contradict established medical and psychological knowledge or are detached from sound religious guidance grounded in Islamic jurisprudence. By adopting a sociological and analytical perspective, this research aims to identify the principal social variables—such as family influence, educational level, religious socialization, collective memory, and cultural heritage—that contribute to the formation and reproduction of traditional representations of mental illness in Algerian society. The study also discusses the implications of these representations for mental health policy, prevention strategies, and therapeutic effectiveness, emphasizing the need for culturally sensitive awareness programs that integrate scientific knowledge with social and religious contexts. Ultimately, the study argues that improving public understanding of mental illness requires not only medical and psychological interventions but also sociological engagement with prevailing belief systems in order to reduce stigma, encourage early diagnosis, and promote access to evidence-based mental health care..

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Introduction:

Abnormal and pathological psychological phenomena have not been outside the scope of human interest throughout the stages of intellectual history; rather, they have been among the issues that prompted individuals and groups to think about them, reflect on their symptoms, and identify their causes. However, perceptions of them were closer to myth and superstition, as it was believed that pathological psychological states and nervous disorders affecting humans occurred as a result of possession by evil spirits, devils, jinn, and other invisible beings. At that time, Ibn Rushd called for the necessity of treating the mentally ill in a way that would remove the conditions of abuse, injustice, and oppression that surrounded them throughout long historical periods, when officials in European societies ordered their isolation, imprisonment, and torture.

When the French Revolution took place in 1789, traditional ideas were reconsidered and the view of mental illness was modified as a disease like any other physical disease. Attention began to be paid to a humane view of the mentally ill. In the late eighteenth and early nineteenth centuries, conditions improved, understanding deepened, and the system of care for the mentally ill developed. Research became active, and the first scientific journal specializing in mental illnesses appeared in 1805. Progress increased further, and the school of psychoanalysis emerged under the leadership of the Austrian scholar Sigmund Freud (1856–1939), who focused on psychosexual development. Freud emphasized libido energy as the latent force that reveals the inherent sexual and aggressive drives in humans, which express themselves unconsciously, and he presented his theory of personality and its components (ego, id, and superego; consciousness and the unconscious).

In recent years, developments have greatly increased and interest in understanding and interpreting mental illnesses has grown. Consequently, methods of psychological treatment have multiplied and diversified, including behavioral therapy, client-centered therapy, drug therapy, and many other approaches. Treatment is no longer limited to one aspect but now includes psychological, medical, and social aspects. Society and governments have shown increased interest in establishing hospitals for mental illnesses and psychological clinics. Psychological research has developed and expanded, and numerous scientific periodicals containing thousands of psychological studies have appeared. Nevertheless, erroneous perceptions about mental illness, its causes, and its methods of treatment still persist in Algerian society due to the values, beliefs, and customs that have become deeply rooted in the cultural structure of society. This has led us, through this theoretical study, to attempt to reveal and understand the attitudes of members of Algerian society toward mental illness and its methods of treatment, according to the following sequence of ideas.

First: Objectives of the Study:

The present theoretical study aims to achieve the following objectives:

1. To attempt to identify the various social variables affecting the individual's perception and understanding of mental illness in Algerian society, in terms of its type and the factors leading to its occurrence.
2. To identify incorrect methods of treating mental illness, whether modern or old or linked to religious or popular cultural aspects, and the extent of the individual's attachment to them and aspirations to be treated through them.
3. To clarify the extent to which the individual in Algerian society controls the methods of recovery from mental illness or not.
4. To attempt to reveal the most important variables shaping the traditional perceptions of Algerian society regarding mental illness.
5. To highlight the obstacles to treating mental illness associated with some incorrect practices in Algerian society.

Second: Importance of the Study:

The importance of the present theoretical study lies in enriching the cognitive aspect related to the social and cultural factors influencing the individual's perception of mental illness and ways of treating it in Algerian society. The issue of individuals' understanding and perceptions of mental illness and the mentally ill is extremely serious and dangerous, as the process of understanding and perception is associated with determining individuals' behaviors in confronting mental illness. In many cases, there are incorrect methods and ways of knowing the nature, type, and causes of mental illness, which result in very serious health problems that may be more dangerous than the extent to which individuals *تصور* their psychological conditions.

The seriousness is also manifested in determining the type of treatment for mental illness, whether by the patient himself or by his environment, such as family and relatives, whether this treatment is formal or informal, modern or

traditional, as this may be a valid reason for delaying the request for specialized psychological treatment due to incorrect perception.

In addition, due to the multiplicity of pathological phenomena related to the psychological aspect of the individual dealt with by psychologists, especially regarding the patient's lack of understanding of his psychological condition, it becomes difficult for the therapist to diagnose the case and deal with it in order to impose appropriate treatment.

Third: Definition of the Concepts of the Study:

1. Social perceptions: These are the formation of an image or special knowledge about a phenomenon, act, or thing, whether tangible or intangible, which enables a person to perceive and understand different things and phenomena through the image formed in his mind. The process of perception may originate from the individual himself or from society by accepting it as it is (Khalil Ahmed Khalil, 1995, p. 141).

By social perceptions here we mean the opinions, meanings, positions, attitudes, ideas, and incorrect connotations adopted by members of Algerian society in interpreting mental illness and its methods of treatment.

2. Mental illness: It is a set of deviations that do not result from physical or organic disorders or brain damage, even if their symptoms are bodily and organic. These deviations take various forms, the most important of which are psychological tension, depression, anxiety, obsessions, involuntary compulsive acts, hysterical conversion, a feeling of weakness of will, inability to achieve goals, fears, and dark thoughts that surround the individual in wakefulness, leaving him distracted and unable to sleep due to the insomnia that affects him (Najlaa Atef Gheith, 2002, p. 134). By mental illness here we mean all illnesses that affect the individual on the spiritual/psychological side and make him unable to control the behaviors that he exhibits.

3. Therapeutic methods: These are the set of procedures followed by the patient in order to get rid of his illness or the health problem he suffers from, and they take multiple forms of different therapeutic practices (Mostafa Fahmi, 1978, p. 26).

By therapeutic methods here we mean the totality of incorrect procedures and methods used by members of Algerian society in treating mental illnesses. These methods include various popular, traditional, magical, religious, and other therapeutic practices.

6. Superstition, Myth, and Folklore:

If we refer to folkloric perceptions and mythical narratives and their relation to the concept of health and illness, we find that they probably stem from historical, value-based, socio-cultural, and structural dimensions. When these dimensions are compared with social and cultural reality, they appear to contradict scientific thinking. Superstitious culture has dealt with the fixed and relative characteristics of human thought, and knowledge has produced actions and practices within which sayings and interpretations are active, some of them spiritual and deeply rooted in ancient metaphysical ideas. Fortune-tellers have also developed their primitive methods in naming the causes of mental illness and epidemics affecting humans. These methods appear when scientific logic is suspended, and they depict the human being as sinful and mental illness as a punishment for a sin they believe he has committed, while they help him treat the illness according to their own convictions and perceptions.

Here superstition and folkloric perceptions take the place of science in diagnosing illness and choosing treatment. What this point clarifies is that all these cultural elements, including non-official religious beliefs, rituals, symbols, popular and superstitious values, myths, and folkloric perceptions, are considered fields and methods that may be illogical in attributing the causes of mental illness to divine punishment. The spiritual, physical, and heavenly religions are far removed from superstitious methods and their ways of dealing with human needs in health and illness, orientation, diagnosis, and treatment. Thus, human beings live within the essence of social and cultural conflicts that clash with superstition and popular thinking on the one hand and with scientific knowledge on the other.

Fifth: Popular Therapeutic Practices for Mental Illness in Algerian Society: Traditional therapeutic models for mental illness in Algerian society are numerous, deriving from popular culture, values, customs, social traditions, and religious norms. They can be identified as follows:

1. Magical psychological treatment: This concept is associated with a stage that societies and cultures passed through called the "pre-scientific stage," in which a type of folk social medicine prevailed, relying in its methods and therapeutic practices on magic, sorcery, and the unseen. This led to the emergence of local designations such as charmers, sorcerer-doctors, and spiritual healers (Amira Mansour Youssef, 1999, p. 137).

Magical practices have aimed, and still aim, to achieve people's traditional desires, foremost among which is the curing of mental illness in its various forms. There are recipes and magical acts recorded in some books specializing in treating social problems such as child upbringing (bad behavior, deviance, crying), infant problems, and psychological problems such as bringing joy to the sad, getting rid of disturbing dreams and obsessions. Examples in Algerian society include:

- a. **The amulet (hijâb):** Used as a preventive measure against magical acts by others. It is hung on different parts of the body and may accompany the person throughout the day or be placed in the pillow while sleeping.
- b. **Incantation (ruqya of sorcery):** Used for protection from evil, sometimes against the evil eye, using many methods such as burning certain objects, adding substances like salt, or reciting words over the person, or using both methods together.
- c. **The talisman:** Words that are understandable or not, spoken or written by the sorcerer in a certain way and given to a person to place in his clothes or on his body in order to overcome or nullify the actions of an enemy.

2. Psychological treatment through tâlib rituals: The concept of zar, through its rituals and practices, indicates that some evil spirits attach themselves to certain individuals. These invisible beings have various names such as Iblis, jinn, Satan, and demon, and they cause diseases and ill health under certain psychological and health conditions, requiring treatment through holding tâlib ceremonies.

Tâlibs, men and women alike, are believed to have the ability to communicate with the unseen and enjoy people's trust in freeing patients from these intractable mental illnesses. They first treat patients with traditional methods such as medicinal herbs, bloodletting, and making amulets and charms to expel evil spirits. If these do not work, the sheikh declares the case intractable and that the spirit will only leave if a tâlib ceremony is held, with sacrifices and offerings. These ceremonies may last several days and include chants, recitations, and rituals, with the sheikh informing those present of the spirits' conditions, such as requiring the patient to wear certain colors during the dancing ceremony. People of all social classes resort to tâlib treatment not only for mental illnesses but also for physical illnesses such as rheumatism and headaches, and women believe that giving birth to deformed or stillborn children is due to these spirits.

3. Psychological treatment through visiting saints: Saints in popular belief are righteous people distinguished by miraculous powers. People resort to saints especially in cases of mental illness, believing that everything associated with the saint has special power, such as trees, fruits, herbs, stones, water, and soil near the shrine, which are taken for healing, washing, or bathing. Some people also sleep in shrines for divination when seeking guidance in decision-making, a practice common in western Algeria.

4. Legitimate ruqya: Seeking prevention and treatment through the Qur'an and Sunnah is related to Muslim belief and physical, mental, and social health. However, many incorrect practices have spread, including: using amulets, turning ruqya into a profession, replacing study circles with treatment sessions, seeking help from jinn and interpreting dreams for diagnosis, violating religious ethics in treating the opposite gender, and physically harming patients by beating or restricting blood flow to the brain, which can cause fainting or convulsions and poses serious dangers.

Sixth: Proposals: Based on the above, the following are proposed:

1. Holding sociological forums to promote scientific understanding of mental illness on a regular basis in civil society institutions.
2. Introducing psychology courses at advanced stages of education, especially at the secondary level, focusing on psychological disorders.
3. Intensifying media programs to raise public awareness about mental illness, its interpretation, and how to deal with affected persons.
4. Increasing efforts by sociologists to clarify mental illnesses and correct misconceptions in society.

Conclusion:

Colloquial and incorrect social perceptions about mental illness still persist to this day in the minds of many members of Algerian society, despite the progress achieved by modern science in all fields, due to the mentality rooted in practices inherited from ancestors, especially in treating certain illnesses related to the individual's spiritual aspect. In order to get rid of the legacy of many years of incorrect concepts and beliefs about mental illness and its methods of treatment in Algerian society, the media and professionals in the field of mental health must play their role in

improving the distorted image of psychiatry and helping to convey correct information about mental illnesses and their treatments. We long for the day when visiting a psychological clinic becomes a normal and necessary health practice, and when we get rid of fear, shame, and negative stigma. The goal sought by social institutions is to raise the level of individuals' capacities so that they may live a better life and contribute to building society with their maximum potential. To achieve this goal, individuals in Algerian society must rid themselves of these concepts and build their convictions on solid scientific foundations rather than on superstitions, rumors, beliefs, popular imagination, and rituals that only lead to a worsening of their psychological condition.

Ethical Considerations. This study is theoretical and analytical in nature and does not involve direct interaction with human participants, clinical data, or personal medical records. Therefore, no ethical approval was required. Nevertheless, the research adheres to fundamental ethical principles of academic integrity, respect for cultural and religious beliefs, and responsible representation of sensitive social and psychological issues. All sources used in the study are properly cited, and the analysis avoids stigmatizing language or discriminatory interpretations of mental illness.

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