

Madness in the Cape Colony

[B O O K R E V I E W]

Swartz, Sally (2015) **Homeless wanderers: Movement and mental illness in the Cape Colony in the nineteenth century.** Cape Town: UCT Press. ISBN 978-1-77582-088-8 pbk. Pages xvi + 224.

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Scholarly texts on the history of psychiatry generally sketch a narrative of the progressive movement towards humane care for the mentally ill over time (see Shorter, 2003). For the most part, this analysis seems adequate. Advances in mental health care policy, clinical technologies and drug treatment have allowed for the better management and clinical care of those suffering with mental illnesses. Despite these advances, there are certain contemporary events that deeply disturb and undermine this narrative. In South Africa, The Life Esidemeni tragedy in Gauteng is a case in point. Between 23 March and 19 December 2016, it was reported that over 100 psychiatric patients had died as a result of the inadequate provision of mental health care services in the region. Now it may seem somewhat at odds to foreground a review of an academic text which charts the history of psychiatry in the South African Cape Colony between the period 1890 and 1910 with this tragic event. However, Sally Swartz's sweeping text, **Homeless wanderers**, opens up some deeply disconcerting parallels between the inequalities that fractured mental health care provision in the Cape Colony over 100 years ago and the manner in which they still reverberate through South Africa's healthcare system today. Swartz, South Africa's doyen on the subject matter of colonial psychiatry offers a compelling and poignant elucidation of the antecedents of these issues through her delicate and detailed discursive enquiry, **Homeless wanderers**.

This review will attempt to distil for the reader the core thematic of Swartz text and some of its resonances for mental health care practices and policy in South Africa today.

The opening two chapters grapple with the many paradoxes in stories of insanity and the analysis centres on the motif of movement. The authors reflection over the seemingly boundless and agitated wandering of the insane and the clinical constraints designed to contain them is an organizing thematic of the text, which Swartz terms the “stasis-movement dynamic”. One of the more interesting counterpoints at play within this dynamic is the fluid and intemperate nature of mental illness and the rigid, formulaic frameworks used to appraise it. In many ways, madness defies the clean contours of categorisation; it is the antithesis of order. In contrast, colonial psychiatry was obsessed with categorizing and order along every level of society. Mental health care provision and quality in the Cape Colony was stratified along gender, socio-economic and racial lines, the traces of which can be seen in the South African health care system today. The text also explores how the bureaucratic machinery of colonial psychiatry squashes out the complexity and nuance that characterize individual experiences of mental illness. This is evident in the asylum archives where uniformity, regulation and affective disavowal dominate. Swartz contends that this instrumentation was applied with particular force to indigenous populations whose capacity for registering complex psychological responses like trauma was brought into question by the racist pseudoscience of that epoch. These spurious sciences were used to buttress the differential care offered to indigenous patient populations in the Cape Colony.

In Chapter 3, Swartz offers a more detailed elucidation of the legislative and regulatory mechanisms deployed within colonial psychiatry. Swartz commentary here is underpinned by the philosophical and epistemological influences of Foucault (1973), whose interrogation the “psy-complex” centres on its regulation of family life, sexuality, mind, and rationality. In this tradition, **Homeless wanderers** details the “capillarized” and interconnected nature of the governance structures that framed the experiences of the mentally insane in the Cape Colony. This nebulous nexus of jails, hospitals and asylums reflects the blurred boundaries between criminality, physical illness and insanity. Consequently, there were often clashes of perspective and contestation within these central systems around who was suitably qualified to detect insanity.

The issue of psychiatric illness and family stigma is brought into sharp focus in Chapter 4. Few other pathologies attract as much public scrutiny and speculative discourse as does mental illness. Speculations over the etiopathogenesis of mental illness abound and often centre on the family. Swartz intimately explores this intrusion and surveillance into the family life of the mentally ill from external forces. The author demonstrates

how having an insane relative opened up families to enquiries into their financial circumstances, histories of mental illness, and other probing encounters with various institutional apparatuses. This chapter also delves deeper into the asylum archives in an effort to convey the complexity and wide variation in terms of family involvement in the lives of insane relatives. Again, the motif of movement is threaded throughout the book and its bifurcated nature is a point of continual reflection by the author. In this instance, it is clear that the intrusion of mental illness into the familial space was one often characterized by a sense of severe rupture and violent change. At the same time there is an element of immutability to family ties that invariably cast the experience of mental illness as a collective one.

Chapter 5 looks at the movement of the insane across the colony's boundaries. The Cape asylums found themselves dealing routinely with immigrants, some of which became insane following the arduous journey to the colony and others in response to the hardships that came with carving out a new life in unknown conditions. This chapter also looks at the legislative mechanisms designed to police the borders of the colony from the intrusion of insane immigrants. Chapter 6 expands on this analysis but narrows its scope to a particular cohort of immigrants, namely, the Jewish community. This chapter explores the experience of being cast as "other" in a society obsessed with drawing distinctions between insiders and outsiders. Bolstering these exclusionary practices were pseudo-scientific claims around Jewish patients as predisposed to neurological degeneration. Etiological formulations of mental illness among Jewish patients were similarly crude and unsophisticated as typified by "an excessive zeal in acquiring riches" (p 152). The text also explores how experiences of "otherness" by mentally ill Jewish patients was offset and obscured by the extreme otherness of the black indigenous patients, whose presence was considered to be a far more unsettling for colonial psychiatric institutions.

In the final chapter, Swartz deep erudition on the subject matter of Cape colonial psychiatry allows for a piercing exploration of its "hidden and elusive interior" (p 183), a space characterized by various levels: "the madness of colonialism; the madness that represented the trauma of having colonised people; displaced anxiety; symptom formation as repetition of trauma refigured; and symptoms as a temporary release from fear and aggression" (p 184). Much of the detailed and scholarly reflection in this chapter coheres around the notion that a society detached from the traumatic nature of its birth will remain perpetually unsettled, an existential crisis which often manifests in psychiatric sequel. This chapter is teeming with the clinical and critical insights of the author and the unique analytical framework that she deploys appears to have a strong resonance in the stellar scholarship of other critical voices in South African psychology (cf Wilbraham, 2014).

By drawing on her depth of clinical expertise and wealth of scholarly insight into the subject matter of colonial psychiatry, Swartz text achieves something quite rare. It manages to distil and capture the voices of those most marginalized and maligned; those whose subjectivity has been reduced to a series of generic descriptors by the bureaucratic machinery of intuitional psychiatry. In many ways, Swartz text is a bold and ambitious response to Roy Porter's call to rewrite medical history from below by listening for the patient's voice in the archival records. Through Swartz detailed and penetrating engagement with the asylum archives, the reader is allowed to glimpse the individuality of the patient and hear for a brief moment their rich and deeply poignant stories.

References

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