

Matthew M. Heaton. *Black Skin, White Coats: Nigerian Psychiatrists, Decolonization, and the Globalization of Psychiatry.* Columbus: Ohio University Press, 2013. 288 pp. \$32.95, paper, ISBN 978-0-8214-4473-3.

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Just as the process of decolonization in the twentieth century reshaped high-level political structures, so too did it radically alter social and institutional configurations even closer to home for former colonial subjects and citizens. Indeed, the end of formal colonial rule brought about not only new forms of government and political participation, but also new thinking about how to run a postcolonial society and build a new citizenry. Experts contemplated how to organize agriculture and food production, how to structure education systems that would form the citizens of newly independent states, and how to provide medical care to ensure a healthy and growing population. The reach of the decolonizing process can thus be traced into the most intimate corners of home, body, and mind. In *Black Skin, White Coats*, Matthew Heaton expertly links broader political developments brought about by decolonization to changes in the field of Nigerian psychiatry, and in turn connects this shift to changing understandings of race and the postcolonial self.

Transcultural psychiatrists like Heaton's protagonist, Dr. T. Adeoye Lambo, found themselves in a privileged position in postcolonial Nigeria. Lambo and his colleagues sought redefine the terms of a long-standing debate about psychology and racial hierarchies and thus challenge long-en-

trenched assumptions about the supposed superiority of Western civilization. Thus we could say that the field of psychiatry in Nigeria was decolonizing in a double sense of the word: it was undergoing a process by which European ideas, institutions, and personnel were replaced by African or universalist ones, and it was also contributing to a new understanding of what it meant to be Nigerian, African, and human in a postcolonial world. Psychiatry both shaped and was shaped by broader political and social changes that accompanied the end of empire.

Heaton's book walks the reader through several different facets of this decolonizing psychiatry, from the establishment of new global scientific networks to the changing understandings of the role of psychotropic drugs in the treatment of mental illness. The first two chapters focus on the establishment of colonial psychiatric institutions and their decolonization before and after Nigeria's formal independence in 1960. Chapter 1 explores the role that colonial psychiatry played in a broader system of British colonial domination. Without a notion of rehabilitation as the ultimate goal, the colonial asylum functioned more as a prison than as a local site of recuperation. The colonial administration consistently rejected proposals to expand services to treat Nigeria's men-

tally ill, citing lack of funds or claiming that it was “beyond the responsibility of the colonial government” (p. 34). Through their theories of African mental illness, colonial psychiatrists like Dr. R. Cunyngham Brown and J. C. Carothers contributed to the racist formulations of cultural and civilizational hierarchy that undergirded colonial rule.

Dr. Lambo’s Aro Mental Hospital, founded in 1954, anchors chapter 2. The Aro Hospital, Heaton says, served as the locus of psychiatric efforts to break down some of the longest-entrenched notions of a psychological basis for African cultural inferiority in the post-independence period. It was there that Nigerians were first able to access some of the most modern technologies in psychiatric treatment, like psychotropic drugs and electroshock therapy. The chapter also explores the Aro Village Scheme, which Lambo hoped would fuse community-based care with a new egalitarian model of understanding human psychology.

Chapter 3 takes a more international perspective of the story by exploring the treatment of mentally ill exchange students living in Great Britain. Here Heaton explores the efforts of Nigerian psychiatrists to advocate new models of cross-cultural understanding and to push British authorities to offer a broader range of support services for these individuals. Moving on to the diagnosis and treatment of particular diseases, chapter 4 narrates the transformation in Nigerian understandings of depression, schizophrenia, and the “brain fag syndrome” described by R.H. Prince in 1960. In their efforts to free Nigerian patients from colonial prejudices about the specificities of the African mind, Heaton argues that transcultural psychiatrists worked to recast these illnesses as universal maladies with geographically and culturally specific manifestations.

Finally, Heaton takes on the question of treatment in the final two chapters of the book, focusing on the evolution of Nigerian psychotherapy and the use of psychotropic drugs. The chapters il-

luminare the ambivalent position that Nigerian transcultural psychiatrists adapted vis-à-vis Western medicine. Claiming the ability to separate the culturally oppressive from the scientifically modern, Nigerian psychiatrists worked to establish their own authority as “gatekeepers” of a new postcolonial modernity.

Three overarching arguments run through *Black Skin, White Coats*. First, changes in the field of psychiatry were intimately connected to broader historical processes, in this case, the decolonization of Africa. Second, psychiatrists made important contributions to a debate about the nature of postcolonial modernity. And third, even as psychiatry, like other fields of medicine and science, became increasingly globalized, it remained closely connected to local and national developments.

One of Heaton’s most important successes is to further our understanding of the extremely tenuous path that African experts had to navigate between a crumbling colonialism and a brave new post-imperial world. Even in their attempts to redefine a new normal and a new abnormal in a way that would both universalize and honor local specificity on its own terms, Nigerian psychiatrists contended with a vast body of knowledge and a large network of institutions that had evolved over decades of colonial rule and could not be dispensed with overnight. As actors in a worldwide scientific network, Nigerian psychiatrists confronted a multitude of deeply set, pre-existing structures: global pharmaceutical companies, international indexes of mental diseases, and medical services for immigrants operating beyond the geographic boundaries of Nigeria. By exploring these complex negotiations, Heaton makes good on his commitment to avoid the overly rigid categories of “colonizer/colonized,” “Western/non-Western,” and “domination/resistance,” that Frederick Cooper has encouraged us to eschew.[1]

Although Heaton notes that a focus on psychiatry in *any* former colony could serve to expand our understanding of the process of decolonization, he also makes a good case for his focus on Nigeria. More impressively, he successfully contextualizes the Nigerian developments in both local histories and broader African and global histories of the decolonization moment.

But while he skilfully navigates the local, national, and global scales, one wonders if a more comparative approach might further illuminate some of the crucial developments he attempts to unpack. As historians of decolonization know, decolonization was a process that unfolded in very different ways in different geographical and historical contexts, and was accompanied by varying degrees of violence. One must ask, then, did the specific history of political decolonization in Nigeria shape psychiatry in ways that may have been different in neighboring regions, countries, and continents? On the other side of the coin, did psychiatry play a similar role in decolonizing society, the individual, and the mind as it did in Nigeria elsewhere in Africa, or in Asia or the Caribbean? Heaton's work also raises questions of the links between psychiatric understandings of postcolonial modernity and the interpretations of modernity and development emanating from other fields, including education, literature, and economics.

Heaton has provided an illuminating examination of the way that decolonization shaped society at its most intimate level: the human mind. He has successfully demonstrated the ways in which psychiatry—in its many iterations—was both an object of and an actor in the broader processes of decolonization.

Note

[1]. Frederick Cooper, "Conflict and Connection: Rethinking Colonial African History," *American Historical Review* 99, no. 5 (1994): 1517.

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