Mending ‘Moors’ in Mogador: *Hajj*, cholera and Spanish–Moroccan regeneration, 1890–99

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Introduction

In the summer of 1896, two very different groups of people crammed into the tiny 500 × 300 metres uninhabited islet located in front of the Moroccan port of Essaouira (Mogador for Europeans, see Figure 3.1). The first and most numerous group consisted of the 1,653 *hajjis* (Muslim pilgrims) debarked in notoriously insanitary conditions from the French steamer *Gergovia*, owned by the *Compagnie Fabre et Cie* of Marseille.¹ As the sultans of Morocco had allowed Mogador Island to be used as a lazarett o since 1866,² the pilgrims were quarantined in this site due to suspected cases of cholera. The second group was led by the Spanish army doctor Enrique Rebolledo, appointed director of the lazaretto by the Sanitary Council of Tangier, an international board to which the sultans had granted powers to fight the importation of epidemics since 1844. Rebolledo was accompanied by a team of eleven Spanish nurses and auxiliaries, plus seven Moroccan workers and eighty-seven Moroccan *askaris* (soldiers) for a total of 105 men³ – with the final addition of Ricardo Álvarez, the Council’s delegate in Mogador, who came and went between the islet and the coast with three Moroccan officials and eighteen sailors. In total, nearly 1,800 people occupied Mogador Island between 21 and 28 July 1896.⁴

This was not an isolated event. During the nineteenth and twentieth centuries, the saintly halo of *baraka* earned with the *Hajj* no longer prevented ever-increasing numbers of Muslim pilgrims from being
quarantined. The leading role of international health bodies and foreign doctors in this process has led to the belief that this was solely a consequence of European imperialism. Thus, Michael C. Low has argued that the real or perceived political and sanitary risks Europeans attached to the Hajj merged in a pathologising narrative of ‘twin infection’ by Pan-Islamism and epidemics which stood behind Europe’s mounting intervention in Islamic countries in that period. Actually, we think this narrative was also appropriated by local Islamic rulers whose modernisation plans could be equally hindered by either religious radicalism or incontrollable disease. Pilgrims were therefore suspected of importing...
ideas capable of triggering revolts not just against European imperialism, but also against the reforms promoted by those rulers (sultans, beys or khedives) and against their traditional religious authority. It was also believed that the disease they carried in their bodies would threaten not just Europe’s strong containment efforts, but also the more fragile measures promoted by Islamic governments to protect their population against the ravages of cholera or plague.

In this context, the sanitary discourses and practices towards the Mecca pilgrimage had certain remarkable specificities in Morocco. This was probably due to the Alawite sultanate’s peripheral status with regard to the Hajj and to European imperialism – as occurred in the case of Bosnia-Herzegovina, which Christian Promitzer analyses in Chapter 6 of this volume. Building on previous studies, we will study such specificities for the period of the 1890s. Though formally subject to multiple European interventions, the Moroccan Hajj became then mostly a Spanish-controlled affair, framed within a short-lived imperialist project of ‘regeneration’ by which Spain sought to acquire a hegemonic stand over the ‘civilising mission’ designs of their European rivals. We will also analyse how such regeneration required the social production and protection of ‘Moors’, imagined as a modernised, Hispanophile and healthy elite eager to support, and actually expected to participate, in Spanish–Moroccan reforms – including public health reforms. This singular example of what Alison Bashford has dubbed ‘imperial hygiene’ – European domination of African and Asian societies by means of sanitation and cleanliness – had in the tiny Mogador Island one of its main material and symbolic sites.

Regenerating Morocco into an ‘African Spain’

Experts on Moroccan history, including many Spanish historians, usually assimilate, implicitly or explicitly, the nature of Spain’s imperialism in Morocco into the one deployed by its more powerful competitors: Britain and France. The success of nineteenth-century British and especially twentieth-century French plans in the Maghreb therefore results in an image of Spanish initiatives oscillating between the ludicrous and the violent or, more often, in their being despised as largely non-existent or irrelevant – to such an extent that one might wonder how Spain ever managed to take hold of part of Morocco at all. In our opinion, historiography has generally failed to grasp a fundamental
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contradiction in Spanish–Moroccan contemporary relations. Spain was a main European imperialist power in nineteenth-century Morocco, seriously challenging France and Britain for hegemony in the years following the Spanish–Moroccan War of 1859–60 and in the decade preceding the loss of Cuba and the Philippines in 1898; yet, Spain could only deploy specific, unconventional models of imperialist intervention owing to its modest economic and military power, its ranking as a secondary actor in international politics as well as its secular historical and cultural ties with Morocco.

During the 1890s, the second and last occasion in which Spain was well positioned to gain control over the whole of Morocco, Spanish policy relied mostly on a ‘regeneration’ project instead of the dominant ‘civilisation’ scheme which Great Britain and France wished to deploy in the Alawite sultanate – and were already practising in large parts of Africa and Asia.9 The singularity of ‘regeneration’ as an imperialist model derived from its having been originally conceived for intervention in Spain itself. Since the 1870s, even earlier, regeneration had been put forward by some intellectual and political actors as an urgently required drive towards modernisation to end the country’s centuries-long ‘decay’.10 Such a drive required deep changes in the political regime, the state administration, the army, agriculture, industry, education and science. In the beginning, advocates of regeneration called for the expansion of existing colonies and the acquisition of new ones as a necessary complement for reforms at home. However, by the mid 1880s, renowned personalities such as Joaquín Costa (1846–1911) saw that an eventual success of regeneration in Spain would closely depend on the ability to deploy a similar intervention scheme over non-European societies, in particular over Spain’s southern neighbour. Costa argued in a famous rally held at the Alhambra theatre of Madrid in 1884 that Morocco was

a country in decay, as we decayed too, and which, as ourselves, can regenerate itself and restore the splendour of those two African Athens: Fez and Marrakech. [We should help Morocco to] regenerate itself so completely that [it becomes] a virile, independent, cultivated nation, naturally allied with Spain.11

Costa’s utopianism was bound to fail in real politics. However, the Liberal Party cabinet which rose to power in November 1885, with the regenerationist and ‘Africanist’ Segismundo Moret (1833–1913)
as Minister of Foreign Affairs, sought to put into practice some pragmatic and feasible measures that the Sociedad Española de Africanistas y Colonistas (Spanish Society of Africanists and Colonists, SSAC) had picked up from the speeches of Costa and several other speakers in the Alhambra rally. As with Costa, the SSAC sought to encourage ‘the regeneration of that country [Morocco] and its fraternal union with Spain,’ but its ultimate goal, according to President Francisco Coello (1822–98), was to make of

that rag of a nation a great people […] fraternally united with Spain through the ties of education, a common mentality and the harmony of interests, as it already is by the ties of tradition, climate and blood, in such a way that, without losing its own personality, it substantially reproduces the features of the Spanish nationality, becoming a sort of African Spain. 13

The creation of this ‘African Spain’ would not respect Morocco’s sovereignty as much as Costa’s proposals, but it would not imply a thorough dismantling of the Moroccan state, army, economy or education system either. Instead, it would build upon ongoing local reforms and modernisation projects of Sultan Hassan I (1873–94), who was decidedly following the steps of his predecessors on the Moroccan throne, as well as the pioneering example of the Ottoman Empire’s tanzimat and of Muhammad Ali’s reforms in Egypt. It is true that regeneration was to be led by an elite of Spanish experts (diplomats, army officers, physicians, engineers, teachers, entrepreneurs) occupying key power positions within the Moroccan state apparatus. Nonetheless, it also implied a commitment to the creation of local institutions to train an elite of modern experts who would play leading roles alongside Spaniards. In Costa’s words, Spain:

sought a foothold for reforms in Moroccan youth by training a generation of physicians, engineers, industrialists, army officers and jurists possessing all the tastes, the competences and the abilities of modern [European] culture. 14

Although actual Spanish initiatives would not produce ‘a generation’ of Moroccan modern experts as Costa, again, hyperbolically imagined, they trained a non-negligible number of them. The most important projects were based in Tangier, the real ‘centre of power’ of late nineteenth-century Morocco 15 and the dreamed capital of the future ‘African
Spain’ (all Europeans imagined Tangier as the capital of their own colonial Morocco). Largely forgotten today, several regenerationist projects were launched during the late 1880s and 1890s with the active collaboration of Moroccan authorities and elites. For example, a Cámara de Comercio (Chamber of Commerce), set up in 1888 for encouraging bilateral economic intercourse and composed of Spaniards and Moroccans – mostly Jews but some Muslims too. The army doctor Felipe Óvilo (1850–1909) (Figure 3.2), a member of the SSAC and close personal friend of Moret – who actually appointed him military attaché in Tangier in 1886 – was instrumental in its creation. During his ten-year term of office, Óvilo would intervene in many other projects. He founded and directed the Escuela de Medicina (medical school) in 1886, which turned into an official training centre for Moroccan army physicians four years later, with some fifteen to twenty students attending lectures until its closure in 1904. He also set up a Sociedad de Salvamento de Náufragos (Lifeboat Society) in 1888 for shipwreck rescue in the Gibraltar Strait and took steps to create a Moroccan ‘Red Cross’ in the late 1890s. He worked in the new Spanish Hospital (1888), built and managed by Franciscan friars, funded by the Ministry of Foreign Affairs and admitting European and Moroccan patients, and was co-founder and member of the Comisión de Higiene (Local Health Board) (1888) in which his colleague Severo Cenarro (1853–98), army doctor attached to the Spanish consulate, acted as permanent secretary.

Óvilo and Cenarro were involved in two other ambitious projects. One was a hybrid Academia Militar/Escuela de Artes y Oficios (Military Academy/Technical School) for training both Moroccan military officers and civil technicians, and the other was an Instituto de Enseñanza Secundaria (High School) for Spanish and Moroccan pupils. Both would be interrupted around 1890. Otherwise, the Franciscan Catholic Mission directed by José Lerchundi (1836–96) opened primary schools for girls and boys in the early 1880s, some of whose pupils and teachers were Moroccan. It also founded a ‘Hispano-Arabic’ printing house in 1880, constructed a working-class neighbourhood (San Francisco) in 1888, with adjacent factories employing residents, and built and managed both the old and new Spanish hospitals opened in 1881 and 1888 respectively. Lerchundi also set up an Escuela de Estudios Árabes (School of Arabic Studies) in nearby Tetouan in 1886 for the training of Spanish and Moroccan experts in Arabic language and culture.
Figure 3.2 Portrait of Felipe Óvilo in ‘Moorish’ dress in Marrakech, by Enrique Simonet, 1894.
Finally, private entrepreneurs also made significant contributions to regeneration plans. Thus, Emilio Rotondo installed Tangier’s first telephone network in 1887 (later, Larache’s and Rabat’s) operated by a staff comprising Moroccan Muslim and Jewish technicians, while Abelardo Sastre set up a large farm called El Mediar from where he annually exported hundreds of cattle heads to Gibraltar, Barcelona and Marseille and in which he employed Spanish and Moroccan workers.22

It should be pointed out that plans to turn Morocco into an ‘African Spain’ were not exclusively advanced by the progressive sectors in Spanish society. Conservative groups promoted an alternative understanding of that goal as well as alternative strategies for attaining it. Thus, Manuel Olivié, a lawyer and politician committed to overseas expansionism, argued that Spain should follow the nineteenth-century European trend of ‘creating large states composed of a plurality of nations sharing strong ethnic, geographical and historical features’.

Spain had ‘the duty of merging into a single [Spanish] state’ Morocco, Portugal and Gibraltar.24 With regard to the sultanate, ‘there is no other option but to assimilate Morocco to us, so that the sentiment of a shared homeland extends from the Pyrenees to the sands of the Sahara’.25 This would create a trans-Mediterranean polity occupying both sides of the Strait of Gibraltar, composed of a ‘European Spain and [an] African Spain harmoniously tied by social assimilation’.26 Olivié imagined this as a European-style state-building process rather than as an imperial enterprise – it would actually prevent the ‘real’ colonisation of Morocco by more powerful European countries. In his view,

Spain, by extending its laws to the Atlas, undertakes a venture analogous to those of Germany and Italy, by redeeming Moroccans from the tyranny and anarchy in which they live, and from European influences, which regard that territory as a business haven.27

Olivié’s projects, in contrast to regeneration, left little or no space for Moroccan agency in the creation of an ‘African Spain’. They were more in tune with projects such as the establishment of a ‘royal protectorate’ over the Saharan coast south of Cape Juby obtained by Spanish agents in 1885. Despite all this, Spanish late nineteenth-century imperialism in Morocco, either progressive or conservative, did not demand such disrupting transformations as British and French civilising schemes did.28 In this sense, although Khaled ben Shrir and other historians have
ascribed the ‘reforms’ experienced by Morocco to British policy – during the long term of office of the diplomat John Drummond-Hay (1845–86) – the main difference between British and Spanish reforms lay in the agency the latter allowed to local elites. The ‘civilising mission’ implied a systematic subalternisation of Moroccans in dependent roles under the lead of foreign experts monopolising knowledge and power. Spanish regeneration schemes, by contrast, committed themselves to train Moroccan experts and create modern local institutions, two things the British never attempted to do in Morocco, not even in nearby Gibraltar where dozens of Moroccans received only basic military or medical training. In addition, from the late 1880s, Britain openly despised reforms, its Moroccan policy consisting in lobbying the sultan and the higher government officials by way of influential agents, such as Sir Harry Maclean, in order to advance British economic and diplomatic interests.

The Mogador Island lazaretto and Spanish–Moroccan sanitary borders

Public health reform was one important goal of Spanish regeneration in Morocco. Despite what many historians continue to argue, the country did not completely lack a modern sanitary administration. Following general developments in the Arab-Islamic Mediterranean, especially in the Ottoman Empire and Egypt, an embryonic quarantine system had been put in operation during the nineteenth century as a combined outcome of local reforms and international pressure. At the top of it stood the International Sanitary Council of Morocco (also known as the Sanitary Council of Tangier due to its being located in this town), to which Sultan Abderrahman ibn Hicham granted powers in 1840 to ensure ‘the maintenance of public health over the empire’s seaboard, to draft all regulations and take all measures to carry out this task.’ The Council had been preceded by a board called Junta de Cónsules, set up in 1792 – as Malika Ezzahidi points out in Chapter 4 – and it was composed of the diplomatic representatives of Britain, France, Prussia (later Germany), Spain, Piedmont-Sardinia (later Italy), Belgium, Portugal, Russia, Austria-Hungary, Sweden and the United States, who occupied its presidency in turns, and was a consultative body entitled to propose to the sultan (by way of his representative in
Tangier, the *naïb*) measures against the importation and diffusion of 'exotic' epidemic diseases, originally cholera and, by the end of the nineteenth century, bubonic plague too. Council delegations were soon established in the ports open to international commerce (Tetouan, Larache, Rabat, Casablanca, Mazagan, Safi, Mogador) and doctors of several European nationalities began to act as *medicos de sanidad* or *consultores médicos* (medical advisors) of the Council and its delegations. From the end of the Spanish–Moroccan War until 1899 the head position in Tangier was monopolised by Spanish physicians, among whom were Óvilo (1877–78) and Cenarro (1884–97).

Certainly, this quarantine administration was insufficiently 'medicalised'. For example, the Council was not obliged to follow the technical advice of its medical advisors because only diplomats were official members. It was only natural that, as Óvilo explained in *De l’influence des pèlerinages marocains à la Mecque sur la propagation du choléra* (1882), ‘in most occasions, the Council debates and takes decisions without the participation of its medical adviser.’ 34 In the same vein, the sultan could always ignore the Council’s suggestions for he had never turned over the executive authority on sanitary matters to foreign diplomats. Thus, in 1878, after Óvilo’s proposed measures for preventing the diffusion of cholera from the interior of the country to the main ports (the ban on that year’s pilgrimage to Mecca and the establishment of inland sanitary cordons and field lazarettos around the main ports) had been accepted by the Council and Hassan I, the sultan who backed the measures taken by the Sanitary Council, had deployed troops to execute them and had created a new tax ‘for lazarettos’, to provide funds for sanitary cordons, revoked these salutary measures through a *dahir* [decree] by the end of September and […]. the whole edifice built with countless efforts crumbled in a single day.35

The weak medicalisation of Moroccan quarantines was also due to the lack of proper facilities and equipment. The only lazarettos existing in the country, Mogador Island, was inappropriate for the task. Sultan Mohammed IV had agreed to the site being used to confine suspect Mecca pilgrims in 1866 after projects and demands for sanitary use dating back at least to 1821. 37 Mohammed El-Bezzaz has explained how the serious threat posed by the fourth cholera pandemic, combined with Spanish pressure following the third ISC in Constantinople in
1866, led the sultan to allow quarantines in Mogador Island through a dahir issued on 18 November of that year. However, the site had neither a disinfection stove, nor a barrack for the diseased, nor a pavilion where the healthy pilgrims might be lodged. According to Óvilo, pilgrims just spent ‘from three to ten days on the [island’s] reefs, after which they move to the mainland.’ There was no quay where ships could safely moor and unload their passengers and baggage regardless of weather conditions. The proximity to the coast and the city (less than a mile off) added to the risk of people escaping and spreading diseases inland. Last but not least, as the Irish doctor Arthur Leared pointed out, ships normally bound for Tangier were compelled [...] to proceed to this place [Mogador Island], nearly four hundred miles further. This, and justly, has been considered a great grievance, though it is one which at present admits no remedy.

To avoid this, ships that had been put under quarantine of observation in Tangier often escaped from the bay, rounded Cape Spartel and disembarked their passengers on various spots of the Atlantic coast. It was only from 1890, when Spanish regeneration plans promoted the modernisation of the Moroccan sanitary administration, that the lazarett was equipped and put to regular use. In September of that year, the French steamer Gallia arrived at Tangier with 700 pilgrims and a foul bill of health. The Council’s delegate visited the ship several times and noted the bad conditions on board, with hunger-stricken passengers crammed on deck. Cenarro and the British and French ministers in Tangier also approached the Gallia, and after dramatic scenes of panic and violence triggered by the distribution of ‘an insufficient quantity of bread and a few olives’ it was decided that the steamer should undergo a six-day quarantine at Mogador Island. Cenarro appointed the Spanish doctor Gustavo Prieto, a regular visitor to Moroccan port towns from nearby Cádiz, as the lazarett’s director. Four gardiens sanitaires accompanied him, later joined by twenty-five soldiers sent by Mogador’s qaid (military governor). A translator could have been used too, on this and on subsequent occasions – Hamed Romani, a physician trained by Óvilo in Tangier, who had taken care of Moroccan pilgrims travelling to Mecca in the previous year’s Hajj. Prieto was charged with the task of quarantining the pilgrims and disinfecting their luggage, for which purpose he took with him ‘a well-supplied medicine chest
and appropriate disinfectants. He was given a hard time. Military protection did not stop the pilgrims from revolting against disinfection procedures and threatening to attack him or swim to the coast. Things finally calmed down and no cholera outbreak occurred.

The quarantine procedure was continued and developed in the following years. Cenarro commissioned Prieto again in late August 1891 to deal with the pilgrims of the French steamer Sahel, arriving from Alexandria, who were suspected of cholera despite ‘having undergone the quarantine and disinfection imposed on the arrivals from Arabia at the El Tor lazarett’. Again, no case of cholera was declared at Mogador Island. The following year the pilgrims posed no epidemic risk, but all alarms went off in 1893 after the ‘greatest outbreak [of cholera] ever at Mecca since 1865’. This time, Cenarro managed to get permission from the Council so that Prieto and another Spanish doctor, Sotero García de Mayoral, with gardiens sanitaires and disinfectants, were sent one month in advance of the expected arrival of pilgrims to organise the lazarett and prepare the city of Mogador itself. By the end of August, the French ships Gallia and Lutetia and the British Afghan disembarked 1,550 pilgrims. Despite preparations, cholera broke out, causing eight deaths among the thirty-five declared cases. This emergency obliged Cenarro to travel personally to the island, accompanied by two other Spanish physicians, Dr Jiménez and José Prieto (Gustavo’s brother), plus eight Spanish medical auxiliaries. The total Spanish and Moroccan staff reached 211 people, of which at least 100 were soldiers. When quarantine was over, the British Vice-Consul in Mogador, Robert Lyon Nelson Johnston, criticised the shortcomings of the lazarett in a report addressed to the British minister in Tangier. He believed the island had received too many people, was too close to the shore and proved too difficult to supply with water and food. Besides, Moroccan soldiers were reluctant to protect the medical personnel, threatened by pilgrims ‘with violence if they persisted in the treatment of the sick, fumigation of clothes, etc.’

The year 1894 went by with no risk of cholera, but in 1895, following another serious outbreak in Mecca that ‘reproduced in a smaller scale’ the one that had occurred two years before, the Sanitary Council appointed the Spanish army doctor Enrique Rebolledo as director of the lazarett and sent him there in March to start preparations. He was expected to remain on Mogador Island until December of the
same year. But when the French ship *Maurice et Réunion* asked for permission to disembark 750 pilgrims in Tangier in late August, the Council surprisingly conceded after pressure from French authorities, who insisted that all passengers were in good health after having been inspected in Algier’s Matifou lazaretto. Cholera broke out in Tangier, causing over 400 deaths, and subsequently spread to Tetouan, Fez and other cities. In early October, Cenarro presented a report on the epidemic to the Council in which he suggested that cholera had been imported by the *Maurice et Réunion* and demanded the establishment of a permanent lazaretto at Mogador Island as the best way to protect the country against the disease. In this way, Spain was trying to institutionalise the measures deployed in previous years, which had hitherto received no official sanction, neither by the sultan, nor by the Council. France opposed Spanish plans. The French minister denied the importation of the disease by the French ship based on reports drafted by Dr Spivakoff, director of the French Hospital in Tangier, and Dr Henri Soulié, director of the recently founded Pasteur Institute of Algiers, who had been sent on an official mission to Morocco to study the epidemic.

The British also showed little enthusiasm for Mogador Island. However, the head of British diplomacy in Morocco, Sir Arthur Nicolson, visited the island in March 1896 accompanied by the Gibraltar-based Surgeon-Major MacPherson, to check the site’s conditions before the new pilgrimage season. The latter’s report showed a significant improvement of facilities on the island over the previous years. A house had been built for the doctor and auxiliaries. The six artillery batteries on the island’s perimeter had been repaired and equipped with underground water tanks for collecting rainwater. A baking oven had been set up in one of them. Three bigger water tanks had been additionally built in the centre of the island, while in its northwest corner an area had been allotted to serve as cemetery. As a result, and despite claiming for further works, MacPherson judged the island ‘not unsuited for the purposes of a lazaretto’ and capable of containing up to 3,000 people for two months. This favourable opinion would be confirmed when the lazaretto was used later that year, as shown in this chapter’s introduction. Dr Rebolledo was sent again well in advance. A hundred conical tents for lodging healthy pilgrims were mounted, probably following a suggestion in MacPherson’s report. Infectious patients (with smallpox
or dysentery, for no cases of cholera appeared) were treated in separate tents and assisted by separate staff. Pilgrims’ clothes and luggage were disinfected with ‘sulfuric vapours’ in a stove installed in one of the batteries. After five days with no cases of cholera, quarantine was declared over, the finest operation in the thirty years of existence of Mogador Island’s lazaretto. On the basis of Rebolledo’s experience, a Projet de règlement général pour le service de quarantaine dans l’île de Mogador was drafted, though it would never come into force (Figure 3.3).

The weakening of Spain’s position in Morocco after the onset of the last war for Cuban independence in February 1895 probably stood behind this failure – and behind the surprising decision of the Council that triggered the Tangier epidemic. Debility would bring more troubles for Spanish plans. In March of 1897, Sultan Abdelaziz (1894–1908) – actually Regent Ba Ahmed (the sultan was still a minor) – forbade the pilgrimage to Mecca due to the heightened risk of importing plague, which had broken out in Hong Kong in 1894 and was spreading rapidly towards Europe after striking British India and Mecca. Such a radical measure had been attempted in Morocco only once since the times of Moulay Slimane (1792–1822) – by Óvilo in 1878, as we said before – because of the potential damage European interference in religious matters was likely to cause to the sultan’s prestige. This initiative was inconsistent with the strategy Spain had followed during the decade, and it is likely that it was promoted by France, which, according to Valeska Huber, ‘often resorted to the complete prohibition of the pilgrimage’ in its imperial possessions. But Ba Ahmed sought to counterbalance the negative political effects of his unwilling decision by building a permanent state prison in Mogador Island. Given that the ban on pilgrimage did not prevent a number of Moroccan hajjis from travelling to Mecca, the Council, after sending a medical advisor to the island, asked the regent to remove the prison so that the site was fully available in case of emergency. Ba Ahmed opposed this and frictions escalated with the Council’s refusal to admit in Moroccan ports (save for Tangier) any ship carrying pilgrims who could not prove fulfilment of certain strict formalities. The measure was kept in force until 1900, though it was impossible in practice to force navigation companies to comply with it.

These problems anticipated the abrupt end of Spanish plans for the Mogador Island lazaretto. The ban on the pilgrimage was lifted in early
PROJET DE RÈGLEMENT GÉNÉRAL
POUR LE SERVICE DE QUARANTAINÉE
DANS L’ÎLE DE MOGADOR.

I.
Le personnel de la station de quarantaine dans l’île de Mogador est composé de
1. un médecin en chef, délégué extraordinaire du Conseil Sanitaire, directeur
   de la station de quarantaine.
2. Deux médecins dont
   (a) un dirigeant de sanaret d’observation et
   (b) l’autre de sanaret d’infection.
3. Un aide pharmacien.
4. Un infirmier en chef.
5. 16 infirmiers.
7. Un secrétaire automatique ou médecin en chef.

II.
(a) Le médecin en chef est le représentant direct du Conseil Sanitaire vis-à-
    vis des autorités marocaines et de tous les habitants de l’île et est également le
    chef suprême de la dite île.

Il est de son devoir de s’informer continuellement et consciencieusement de
tout ce qui se passe sur l’île, de diriger l’administration sanitaire de la station
de quarantaine et de pouvoir à tout moment nécessaire pour assurer non
seulement la santé de tous ceux qui sont internés mais encore le fonctionnement
régulier et correct du service établi. A cet effet il est chargé d’organiser ce
service en indiquant à chacun les attributions de ses fonctions. C’est lui, qui,
le cas échéant, ordonnera la mise en service du sanaret d’infection et désignera
le médecin qui devra le diriger.

De même il ordonnera la dissolution de cet établissement. Il visitera
c chaque jour et, en cas de maladie, plusieurs fois par jour toutes les habitations
et autres locaux de la station pour s’assurer de l’état de santé et de l’ordre
qui y règne.

Chaque matin il réunira les médecins placés sous ses ordres ainsi que tous
les gradés du personnel pour entendre leurs rapports relatifs à tout ce qui
couche au service de chacun et leurs observations des dernières 24 heures.
C’est à lui de se prononcer sur les différends qui pourraient surgir entre
les habitants de l’île quels qu’ils soient. A cet effet il recevra, après avoir
entendu les rapports mentionnés, tous ceux qui auraient à lui soumettre une
requête ou une plainte et qui devront lui être présentés par leurs supérieurs.

Le médecin en chef est responsable vis-à-vis du Conseil Sanitaire de tout
ce qui se passe sur l’île, en conséquence de quoi il est autorisé à donner
toutes les ordres qui lui paraîtront nécessaires. Il adressera régulièrement des
rapports hebdomadaires au Président du Conseil Sanitaire et si la peste
edéclarée dans l’île il devra diéter chaque jour et, s’il le trouve opportun,
plusieurs fois par jour son rapport par le téléphone au Délégué Sanitaire
de Mogador, qui le transmettra au Président du Conseil Sanitaire.

Pour faciliter la rédaction de ces rapports et assurer leur exactitude, il
tiendra un journal "formulaire A" basé sur les rapports journalistes des

Figure 3.3 Projet de règlement général pour le service de quarantaine dans l’île
de Mogador, 1896.
1898 as the risk of importing plague was low, but the new prison continued to deprive the Council of its only quarantine facility. The French negotiated on their own with the Moroccan Government so that the northern half of the island was used again for sanitary purposes. Dr François was positive about this possibility after visiting the site in March and drew a map of the eventual partition (Figure 3.4). However, after some give and take, Moroccan authorities decided on a further reduction of the space for an eventual quarantine. The Council’s new medical advisor, the Spanish army doctor Joaquin Cortés, who had replaced Cenarro after his sudden death in January, travelled to Mogador Island in late 1898 to evaluate the new project, which he rejected. In parallel, Ba Ahmed had proposed three alternative sites for a lazaretto: the island of Perejil/Turah, in the vicinity of Ceuta; the ruins of old Tangier (Tanjah el-Bali), in a secluded spot of the bay; and the village of Fedala-Mohammedia, close to Casablanca. The Council judged none of them as suitable.

At the end of 1898, bubonic plague struck Mecca again and, thus, threatened once more to reach Europe and North Africa. In February 1899, alarmed European diplomats in Tangier considered forcing Ba Ahmed to impose a new ban on the *Hajj*, but finally let go of the idea as most pilgrims had already left for Mecca. They insisted, however, on the closure of the prison and, as Moroccan authorities refused, they even envisaged an eventual military occupation of Mogador Island. Things would not go that far and finally, in June, Ba Ahmed agreed to shut down the prison and, in principle, to allow the building of a permanent lazaretto. There was not much time left to have everything ready before the return of pilgrims, but the Council acted swiftly. Cortés, who had drawn for his own personal use a sketch of the ‘whole facility’, arrived at the island on 4 August to supervise the works, which included the installation of twenty ‘wooden sheds’ fabricated in Tangier fit for lodging fifty pilgrims each. He appointed the Spanish Navy doctor Alfonso Cerdeira as the lazaretto’s director. Nearly 44,000 francs of a projected 100,000 budget would be spent between July and September on the salaries of three physicians and dozens of auxiliaries and workers, plus the purchase and transport of a disinfecting oven.

A first group of 419 pilgrims disembarked on 9 August from the Turkish steamer *Abdelkader* and endured quarantine with no cases
Figure 3.4 Plan of Mogador Island with the quarantine organisation proposed by Dr François, 9 March 1898.
of plague.85 Before the expected new arrivals, works continued to fix various problems: the disinfecting oven had not been used for lack of a specific room; only a few sheds had been built. However, on 15 August, the qaid of Mogador ordered Moroccan workers to stop all activity and, on the 27th, his soldiers tore down the twelve wooden sheds already put up and forced Cortés to leave the island.86 Although the French minister in Tangier condemned the ‘arbitrariness’ of Moroccan measures, the French consul in Mogador had complained about Cortés acting unilaterally and not providing information on the quarantine.87 The French rose to the occasion and proposed that Cortés be ‘removed’ from all quarantine tasks;88 he would be the last Spanish doctor to act as the Council’s medical advisor. Ba Ahmed ordered that henceforth the directors of the lazarettos were to be physicians ‘non-resident’ in Morocco.89 In practice, this opened the door for French doctors to replace Spaniards. Lucien Raynaud (1866–1931) of Algiers would be appointed in 1900 and consolidated France’s increasing control of the Moroccan sanitary administration. Although Moroccan officials usually accompanied him – at least on one occasion by an army doctor trained by Óvilo in Tangier and on another one by Zubeir Skirej, a military engineer trained in England – he rejected or ignored them.90 In his influential book *Étude sur l’hygiène et la médecine au Maroc* (1900), Raynaud ignored as well the quarantines organised by Spanish doctors during the 1890s, which he downplayed by affirming that after 1865 Mogador Island ‘has hardly been used a dozen times’.91 He did not mention the name of any of the doctors who had preceded him in the post.

The events of 1899 became the last and most serious attempt at building a permanent lazarettos on Mogador Island. For ten years, Spanish regeneration initiatives managed to put the site to regular sanitary use, appoint medical directors and auxiliary staff as well as construct facilities and install technical equipment. In general, Spain had significantly advanced its project of setting up a modern quarantine administration in Morocco, centralised in Tangier, with autonomous executive power based on medical personnel and sanitary facilities which intended to reach a good part of the country’s maritime borders. All this effort should be understood, in any case, as part of the imperialist project of Spanish–Moroccan regeneration, whose ultimate goal would have been the articulation between the quarantine administrations of
'African Spain' and those of 'peninsular Spain', whose organisation was being accomplished in parallel. As Quim Bonastra shows in Chapter 1, an 1886 Royal Order creating the Cuerpo de Sanidad Maritima and another one in 1887 that fixed its Reglamento (regulations), culminated the process set off by Spain's 1855 Health Law. These regulations gave official status to the three foul lazarettos which were operating in practice on Spain's extensive seaboard: Mahón, in the Mediterranean Sea; San Simón, in the Atlantic Ocean; and Pedrosa, in the Cantabrian Sea.92

If lazarettos acted as maritime border-markers for states (as Daniel Panzac has argued sanitary cordons did for land borders),93 these particular ones fixed the contour of Spanish national sanitary frontiers. It was, however, easy to see that the southern frontier was exposed, a serious and persistent problem owing to the presence of the British enclave of Gibraltar. Although Gibraltar applied stringent quarantines, as John Chircop explains in Chapter 8, they were not coordinated with Spain's; above all, Gibraltar prevented the establishment of a foul lazaretto in Algeciras that would have undoubtedly hindered the Rock's sanitary independence and commercial activity. The second sanitary border problem, of a rather different nature, concerned the Canary Islands, an archipelago located almost 1,000 km southwest of Spain, facing the Saharan coast beyond the Moroccan port town of Agadir. Canarian authorities had been demanding the construction of a foul lazaretto since at least 1811, when the archipelago had been struck by a massive yellow fever epidemic.94 Subsequent epidemics (the yellow fever outbreaks of 1838, 1846–47 and 1862–63 and the cholera outbreak of 1851) showed, as I have argued elsewhere, that the Canary Islands were more linked from a sanitary and epidemiological point of view to Cuba than to Spain in that period.95 This odd fact was nevertheless consistent with the singular relationship established between Spain and Cuba during the middle decades of the century, an intimate and weakly hierarchical link between an 'overseas Spain' and 'peninsular Spain' which served as a model for the late nineteenth-century 'African Spain' project. It was only when that particular relationship began to change, after the Ten Years' War (1868–78), that the Canary Islands moved towards reintegration within Spain's sanitary borders. A Royal Order of 10 February 1882 approved the creation of a fourth national foul lazaretto in Gando (Gran Canaria).
However, I argue/suggest that Spanish regenerationist plans for Mogador Island competed with Gando’s project in subsequent years and became a decisive factor behind the latter’s constant delays and ultimate lack of use. Gando’s works did not start until 1887, the buildings were not finished until 1893, the equipment did not arrive until 1899, and the quay and road needed for the access of passengers and goods were never built. As a result, when new Sanidad Exterior regulations were passed in 1899 and 1903, which substituted lazarettos for estaciones sanitarias following the new doctrinal orientations prevailing at the eleventh ISC held in Paris, Gando had not yet been used. It would be just once in 1906, with unsatisfactory results, before being abandoned in 1911 in favour of the newly built estación sanitaria of the port of Las Palmas. In our opinion, Gando and Mogador were mutually exclusive because they reflected the incompatible conservative and progressive approaches to the ‘African Spain’ project. Mogador’s success would have made the archipelago dependent on Morocco in sanitary and epidemiological terms; Gando’s supremacy would have turned the Canary Islands into an all-powerful and largely autonomous sanitary department with prerogatives over Morocco’s Atlantic coast (including the Saharan protectorate). The options could not be more disparate for Canarian interests. Both of them implied, however, a close articulation of Spanish and Moroccan maritime sanitary frontiers that would have reduced the exposure of both territories to imported epidemic threats (Figure 3.5).

Constructing an elite of ‘Moors’

Regenerationist projects in Morocco rested on a specific discourse about the local society and its inhabitants. To assimilate such a discourse automatically to the orientalist narratives produced by other European countries in that period would again be misleading. Edward Said affirmed in his ground-breaking book of the same title that ‘orientalism’ was ‘a Western style for dominating, restructuring and having authority over the Orient’. As such, it constructed a dualistic, irreducible opposition between the West and the East, which from the eighteenth century onward framed the former’s humanistic, artistic and scientific views to help deploy and perpetuate its dominance over the latter. The origin and rise of orientalism were intimately associated with
the second wave of colonial expansion that placed most of Africa and Asia under European rule. However, researchers have pointed out the existence of ‘multiple orientalisms’ (for example, the various national traditions in Europe) and the subsequent need for ‘situating’ them in ‘time and space’. Frederick Cooper has argued similarly for colonialism not to be taken as a universal, immutable reality, but as one intrinsically contextual and performative. In his opinion,

The weighty -ity in such widely used words as coloniality or postcoloniality implies that there is an essence of being colonized independent of what anybody did in a colony [...] Colonizer and colonized are themselves far from immutable constructs and such categories had to be reproduced by specific actions.
Following Cooper, I suggest colonialism and orientalism showed significant variations according to the specific characteristics of each dominant power and each dominated society in a given historical period. Contemporary Spain was an example of such variability. Certain authors have already pointed out that Spanish nineteenth-century orientalism possessed distinctive features when compared to its European counterparts. On the one hand, it was almost exclusively ‘Arabist’, with very minor production on the Ottoman Empire or the Far East – despite the proximity of the Spanish Philippines to China and Japan. On the other hand, such ‘Arabism’ paid less attention to contemporary societies over which Spain sought to impose colonial domination, than to the ‘domestic Orient’ or ‘Spanish Orient’ of Al-Andalus established on the Iberian Peninsula from the eighth century to the expulsion of the moriscos in 1609–14. These specific features of Spanish orientalism were actually inseparable from those of Spanish colonialism. During the nineteenth century, Spain’s expansionist expectations became essentially confined to Morocco, a neighbouring Arab country on whose northern coast Spain possessed several outposts and whose history, far from being exotic, was closely intertwined with that of Spain for many centuries. It was, thus, a ‘domestic imperialism’, deprived of most of the geographic and cultural displacement associated with colonial expansion.

An effect of all this was that modern Spanish discourses conceptualised Moroccan identity in a fairly balanced way when compared with other European countries’ production on various Arab/Oriental societies. Without ignoring the elaboration of stereotyped negative images during the nineteenth and twentieth centuries, I argue there was a radical impossibility for modern Spaniards to define Moroccans as ‘others’. This alterisation deficit, that is, the systematic recognition of the Spanish ‘us’ in the Moroccan ‘them’ (and vice-versa) would have been an outcome of ‘domestic’ orientalism and imperialism. The proximity or confusion of identities was formulated in different ways over the course of the century. Regenerationism produced its own version, in which the polysemic category of ‘Moors’ was given a central role by redefining it in a very specific way. It is possible to analyse this in the works of Felipe Óvilo, despite the fact that his views on Moroccans changed significantly over time. In his early essays, Óvilo subscribed to ideas of older authors, especially the Basque traveller José María de Murga, who followed French discourses on Algeria when he identified five ‘races’ in
Moroccan society: Arabs, Berbers, Moors, Blacks and Jews.\textsuperscript{105} However, while the French judged the dichotomy Arab–Berber as the defining feature of Algerian society, Murga highlighted the central role of the ‘Moors’ in Morocco. Following that trail, Óvilo considered the ‘Moors’ were ‘the most educated, rich and powerful part of the Maghreb [...] all positions that entail honours and riches are occupied, in most cases, by these Moors, who exploit the members of other races only to be exploited themselves by the Sultan.’\textsuperscript{106} They were descendants of ‘Mauritanians [Berbers], mixed with Phoenicians, Syrians, Greek-Romans, Vandals, Arabs, Spaniards and Blacks’ and their number had risen, especially in coastal cities, after the successive expulsions from Spain of Grenadines and moriscos.\textsuperscript{107} Many ‘Moors’ had their origins in ‘not few of our ancestors’, and among those residing in towns ‘the European type is so abundant and it is possible to see men so similar to those of our southern provinces that there is no doubt about it.’\textsuperscript{108} If Óvilo blamed the Moors for having ‘all the vices and the slyness’ of the razas mezcladas (mixed races), judging them a ‘race meant to disappear soon by consumption’,\textsuperscript{109} he affirmed nevertheless that only ‘a tenth of their faults has its origin in their natural condition; the other nine parts owe to the pernicious organization and absurd regime which oppresses them.’\textsuperscript{110}

It is evident that the centrality ascribed to the ‘Moors’ in Morocco by Murga and Óvilo was due to their perceived historical, cultural and racial links with Spain, to a Hispano-centric interpretation. However, while the former author actually considered Spanish ‘renegades’ that still existed in Morocco the ideal foothold for Spanish imperialist interventions, the latter assigned that role to ‘Moors’. The key for Óvilo was their ‘mixed’ racial stock, which gave them a sort of proto-national potential for articulating a ‘Moroccan’ identity and nationality. Beyond the atomisation that characterised Murga’s vision, ‘Moors’ were for Óvilo not just a race among others, but a ‘Moroccan’ elite that ruled the country. The study of that elite corresponded, thus, more to political analysis than to anthropology; Óvilo identified two groups of asymmetrical size bound together by opposite ideological affinities. Along a larger conservative section, he found that although very weak, there exists a group in Morocco which is not so reluctant to advances and progress as most of the powerful people of that country; this fraction, tied together by its friendship with and sympathy
for the Great Vizir [Muhammad bin al-Arbi al-Jami’i], comprises Muhammad Dukali, Abdulkarim Brisha and their friends.\textsuperscript{111}

In later works, published during his second stay in Tangier, Óvilo, while still making use of Murga’s racial categories, stopped using them as analytical tools. His political inquiries focused now especially on the ‘progressive’ sector of the ‘Moorish’ elite, which had expanded in size and power and from which he chose his most important associates. To the individuals mentioned before, he now added detailed descriptions of two other members of the al-Jami’i family, the brothers Hadj al-Maati and Muhammad al-Saghir, who occupied various higher positions at the court and the government; of Si Faddul Gharnit, Minister of Foreign Affairs in various periods (Figure 3.6); of Sidi Muhammad Torres, \textit{naib} in Tangier from 1885 to 1906; and of some high-level government and army officials (Ahmad al-Sueiri, al-Kerdudi, Muhammad al-Seffar, al-Belghuti).\textsuperscript{112} The progressive group was still a minority and his influence restricted, but Óvilo believed its advance reflected the fact that Sultan Hassan I had started a ‘regeneration drive’ by designating

\begin{figure}
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\includegraphics[width=\textwidth]{figure36.png}
\caption{Portraits of ‘Moors’ Si Faddul Gharnit and Muhammad al-Seffar, by Enrique Simonet, 1894.}
\end{figure}
administration officials ‘after personal merit instead of intrigue, hitherto sovereign in the Maghreb’. If progressive ‘Moors’ were to be co-opted for constructing the Spanish–Moroccan elite that would lead the process of regeneration, a discourse was required that emphasised the social, historical and cultural similarities on both sides of the Strait of Gibraltar. Thus, Óvilo began by defining the present state of Morocco as one of ‘profound decay’, in line with the regenerationist diagnostic of Spanish society. Such a situation would have had its ultimate origin in the loss of the heritage transferred to Morocco from ‘that feared and blooming Muslim state which passed over in Granada; [of] that Hispano-Arabic people who wrote such brilliant pages of our glorious history’. The ‘wreckage’ and ‘eclipse’ of that heritage, within which the ‘sciences and the remains of Hispano-Arabic art’ had occupied an outstanding place, would have been aggravated by the decision of Spanish authorities to destroy and burn ‘thousands’ of books and documents rather than ‘allowing their owners to take them’ to North Africa. For Óvilo, this conduct that pleased ‘the fanatics who applauded that action’, had had negative consequences for Spain too. In sum, Óvilo regarded Granada as a ‘Hispano-Arabic’ polity marking a zenith in the history of Spain and Morocco, its fall being detrimental for both countries, an inaugural sign of their longlasting parallel decline.

The project of regeneration promised to put an end to the above-mentioned decline by acting on both shores of the Strait of Gibraltar. Thus, it did not intend to construct a strongly subordinated Moroccan ‘other’. Instead, a weak process of alterisation would distinguish those Spaniards and Moroccans joining hands for modernising reforms from those opposing them. The regenerationist ‘us’ would have included Moroccans and the immobilist ‘them’, Spaniards. (Actually, ‘Moors’ were not the only Moroccan group reserved an active role in those regeneration plans. An elite of Jews would have played an even more important role, based on equivalent narratives of ‘Hispano-Sephardism’. We cannot develop this point further here as it is not directly relevant to the main topic of this chapter.) Modern, hispanophile, progressive ‘Moors’ would have been socially produced and reproduced through various initiatives of higher education and instruction, either civil or military; through foreign policy and commerce; through books and paintings. The competition of other European powers for hegemony in
Morocco and local opposition to the sultan’s reforms endangered this process, including those threats pertaining to the field of public health.

Mending ‘Moors’ on Mogador Island

The pilgrimage to Mecca was one of the main political and sanitary threats to ‘Moors’ and regeneration. There were several reasons for this, which require a previous account of developments in the Moroccan Hajj before the 1890s. In that period, substantial transformations occurred in line with general developments in the Islamic world. The number of Moroccan pilgrims making the cherished once-in-a-lifetime visit to the Holy Sites showed a rising tendency, though with cyclical ups and downs. By the early 1880s, the yearly figures had reached 5,000/6,000 pilgrims, with ships usually carrying from 1,000 to 1,500 each.117 The trip to Mecca had changed from the traditional caravan route across North Africa to the Egyptian Red Sea coast into a much faster journey by vessel first and steamship later, from Tangier to Alexandria, where the trip continued by caravan or ship. When the Suez Canal was opened, the direct journey from Morocco to the Hejaz ports became possible. British and French lines carried most pilgrims, too often in very unsanitary conditions due to overcrowding and a lack of medical staff on board.118 Nonetheless, competition between shipping lines also made the journey more affordable and led to social diversification among pilgrims.119 Finally, as already argued, European pressure on the sultans led to unprecedented bans on the pilgrimage when the risk of importing an epidemic from Mecca was too high, as occurred in 1897.

These changes increased the potential impact of the Hajj on Morocco. From a political point of view, pilgrims were exposed to European modernity, either in the ships that carried them to Mecca or during stops in French Algeria or British Egypt that put them in contact with Islamic societies transformed by European colonialism. Moroccan pilgrims were also exposed to ideologies of Islamic cultural and intellectual revival (nahda), Muslim religious reform (salafism, wahhabism), and national and transnational (Pan-Islamist, Pan-Arabist) patriotism, all of which encouraged self-esteem and a rejection of European domination over Islamic countries.120 As Óvilo pointed out in 1881, ‘a religious precept the sultans are unable to forbid, the pilgrimage to Mecca, pulls to pieces the precautions aimed at preventing the infiltration of
certain ideas in the brains of Moroccans, who [...] do not lack common sense and compare their condition with other peoples and make reflections which surely do not enhance the prestige of their own political organization.\textsuperscript{121} For example, Hassan bin Muhammad al-Rassal, the son of a Tangier’s amin (custom inspector), who did the pilgrimage in 1897–98, praised in his travel diary the ‘magnificent outlook’ of Algiers and its ‘huge stores filled with rich merchandises’; Malta’s ‘remarkably well built and carefully looked after’ vegetable market and the ‘superb’ governor’s palace equipped with ‘state of the art cannons’; and the ‘great development’ of commerce in British-controlled Cairo, where ‘streets are quite large and well-kept as they are in Europe.’\textsuperscript{122} At the same time, Moroccan learned men were also bringing back home from their trip to Mecca ‘the teachings of the famous Egyptian scholar Muhammad Abduh and his disciple Rachid Rida,’\textsuperscript{123} the fathers of Salafism. The renowned Abdallah ibn Idris al-Sanussi would be forced into exile during Hassan I’s reign for his fervent defence of that doctrine.

From a sanitary point of view, the pilgrimage’s effects intensified too. The growing speed of maritime communications implied now the risk of a direct and much faster importation of cholera from Mecca. The fourth pandemic that spread to Europe for the first time by sea from Alexandria in 1865 – and put the \textit{Hajj} at the centre of discussions in the International Sanitary Conferences for the rest of the century, as Peter Baldwin has shown\textsuperscript{124} – had already exposed Moroccan vulnerability by posing major threats in 1865 and 1866 (as said before) that brought about European intervention in public health, especially through the authorisation of quarantines on Mogador Island.\textsuperscript{125} In 1878 and 1895, cholera brought directly from the Hejaz by \textit{hajjis} struck the country, in marked contrast to the epidemics of the first two thirds of the nineteenth century, which had all been introduced by land from Algeria except the one that took place during the Spanish–Moroccan War of 1859–60, which arrived partly from Spain too.\textsuperscript{126} Cholera, often in association with famine, could trigger social revolts capable of shaking the weak structures of the state and even the sultan’s authority. As Óvilo commented for the 1878 epidemic, ‘cholera and other calamities brought Morocco to such prostration that [...] it was easy to foresee one of those historical cataclysms which mark the disappearance of a people.’\textsuperscript{127} Otherwise, pilgrims grew familiar with modern quarantine facilities and procedures, especially at the lazarettos of El Tor in Egypt
and Matifou in Algiers, such that they realised the sanitary backwardness of their country. But they could also become increasingly sensitised to sanitary interference in a religious, saintly affair, as the incidents on Mogador Island in 1893 and 1896 revealed.

All these reasons made the Hajj a threat for Spanish projects of regeneration and creation of a ‘Moorish’ elite. With regard to politics, the experience of British and French modernity in Algeria or Egypt and the fact that the journey was almost always made in British and French steamships could lead ‘Moor’ pilgrims to realise the modesty of Spain’s projects in their country and its second-rank position in international politics, commerce or colonialism. On the other hand, they could be tempted to abandon their ‘Hispano-Arabic’ identity for a more attractive religious adscription as ‘Muslims’, ethnic condition of ‘Arabs’, cultural ‘Islamic’ background or political ‘nationalism’. From a sanitary point of view, the pilgrimage threatened to discredit regeneration projects. Every time pilgrims imported or were suspected of cholera, the British and the French renewed their criticism of the Sanitary Council of Tangier and Mogador Island lazaretto despite Spanish-sponsored reforms. Epidemic risks justified their attempts at direct intervention in Moroccan public health or their plans for obliging Morocco to adopt international schemes. For example, in the convention resulting from the tenth ISC held in Venice in 1897, the French successfully included a plea to the sultan such that ‘the Sanitary Council of Tangier adopts preventive measures against plague in harmony with the resolutions contained in the agreed convention’.128 This strategy would be repeated in the following conference in Paris in 1903, where Lucien Raynaud was invited to present on the troubled state of Moroccan quarantines.129 Finally, disinfection and isolation procedures imposed on pilgrims on Mogador Island were liable to trigger opposition against sanitary reforms from Morocco’s conservative elites and popular masses.

For all this, regenerationist discourses and practices attempted to frame the Moroccan Hajj. The result was a loosely articulated vision that stood far from the ‘twin infection’ schemes already prevalent in French Algeria or British India at that time, as Luc Chantre and Saurabh Mishra have shown.130 From an ideological point of view, as Óvilo argued in his study El cólera en Tánger (1895), the hajjis were believed by regenerationists to be ‘moved by a religious idea and sanctified by it’, that is, the pilgrimage was essentially regarded as an enriching and
positive spiritual experience. We may infer that Óvilo also saw it as a means of ‘spiritual regeneration’ for the elite of ‘Moors’, so that they developed a ‘healthier’ mentality and abandoned ‘vices’. On the other hand, ‘Moors’ were considered as the central or characteristic actors of the Moroccan pilgrimage. Thus, the Spanish minister in Tangier was glad to inform the minister of foreign affairs in 1889 about the ‘quality’ of the ‘considerable’ number of hajjis leaving for Mecca that year. Such ‘quality’ was marked by the presence of several important ‘Moors’, among which he mentioned the son of the caid of Meknes, accompanied by ‘sixty relatives and friends’ and Ahmed ibn Shucron, an army colonel who had been trained as an engineer in the Spanish Military Engineering School in Guadalajara in the late 1870s, who travelled in the company of ‘five brothers’. Medical care of the pilgrims was assigned to the previously mentioned Hamed Romani, of privileged social extraction too. All three were outstanding examples of ‘Moors’ targeted by, and actively involved in, regenerationist plans.

With regard to public health, Óvilo thought that the pilgrimage posed no essential risk of cholera epidemics and pilgrims were not sources of infection in themselves. On the one hand, he put the blame on the French and the British for the unsanitary conditions in which the hajjis travelled: they were just ‘poor creatures that come back to their country after long sufferings [...] on board ships that profit and greed transform [...] into infamous stores in which passengers are carried and treated a thousand times worse than in those used for the ebony traffic [i.e. the slave trade]. On the other hand, he judged pilgrims not ‘a very dangerous element by themselves, but just by their effects’. As they had acquired some ‘immunity’ against cholera after being exposed to it in Mecca, it was unlikely that the disease would break out in their ranks during their return to Morocco. As a result, there was just one thing to be feared: if the germs pilgrims carried within their bodies or in their clothes and luggage spread to the general Moroccan population, the consequence would be a disastrous epidemic due to the latter’s lack of immunity and bad health condition, as well as the precarious state of the sanitary administration beyond coastal areas. Óvilo acknowledged ‘the lack of a good sanitary organization’ in Morocco and that it was ‘not fair, from a sanitary point of view, to consider Morocco at the same level than other nations that march at the front of civilization’.
It seems clear that, for Óvilo and the regenerationists, most ‘Moors’ were capable of dealing with the ideological and sanitary risks of the Hajj without much disruption for their modern, Hispanophile, identity and their rather healthy condition. However, it was also clear that a few of them would surely become ‘dis-eased’, however surreptitiously, during the pilgrimage with the risk that they could trigger an epidemic if they came in contact with the general population. Thus, a site was needed for mending the dis-eased ‘Moors’ and protecting Morocco both in ideological and sanitary terms. Mogador Island was perceived as the best place from a regenerationist point of view. With regard to politics, it was highly symbolic that the site was located in front of Mogador, the most European city in Morocco. Mogador had been built anew in the 1750s and 1760s, during the reign of Sultan Mohammed III, who decided it would be the only port authorised for international commerce and promoted the settlement of Jewish and European merchants for that purpose. Mogador was, so to speak, the Tangier of the eighteenth century and, as happened with the city of the Strait, Spaniards claimed to have played a decisive role in its development. According to Francisco Merry y Colom, Spanish minister in Tangier in 1860–72, Mogador had been ‘designed and built’ by Spanish renegades, its walls were similar to those of Cádiz and most of the cannons defending them had been given as a present by Spain. The commercial prosperity of the city owed much to the ‘fraternity’ and ‘friendship’ between Carlos III of Spain and Mohammed III, the latter of whom tried, according to Merry, to ‘regenerate’ his country with Spanish support. In sum, pilgrims isolated on Mogador Island were literally exposed to the earliest example of Spanish–Moroccan modernity. Staring at the city over the waves, they would feel reassured in their ‘Moorish’ mentality and forget any disruptive European, Muslim, Islamic or nationalist ideas acquired during the pilgrimage.

From a sanitary point of view, Mogador Island was established in the only suitable place for quarantine that existed in the whole Atlantic littoral of Morocco. Its tiny size and its proximity to the seaboard and the city – the usual reasons invoked for criticising its use – were actually very similar to the three foul lazarettos existing in Spain. San Simón Island in the fiord of Vigo, Pedrosa Island in Santander Bay and the Lazarettos Island in Mahón Bay were similarly small and close to the mainland and/or nearby cities. The only real difference was that
it was far easier to disembark passengers and luggage in them because they were completely protected from the open sea. But there were no protected sites on the Atlantic coast of Morocco and those that were closer to fulfil this and the rest of the required conditions in the Mediterranean were Spanish outposts. In sum, Mogador Island was suitable as a lazaretto and Spanish-led reforms further improved this status. Besides, in front of it there was a city in the design of which public health had played a central role. As the British traveller Joseph Thomson put it in 1889, Mogador was ‘the best-built and cleanest-kept place in Morocco’. Its medina (old town) was made of ‘spacious houses, clean squares and straight streets’ and it had the ‘unique distinction’ of having been built with ‘a partial sewage system’. While staring at the city over the sea, Moroccan pilgrims would be reassured of the relevance of Spanish–Moroccan sanitary initiatives, which neither religion should oppose, nor European criticism could downplay.

Conclusion

In March 1900, Moroccan authorities recruited Lucien Raynaud to organise the quarantine on Mogador Island. When he arrived there, most pilgrims had already come back from Mecca, so just thirty would be confined in the island and no more would arrive during the summer. The following year, Raynaud, joined by Dr Gagé, repeated the operation, with 177 pilgrims undergoing quarantine this time. During the rest of the decade, however, when the risk of epidemic existed, either the pilgrimage was banned or the quarantine of Moroccan pilgrims was performed in Algiers’ Matifou lazaretto. In spite of a French doctor being assigned to Mogador Island at least until 1911, the site was neither used nor modernised. Instead, Raynaud lobbied the Sanitary Council and Moroccan authorities so that a modern lazaretto was built in Tangier. An international commission searched for the best location in 1901 and two projects were drafted for a complex in Malabata Point by two different private enterprises, but nothing was actually done. The abandonment of quarantines when a comprehensive public health system was still a distant project resulted in small foci of plague striking the country from 1909 in anticipation of a massive outbreak in 1911 – which caused 10,000 dead in Dukkala – with minor
episodes recurring in the newly established French and Spanish protectorates in subsequent years. Plague brought by pilgrims and commerce but, above all, extended through the continuous and extensive military operations of France and Spain, would remain a severe threat for Morocco at least until 1929.

Parallel to this, the Hajj stood behind the wave of Islamic reformism that swept through Morocco in the first decade of the twentieth century. According to Ety Terman, some Moroccan scholars ‘were exposed to Muslim reformers while on the pilgrimage to Mecca; others came under the influence of hadith scholars in Egypt and the Hejaz while on the pilgrimage.’ For example, in 1903–04, the ulama Muhammad ibn Abdalkabir al-Kittani did the pilgrimage with expenses paid by his ‘old friend the sultan.’ His family had been opposed to the rise of European influence in Morocco during the nineteenth century, but a further step was taken when, after his return from Mecca, al-Kittani became a pioneer of the Salafiya movement in the country, campaigned against French reform proposals and even called for jihad against foreigners.

In 1908, the new Sultan Abdelhafid invited Abu Shuaib al-Dukkali to return to the country from Mecca. Dukkali, a scholar trained in Cairo’s Al-Azhar University, where he became a follower of Salafiya, had moved to Mecca to work for the Wahabite sharif Awn al-Rafiq. In Morocco, Dukkali reformed the syllabus of the Qarawiyn University in Fez, ‘was largely responsible for the spreading of Salafiyah doctrines among intellectuals’ and, through his disciples, influenced the origins of the Moroccan national liberation movement.

Plague and Salafism were precisely the risks Spanish regeneration projects in Morocco, and more particularly those regarding the control of the Moroccan pilgrimage to Mecca, had tried to prevent during the last decade of the nineteenth century. Their appearance and diffusion in Morocco in the first years of the new century showed how quickly such projects had become a failure after the fall of Spanish prestige in the country following the loss of Cuba and the Philippines in 1898. The new situation of the 1900s resembled more closely the realities and narratives of the ‘twin infection’ associated with the pilgrimage to Mecca in British India or French Algeria – though the limitation of French hegemony due to the participation of Spain in the division of Morocco and the international status granted to the city of Tangier still made the Alawite sultanate an unconventional case. When in operation
during the 1890s, Mogador Island had become a key material and symbolic site of regeneration projects which, building on local modernising reforms promoted by the sultans, aimed at transforming Morocco into an ‘African Spain’ closely attached to ‘peninsular Spain’ and producing an elite of modern, healthy, Hispanophile ‘Moors’. Much faster than expected, however, these projects became distant, blurred memories for both Spain and Morocco.

Notes

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4 Ibid.


Press, 2013. A harsher critique should, in any case, be made of those historians – especially in Spain – that regard Spanish intervention in Morocco as non-imperialistic or disinterested or just focusing on spiritual and cultural matters with no alleged desire for political control or economic gain.


12 Ibid., 81.

13 ‘La política del statu quo en Marruecos’, Revista de Geografía Comercial 47, 19 October 1887, 541.

14 Intereses, 1947, 35.


20 Propuesta hecha por el ministro de Estado para la creación de varios organismos religiosos y seglares, Archivo Histórico Militar de Madrid, África, Léxico 1, Carpeta 24.


22 Alberto España, La pequeña historia de Tánger, Tánger, Distribuidora Ibérica, 1954, 34.
24 Ibid., 242.
25 Ibid., 247.
26 Ibid., 248.
27 Ibid., 249.
30 Ibid.
35 Ibid.
39 Óvilo, *De l’influence des pèlerinages marocains*, 16.
41 Ibid., 15.
42 Regreso de los hadjes, *Al Mogreb al-Aksa*, 21 September 1890.
43 Ibid.
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44 Informe del ministro de España en Tánger al ministro de Asuntos Exteriores. Tánger, 28 de junio de 1889. Archivo Provincial de Pontevedra, Colección Solla, 198–199.

45 Ibid.

46 Ecos y rumores, Al Mogreb al-Aksa, 30 August 1891.


48 Weekly notes, Al Mogreb al-Aksa, 26 August 1893.

49 Situation sanitaire de l’île de Mogador d’après les rapports du Dr. Prieto, médecin du lazaret. CADN, Fonds Tanger B, Carton 500.

50 Ibid.


52 Situation sanitaire de l’île de Mogador.

53 Extracts from despatches from M. Vice-Consul Johnston, 1893. The National Archives (TNA), Foreign Office, 99/374.

54 Mishra, Pilgrimage, Politics and Pestilence, 113.


57 Rapport lu à la séance du 17 Octobre 1895 par le médecin-consulteur, Mr. le docteur Severo Cenarro. CADN, Fonds Tanger A, Carton 167,


60 Ibid.


62 Ibid.

63 Ibid.

64 Projet de règlement général pour le service de quarantaine dans l’île de Mogador, 1896. CADN, Fonds Tanger B, Carton 501.


66 Following the outbreak of plague in 1818, triggered by pilgrims from Mecca (including the sultan’s own two sons) who were allowed to disembark in Tangier, Moulay Slimane banned the pilgrimage. The ban
allegedly lasted until 1827 or 1828 (El-Bezzaz, ‘Les débuts de la réglementation sanitaire’, 69).


69 Ibid.

70 Ibid.

71 Ibid.


73 Dr. François au ministre de France à Tanger Mogador, 9 Mars 1898. CADN, Fonds Tanger B, Carton 501.


75 Ibid.


79 Le ministre de France à Tanger au ministre des Affaires Etrangères. Tanger, 30 Septembre 1899. CADN, Fonds Tanger B, Carton 500; The lazaretto, Al Mogreb al-Aksa, 17 June 1899.


81 Weekly notes, Al Mogreb al-Aksa, 5 August 1899.

82 Ibid.


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91 Raynaud, Étude sur l’hygiène, 64.

92 ‘Reglamento orgánico provisional de Sanidad Marítima para el servicio de las dependencias’, Gaceta de Madrid, 25 June 1887.


96 Ramírez, El lazareto de Gando, 118–130.

97 Ibid., 132.

98 Ibid., 133.


102 Pedro Martínez Montávez, ‘Sobre el aun “desconocido” arabismo español del siglo XIX’, in Ensayos marginales de arabismo, Madrid, Instituto de Estudios Orientales y Africanos, 1977, 3–22; Bernabé López García,


107 Ibid., 58.

108 Ibid., 60.

109 Ibid., 58.

110 Ibid., 63.

111 Ibid., 76.

112 Felipe Óvilo, Intimidades de Marruecos, Madrid, Librería de Fernando Fé, 1894, 39–47.

113 Felipe Óvilo, Estado actual de Marruecos, Madrid, Librería de Fernando Fé, 1888, 29.

114 Ibid., 3.

115 Ibid., 3–4 (italics are mine).

116 Ibid., 4–5.

117 Emilio Bonelli, El imperio de Marruecos y su constitución, Madrid, Imprenta y Litografía del Depósito de la Guerra, 1882, 88.


120 Sylvia Chiffoleau has argued that radical political and religious exposure was indeed very restricted by the end of the nineteenth century, but
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acknowledges its existence for the case of rich and cultivated pilgrims (Chiffouel, ‘Le pélerinage à la Mecque’).

121 Óvilo, ‘Estudios políticos y sociales sobre Marruecos’, 70.

122 Hassan bin Muhammad al-Rassal ‘Voyage de Tanger à La Mecque par El Hasan Ben Mohamed El Rassâl, traduit par A. Rezzouk, Revue du monde musulman 1, 1908, 2–3, 5.

123 Pennell, Morocco since 1830, 141.


127 Óvilo, Estado actual de Marruecos, 11.

128 Raynaud, Étude sur l’hygiène, 68.


131 Óvilo, El cólera en Tánger, 8.

132 Informe del ministro de España en Tánger al ministro de Asuntos Exteriores, Tánger, 28 de junio de 1889. Archivo Provincial de Pontevedra, Colección Solla, 198–199.

133 Ibid.

134 Ibid., 21–22.

135 Ibid., 4.

136 Óvilo, El cólera en Tánger, 8.

137 Ibid., 16.

138 We use the term ‘dis-ease’ to indicate that the disruption triggered by a certain situation, in this case, the pilgrimage to Mecca, affected the physical, psychological and social dimensions of individuals. Examples of this use can be found in Anne Pérez-Hattori, Colonial Dis-Ease: US Navy Health Policies and the Chamorros of Guam, 1898–1941, Honolulu, University of Hawai’i Press, 2004; Bennett Kravitz, Representations of Illness in Literature and Film, Cambridge, Cambridge Scholars Publishing, 2010.


140 Francisco Merry y Colom, Relación del viaje a la ciudad de Marruecos, Madrid, Imprenta Nacional, 1864, 28.
141 Merry, *Relación del viaje a la ciudad de Marruecos*, 8; Rafael Mitjana, ‘Viaje a la corte del sultán de Marruecos’, *La España Moderna* 13, 145, 1901, 138–139.


143 Ibid., 68.

144 *Lazaret de Malabata* [unsigned report]. CADN, Fonds Tanger B, Carton 504.


148 Martínez-Antonio, ‘Resilient modernization’.


151 Ibid.