Review


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In the mid-1960s while conducting anthropological research in the rural Philippines, I became involved with several spirit mediums who were successfully treating – with what are now called ‘alternative’ therapies – local men and women suffering from various physical and mental ailments. Having been introduced to the possibilities, techniques, and at times the curative power of non-biomedical practices, I was eager to read Julie Parle’s recent volume, *States of Mind: searching for mental health in Natal and Zululand, 1868-1918*. I was looking for parallels and contrasts to my own much more limited research. I found a great deal more.

*States of Mind* is a stunning contribution to the social history of South Africa – with implications well beyond its borders. The initial focal point of the volume is the Natal Government Asylum during the late 19th and early 20th century. But, by broadly contextualising the institution, it is equally a disquisition on the rapidly evolving social, economic, and political dynamics of Natal and Zululand, as well as the continuing transformations of worldwide medical and psychiatric knowledges and practices during that period. *States of Mind* is a model of imaginative, careful, and critical scholarship. Yet it remains eminently readable. It is filled with revealing quotes from key contemporary actors, and compelling accounts of the exceedingly diverse sources, manifestations, treatments, and outcomes of ‘madness’ in the African, Indian, and White communities of the region. In spelling out the multiple and changing medical, social, economic, institutional, and legal practices of the period, the volume also provides an important foundation
for understanding the continuing evolution of both psychiatric practice and broader aspects of South African society today.

The Natal Government Asylum, built on Town Hill on the outskirts of Pietermaritzburg, admitted its first 60 patients in 1880. Prompted by the 1868 Natal Custody of Lunatics Law calling for the detention of people ‘dangerously insane’ or ‘of unsound mind’, it was the first such purpose-built asylum in southern Africa. The Legislation’s definition of ‘insanity’ was vague and the manifestations of madness seemed quite variable. However, perhaps most important, the Law of 1868 was broadly inclusive in the sense that it made no distinctions among or within the various population groups of Natal and Zululand. As a consequence, from its founding – and in sharp contrast to the prior and subsequent facilities elsewhere in other parts of southern Africa – the Natal Asylum admitted, cared for, and attempted to treat both men and women from the region’s African, Indian, and European communities. Over the course of the years, however, Parle shows, among other things, how racial differences in the incidence, forms, treatments, and definitions of ‘madness’, became increasingly marked.

The key figure in the management of the Asylum and the design of treatment, was Dr James Hyslop, the Physician Superintendent from 1882 to 1914. A highly respected and influential figure in Natal medical circles and the development of the psychiatric profession in southern Africa, Hyslop took a humanistic and universalistic approach to his work. Contrary to other theories of insanity at the time, Hyslop was intrigued by the possibilities of common organic sources of the problem and, for example, pressed for post mortem examinations in search of brain pathologies. But he also believed in the benefits of what he called ‘moral therapy’ and the therapeutic value of creating as natural and home-like a setting as possible for the mentally disturbed. Indeed, in a 1913 report he wrote, ‘I regard useful employment for inmates of an Asylum as quite as important as medicine’. As a consequence, although men and women were accommodated in separate wards, they were encouraged to take their meals together, use common recreation facilities, and even join in weekly dances. All residents were likewise encouraged to work in the Asylum’s gardens, fields, laundry, farm, or quarry, according to their skills and capacities both for therapeutic purposes and, as he also frankly noted, as a cost savings device as well. Nevertheless, given the contemporary colonial/imperial ideology and social and economic hierarchy, white patients – often being supported by their families – resided in more spacious quarters and received much more varied food rations than the
African and Indian patients. White patients could also more successfully refuse manual labor as being beneath their social status.

Although Parle’s study is rooted in Natal, a striking theme running through *States of Mind* is Hyslop’s continuous interaction and exchanges with psychiatrists and other professionals dealing with insanity elsewhere in southern Africa, but also in Scotland, Germany, and across the British Empire. His 32 years directing the Natal Asylum coincided with an intellectually turbulent period marked by Darwinian and Freudian thought, theories of so-called ‘scientific racism’, political and cultural ‘justifications’ for imperialism, a growing interest in eugenics, and the international professionalisation of psychiatry. Hyslop was by no means operating in isolation. Rather, while developing his own ideas and practices, he was also actively engaged with and contributing to expanding international networks of people who were struggling to understand the sources and effective treatment of insanity. However, given the uniquely diverse population of the patients he was treating in the context of a powerful social and political hierarchy, Hyslop was also inevitably contributing to both the contemporary understandings of, and the ‘construction’ of, difference.

Connecting these multiple intellectual threads and the evident differences in the populations and institutional practices on the ground in Natal, at the core of Parle’s volume on the search for ‘mental health’, are three linked and fascinating chapters. The first is on the multiple forms of ‘madness’ among the African, Indian, and European populations of Natal; a second on the care for patients within their families and communities and the role of the state; and a third comparing the sources and rates of suicide within these communities.

The first of these chapters, entitled, ‘Witches, spirits and hysteria; the limits of colonial psychiatry’, provides a rich discussion of the indigenous categories of mental illness and healing; the incidence and forms of spirit possession, hysteria, and paranoia; the conundrums created by having legally criminalised witchcraft without a clear definition of it; and the multiple healing traditions – psychiatric, exorcism, health resorts, herbalists, divination, quack doctors, etc – that were simultaneously in use during the late 19th and early 20th centuries. Aside from a series of detailed and compelling descriptions, this chapter enables Parle to initiate two analytic threads that then run through the entire volume. One thread concerns the powerful new social – and concomitant psychological – pressures on diverse segments of the population created by the rapidly changing economic conditions...
structures and political dynamics of Natal during this period. The second thread turns around the distinctive sources and forms of psychological distress among men and women as a result of the closely related changes in gender roles and gender conflicts during this period.

The next chapter, ‘In their own hands: the search for solace beyond the Asylum walls’, again draws together a series of closely related issues, and by setting them in the changing socio-economic structures of the period is able to differentiate their salience across the different communities of Natal. The issues Parle addresses here include the weight of social stigma for both disturbed individuals and their kin; the various and differential efforts to hide and/or treat the mentally ill men and women in familial settings; the consequent use of the Asylum only as ‘a last resort’; the role of the police and courts in jailing or admitting to the Asylum people deemed dangerous to themselves or to others; the painful difficulties of dealing with endemic drunkenness and delirium tremens; the ambiguous role of herbalists and home remedies; and the increasing commercialisation and commodification of promised cures. In dealing with this complex of issues, Parle succeeds in both contextualising and clarifying the limited role of the Asylum in treating the various forms of mental distress, while simultaneously describing the growing professionalisation of psychiatry in Natal, in southern Africa, and in the world beyond.

The third chapter in this series is entitled, ‘Death in black and white: race, suicide and the colonial state’. Once again, Parle socially and politically contextualises and juxtaposes the theories, sources, and differential and changing incidence of suicide, ‘the painful subject’, among men and women in the African, Indian, and White populations of Natal. This is a particularly fascinating chapter on both methodological and substantive grounds. The methodological issues derive from major differences in record keeping – and thus the available data – with regard to suicide among the three populations. In Natal, as in much of the West, suicide and attempted suicide, were criminal acts punishable by incarceration. But the quality of the data on suicide among the three populations turns out to be extremely variable. The statistics seem fairly reliable on both indentured Indians working on agricultural estates and the ex-indentured Indians who had resettled in the urban areas. And they indicate a dramatically higher incidence of suicide among the indentured workers, most probably due to extremely difficult working conditions on many of the estates. Recognised as a problem at the time, this differential became a basis for protests and requests – sloughed off by the
state – for unbiased investigations by, among others, Gandhi’s newspaper, the *Indian Press*. Indeed, as Parle points out, the differential could have been even worse as Indians on the estates who showed any signs of ‘mental instability’ were quickly repatriated to India by the state.

In contrast, the incidence of suicide among Africans seems strikingly low. But again as Parle indicates, it is not clear whether the figures were accurate. Thus she notes that it was widely presumed at the time that there was little propensity toward ‘self killing’ among Africans, thus justifying little notice of the event when it happened. In addition she notes the low figures might derive from a strong reluctance among Africans to report deaths by suicide, or else be a product of the scattered rural residence of most Africans such that cause of death often went unreported for practical reasons. In still greater contrast, while Parle describes dramatic but anecdotal evidence of suicide and attempted suicide within the white population, there is remarkably little evidence of it in the documentary records. Parle suggests that given the criminal penalties involved, there may have been a greater reluctance to admit or to record such acts among the dominant colonial population. But she also notes that a growing concern for individual privacy in white society, and thus the destruction of records, may also have biased the available statistics.

As mentioned at the beginning and as the skeletal account of the chapter on suicide suggests, Julie Parle is an extremely careful and critical scholar. The notes that follow all of the central chapters are well over 100 items long. The volume is based on extremely detailed and imaginative archival research that has turned up vast amounts of data on the subject. Yet Parle is always prompt to point out what other – and perhaps contradictory – data she knows to be, or might well be, missing. She is constantly attentive to possible biases in the materials and to alternative interpretations of what she has found. At the same time, it is evident that Parle has read widely and makes good comparative use of historical and contemporary literatures in a variety of disciplines dealing with related issues across Africa and in other parts of the world. This is fine scholarship, but it also makes the book a pleasure to read for it does not present itself as authoritatively settled history. Rather, it engages the reader, and feels more like a conversation with Parle about what she believes she has found, but which is still potentially open to further interpretation.

Julie Parle has produced a fresh and compelling model for writing history. *States of Mind* offers a many-layered analysis of a struggle to understand,
appreciate, and deal with difference. At the same time it is critical to understanding how difference has been – and is still today – socially and politically constructed, shaped, and used.