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*Surfacing Up* examines dismal swirling at the bottom of the social order in colonial Zimbabwe: the apprehension and so-called treatment of people deemed to be insane. Just as the words insanity and lunatic have several nuances in popular parlance, so in colonial practice these labels were applied to a variety of people who may or may not have been clinically insane. Indeed, colonial Rhodesians, white and black alike—who found themselves in wrong places at really wrong times—were hauled off to the strictly segregated spaces of the colony’s only mental asylum. Oddly, this quintessentially western colonial institution had an African name, after a place connected with the late history of the indigenous Ndebele kingdom. Ingutsheni, “the place of blankets,” referred colloquially to the area of the residences of the wives of the last Ndebele ruler, Lobengula Khumalo. The institution was and is located on the outskirts of the town of Bulawayo.

Lynette A. Jackson does not merely tell the story of Ingutsheni and many of its inmates—although this in itself would have been a significant contribution to Zimbabwean historiography. Instead, and even more ambitiously, she brings histories and stories of madness, race, and colonialism together in a holistic and sophisticated way. Ultimately, she poses the question of how the imposed social madness of colonialism interacted with individualized responses to conquest, oppression, and resistance.

*Surfacing Up* owes much, as do all studies of colonial psychiatry in Africa and the Third World, to Franz Fanon. Like Fanon, Jackson explores how colonialism came to define and enforce behavioral normality and isolate abnormality in the body politic. The phrase “surfacing up” refers to behaviors connoted with unruliness breaking up through the nominally calm surface of the colonial order. Although, as noted below, not all challenges to that order were perceived to be insane, some were, and these dynamics form the core of Jackson’s book.

The book is organized around six main themes: the colonization of space and the setting and enforcement of behavioral norms by the colonial state; the institutional history of Ingutsheni and its main medical custodians; gendered narratives of irrationality and criminality; psychiatric treatments and malpractices; and finally, the role of African madness in the colonial psyche. Across these themes, Jackson draws heavily on the idea of a “therapeutic management community” to bring oft-ignored African methods of dealing with mental health issues into her story. The ways that families and communities of the past and present are involved in the maintenance of mental health and the diagnosis and treatment of mental illness in African society is memorably contrasted with western notions of individual irrationality and biomedical treatment regimes. Thus we see here how certain kinds of individual behavior were construed as madness by developing practices and imposition of racial superiority and gendered respectability in colonial society.

Jackson frames the beginning and end of the book with post-independence developments in the field of mental health in Zimbabwe. In South Africa, post-1994 custodians of apartheid-era institutions kowtowed to and generally perpetuated old, disrespectful institutional cultures. Here, in comparison, the description of the furious rampage of Dr. Herbert Oshewokunze when, as the first Zimbabwean minister of health, he discovered
the inequitable and filthy conditions imposed on African inmates compared to their white counterparts at Ingutsheni, is worth the entire price of the book.

Jackson’s research unearthed many heartbreaking stories. African people were taken away, judged, and committed sometimes for the length of their lives on the basis of simple linguistic misunderstandings, or the mental manifestations of venereal disease and malnutrition. It takes a strong stomach to last through the descriptions of the physical torture: chemical and electric convulsant therapies, psychotropic drugs, and prefrontal leucotomies (lobotomies) imposed on such unfortunates. The stories of confused people, who were, one imagines, first misdiagnosed and then mistreated and who sometimes died in Ingutsheni often after decades of neglect, makes for truly painful reading.

With so much to recommend it, Surfacing Up does exhibit some flaws in content and form. The content issues relate primarily to the book’s relationship with the historiography of gender in Zimbabwe, mainly regarding the contested mobility of African women. The word “stray” for example, refers to the fact that African women did not have to carry passes and so largely operated without the physical constraints imposed on African men. Ironically, however, they were then generally considered as “stray” wherever they were.[1] After reading Surfacing Up, a reader might think that every “stray” African woman was sent to Ingutsheni, which, as the historiography indicates, is inaccurate.[2] So, why were only some transgressors of the norms of physical mobility sent to Ingutsheni? Crucially, how was the asylum differentiated from prison, and how and why were some Africans categorized as criminals while others were deemed to be insane? One imagines the designation of lunacy resulted from combinations of wrong place/wrong timing and (based on Jackson’s descriptions of individual cases) the direct challenge that mobile women posed to the status quo when they spoke. When the stray subaltern did speak—either literally or figuratively—she was assumed to be mentally ill.

My own work also debates a perspective that stems from the work of Elizabeth Schmidt that argues for the existence of a virtually seamless alliance between African and white colonial patriarchies in the act of confronting the challenges posed by mobile women.[3] Jackson agrees with Schmidt here but she could have engaged much more fruitfully with this debate.

A flaw in the book’s form is the lack of a bibliography. If academic publishing has fallen on such hard times that bibliographies have become disposal aspects of scholarly monographs, it bodes ill for the future. The chapter endnotes give full publication data for quotations and citations but it is extremely tedious to search through twenty-seven pages of endnotes to see if this, that, or so-and-so was consulted by the author—especially cogent because this wide-ranging study brings together colonial and metropolitan history, gender studies, allopathic and African medicine, psychology, and psychiatry. The lack of a bibliography presumably will also hinder further research in relation to primary sources and interview material.

With these caveats, however, Jackson should be congratulated for the production of a subtle and sophisticated volume that will greatly deepen our understanding of the particularities of the colonial experience in Zimbabwe, and will certainly suggest fruitful lines of future debate and research.

Notes


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