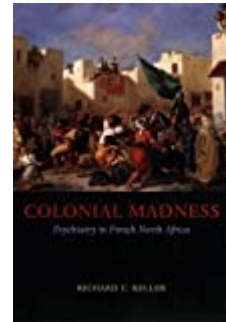


**Richard C. Keller.** *Colonial Madness: Psychiatry in French North Africa.* Chicago: University of Chicago Press, 2007. xii + 294 pp. \$25.00 (paper), ISBN 978-0-226-42973-1; \$70.00 (cloth), ISBN 978-0-226-42972-4.



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## **The Sword, the Plow, and the Couch: Psychiatry and History in Colonial North Africa and Postcolonial France**

In 2005, numerous historians in France and elsewhere waxed with indignation over Article 4 of Law No. 2005-158-23 that the French Parliament adopted on February 23, 2005. This law was intended to recognize officially the services rendered to France by French citizens from the colonies, particularly those repatriated from Algeria in 1962. Article 4 called on instructional programs in French educational establishments to present the history of French colonial activity in a positive light. Opposition to Article 4 became so intense that, in January 2006, President Jacques Chirac took steps to have it abrogated by the Constitutional Council. That most of the French academic community was opposed to Article 4 should not have surprised anybody given the long-standing anti-colonial stance of much of the French intelligentsia. Books and articles expounding on negative aspects of French colonialism abounded before the controversy generated by this legislation began.

After the passage of this law, additional books followed. Todd Shepard's *The Invention of Decolonization: The Algerian War and the Remaking of France* (2006)

stresses the illegal actions of the French Fifth Republic in stripping the eight million Algerian Muslims of their French citizenship as Algeria achieved independence and of ignoring the plight of the loyalist *harkis*. Gregory Mann Durham's *Native Sons: West African Veterans and France in the Twentieth Century* (2006) informs readers that in 1960 the French government froze the value of the war pensions that were being paid to African veterans of the French Army despite continued evocations of the French war debt owed to its former African colonies.

*Colonial Madness*, Richard C. Keller's revised 2001 Rutgers University doctoral dissertation, falls into the same genre. Keller concentrates on what had once been viewed as an unqualified success story, the creation of a comprehensive psychiatric care network in Algeria, Tunisia, and Morocco. He reveals the dark underside of this project that he believes was based on, so far as the native Muslim populations were concerned, crass ethnic and religious discrimination and sustained by aggressively somatic therapy that bordered on human experimentation. For Keller, psychiatry, as a branch of

medicine, “represents one instance of scientific collusion with a racist social and political regime,” while also offering “a privileged site for the study of the relationship between knowledge and power under colonialism” (p. 18).

Negative views of colonial psychiatry, particularly in the Algerian context, were given their widest publicity more than forty years ago by Frantz Fanon in *The Wretched of the Earth* (1961). Fanon excoriated the so-called Algiers School of Neuropsychiatry and its founder, University of Lyon-trained Antoine Porot (1876-1965), denouncing him and other members of the school for claiming that native Muslim Algerians were “‘born slackers, born liars, born robbers, and born criminals,’” because their brains were “‘dominated, like the inferior vertebrates, by the diencephalons ..., the cortical functions [of Algerian brains], if they exist[ed] at all, [being] very feeble.’”[1]

Nevertheless, Keller’s complex and detailed history of the perceptions and treatment of mental illness in the French-ruled Maghreb and in France reveals, without attempting a rehabilitation, that the *oeuvre* of Porot, his son Maurice Porot, and the Algiers School in general can claim a broader spectrum of accomplishments than Fanon allows. Keller aims to fill the space in North African medical and social history falling between an earlier Orientalist view of the Muslim world as a “space of insanity” and the postcolonial view that the brutality and irrational nature of the colonial encounter is what stimulated mental dysfunction and ultimate insanity among North Africans, particularly Algerian Muslims, but also among French people, both military and civilian, involved in the Algerian Independence War (p. 1). His task includes a thorough study of “those who developed the language of North African insanity most extensively” (p. 2).

The first chapter, “Pinel in the Maghreb: Liberation and Confinement in a Landscape of Sickness,” illustrates how Porot and his colleagues viewed themselves (and were viewed by others) as liberators of the mentally ill in the tradition of the French Revolutionary-era doctor, Philippe Pinel. They purportedly replaced the traditional North African madhouses (*maristans*), described as squalid prisons, with a network of modern mental health clinics and psychiatric facilities that, particularly in Algeria, surpassed for many years the level of mental health and psychiatric care provision available in metropolitan France. The capstone of the system was the Blida-Joinville Psychiatric Hospital in Algeria that was functioning by 1933. Similar hospitals had been opened in

Morocco (Berrechid) in 1920 and Tunisia (La Manouba) in 1922. Porot, the principal actor of the project, assimilated it to the post-World War I colonial development effort known as *mise en valeur*.

Chapter 2, “The Shaping of Colonial Psychiatry: Geographies of Innovation and Economies of Care,” focuses on the struggle to establish the three principal psychiatric hospitals, one for each territory, and to develop open or two-track systems of mental health care, particularly in Algeria. Keller shows that the pioneering ideas of Edouard Toulouse (1865-1947) about the open clinic treatment of mental illness, initially rejected in interwar metropolitan France, were adopted and implemented with relative ease in Algeria, Tunisia, and Morocco during the interwar years. Porot, indeed, had pioneered the open clinic idea in Tunisia by opening a small neuropsychiatric clinic at the *Hopital Civil de Tunis* (Tunis Civilian Hospital) in 1907. Although this clinic was reserved for Europeans, Keller makes clear that Porot viewed its creation “as an initial step toward the development of a comprehensive psychiatric network in the Maghreb and implored authorities to offer such services to Tunisia’s native population” (p. 61).

Later, after serving in Algiers in the psychiatric section of the Maillot Military Hospital during World War I, Porot began to teach at the Faculty of Medicine at the University of Algiers, becoming, in 1925, the holder of its first chair of neuropsychiatry. In this position, Porot collaborated successfully with his former professor from the University of Lyon, Jean Lepine, and two governors-general of Algeria, Maurice Viollette (1925-1927) and Jules Carde (1930-1935), both strong believers in colonial *mise en valeur*, to obtain the funding from the Algerian *Délégations financières* for constructing the hospital at Blida-Joinville and developing “an entire network of psychiatric care” for Algeria (p. 79). At the Blida-Joinville Hospital, patients were to be segregated not only by sex but also by ethnicity, the latter stipulation apparently unusual for the period. Despite all that has been written about racism and segregation in French Algeria, Keller notes that “most general hospitals in Algeria housed patients in an ethnically mixed environment” (p. 74). But, Porot feared that in a mental institution the tensions that characterized relations between settlers and native Algerians could “‘give rise to situations that we must avoid at all costs’” (p. 74).

How the new psychiatric system functioned in the three North African territories, reaching a kind of maturity in Algeria in the late 1930s, is the subject of chapter 3,

“Spaces of Experimentation, Sites of Contestation: Doctors, Patients, and Treatments.” The innovativeness and boldness of available treatments surpassed metropolitan possibilities. More Europeans, however, were treated in the new facilities than indigenous North Africans, and the methods of treatment for the two groups diverged significantly. For Europeans, treatment emphasized social intervention. Hospitalization was to be avoided as much as possible, and, when required, only for short stays and as a last resort. The treatments accorded to Muslims tended to entail long periods of hospitalization and to be much more intrusive and somatic than those for Europeans. The colonial situation, according to Keller, placed medical practitioners in a situation in which they were their own final authorities as to which treatments might be prescribed. As “settlers stood as representatives of European civilization in constant contact with indigenous populations,” it was important that in the view of the Muslim population the European population appear to be in excellent physical and mental health (p. 119). It would not do for Europeans to manifest neuroses or psychoses or to be alcoholic or syphilitic, for in such cases they risked setting a bad example for the Muslims who the Europeans were expected to dominate. Therefore, the Health Department of the Algerian government-general made a particular effort to expand the network of social and outpatient services, linking them to local general hospitals to better enhance the mental hygiene of the settler population.

Nevertheless, Keller cites cases of Muslims who sought French psychiatric treatment for themselves or their family members, believing that French methods had something worthwhile to offer. But, he also cites those who rejected French therapies in the belief that mental illness was caused by *jinn* needing to be exorcised. These patients considered that French doctors did not understand the nature of their ailments and how to cure them. They did not necessarily view the available treatments as a form of foreign oppression. Such mutual misunderstanding reflected a larger problem—the failure of any members of the Algiers School to make any effort to comprehend the socio-cultural milieus of North Africans and to understand how much the brutalities of the conquest and imposed French rule had traumatized the Algerian Muslim population.

These dual conceptions of treatment, “soft” for Europeans and “hard” for Muslims, reflected the increasingly rigid determinism of the categorization inherent in ethno-psychiatry. Chapter 4, “Between Clinical and Useful Knowledge: Race, Ethnicity, and the Conquest

of the Primitive,” details the implications and outcomes of this categorization. Well before the inception of the Algiers School, debates had been ongoing in France between those who believed that culture and psychology were determined by environmental factors, including climate, and those who believed that both were determined by race and ethnicity. French doctors and anthropologists had initially blamed the harsh Algerian climate, particularly the heat and the very bright sun, as well as Islam, for the propensity that they perceived in Algerian Muslims to become violently insane. However, as Algeria became increasingly earmarked for European settlement, notions of climatic pathogenicity had to be discarded. A new doctrine extolled the healthiness of the Algerian climate, particularly for the prevention and curing of tuberculosis, and claimed that native psychopathology was the result of innate ethno-racial characteristics.

According to Keller, an 1884 thesis by Alolphe Kocher, a medical doctor from Lyon, marked an important ideological shift. It argued that “violence among Arabs was chiefly ‘a matter of race’ and of culture” (p. 125). Never mind the fact that the research underlying Kocher’s conclusions, based on records of the Algiers *Cour d’assises* reflecting anti-Muslim bias, was seriously flawed. In metropolitan France, certain academics, who were far removed from any colonial context, were rejecting notions of racial and ethnic determinism. The philosopher Lucien Levy-Bruhl, for instance, who believed that “cultural and environmental factors” accounted for the backwardness of indigenous colonial subjects, argued in favor of their assimilation into French culture (p. 133).

Porot and his colleagues, however, asserted that race and ethnicity were irrevocably the prime determinants of psychology and mentality. During his service at the Maillot Military Hospital in Algiers, Porot examined military recruits and veterans drawn from settler as well as indigenous communities in North Africa plus a few having other origins—Senegalese Riflemen, for instance. His conclusions regarding the aptitude for military service of the ethnic groups inhabiting North Africa, particularly Algeria, appeared in two volumes that he and his colleague, Angelo Hesnard, produced, *L’Expertise mentale militaire* (1918) and *Psychiatrie de guerre: Etude clinique* (1919). The authors argued that the “psychological composition” of Muslim Algerians “prevented them from serving France as effective soldiers” and thus, by extrapolation, made them unfit for full assimilation into French society (p. 132).[2]

In 1925, Porot's first doctoral candidate, Don C  me Arrii, produced a particularly bigoted thesis, "The Criminal Impulsivity of the Indigenous Algerian." Arrii argued that the behavior of a few observed and institutionalized Muslim psychopaths reflected the behavior of the normal Muslim Algerian. Later, Porot and another student, Jean Sutter (1911-1998), reiterated and refined these allegations in a 1939 article published in *Sud medical et chirurgical*, "Le 'primitivisme' des indigenes Nord-Africains: Ses incidences en pathologie mentale," that so outraged Fanon. They were given renewed currency in the *Manuel Alphabetique de psychiatrie clinique, th  rapeutique et medico-legale* that Porot and nine colleagues, eight of them still practicing in Algeria, published in 1952. Keller suggests that the 1939 article responded to the failed Blum-Viollette reform that sought to give full French citizenship to several thousand Algerian notables while permitting them to retain their Muslim civil status. It insinuated that assimilation was impossible because the North African brain could not evolve to the French level. For this reason, "the essential structures for civilizing North Africans were ... penal rather than educational, medical rather than cultural" (p. 144). As Keller laments, these were the views not of obscure doctors working in the colonial periphery but mainstream specialists who wielded great influence in metropolitan France.

The chapter ends with a consideration of the possible links between the Algiers School and the psychological warfare campaigns implemented by the Fifth Bureau of the French Army in Algeria during the Independence War. Keller's ambiguous conclusion is that "although *action psychologique* produced no physical casualties ..., French colonial psychiatry ... deployed an intellectual violence that was in every sense the equal of colonialism's dehumanizing legal and social structure" (p. 159).

Leading to a discussion of the role of medicine in giving rise to a "range of iatrogenic forms of suffering," chapter 5—"Violence, Resistance, and the Poetics of Suffering: Colonial Madness between Frantz Fanon and Kateb Yacine"—details the ways in which North Africans and persons sympathetic to them understood and resisted this psychological violence (p. 161). Keller's review of Fanon's role, as both a reformer of psychiatric medicine and a theoretician of redemptive violence, demonstrates that Fanon was far from being the first or the only observer to blame the colonial system for inducing psychoses. Keller examines the insights of a number of French-trained North African psychiatrists and writers, the latter including the Algerians Jean Amrouche and, especially, Kateb Yacine, whose works *Nedjma* (1956) and

*Le Cercle des Repressailles* (1959) he analyzes in detail. For Keller, Kateb Yacine's intellectual itinerary most resembled Fanon's in that "Kateb's "analysis of colonial madness and psychiatry—written from the perspective of the patient and the nationalist—mirrors the psychiatrist Fanon's interrogation of the same phenomena" (p. 183).

Chapter 6, "Underdevelopment, Migration, and Dislocation: Postcolonial Histories of Colonial Psychiatry," reflects on some apparent absurdities, ironies, and continuities of the postcolonial situation. The reader learns that the indigenized North African mental health infrastructure deteriorated, in some respects, almost to the level of the pre-colonial *maristans*, despite the best efforts of indigenous medical staffs to maintain quality. Sleim Ammar, the French-trained Tunisian director of the Manouba Hospital (now named Er-Razi Hospital, after Mohammed ibn Zakariya Razi, a medieval Persian physician), while continuing to favor the medicalization of psychiatric care despite diminished resources, took steps to include traditional therapies for possession by *jinn* within institutional psychiatry. While Ammar might have lamented the heritage of the past, he has also come to praise the work of Antoine and Maurice Porot.[3] Keller also notes that some psychiatric procedures employed in France in treating patients from *emigre* populations are evocative of the teachings and practices of the ethno-psychiatry promoted by the Algiers School.

The debate about the pros and cons of assimilating Muslim North Africans into the fabric of the culture and civil society of the French Republic has continued in postcolonial France. Some negative arguments put forth by Algiers School practitioners resurfaced in metropolitan France, as illustrated by a 1980s propaganda poster depicting the typical Algerian immigrant in France as "Susceptible of: MURDER! RAPE! THEFT! BURGLARY!" (p. 208). The poster, in turn, reflects the anxieties that the French public and government faced at the time and are still facing today as they confront the reality that France has become a multicultural and multi-ethnic society. The views it expresses are countered not only by French liberals but also by North African professionals in various domains resident in France. Keller evokes the works of the Tunisian psychiatrist Essedik Jeddi, the fiction of the Moroccan writer Tahar Ben Jelloun, and a film directed by the Franco-Tunisian cineaste Abdellatif Kechiche, *La Faute    Voltaire* (2000). These works and others reveal the various ways in which imposed economic and social precariousness—not anything peculiar to the North African brain—generate psychoses among   migr  s.

But the problem of *immigrant* integration is fraught with ambiguities as Keller demonstrates via a discussion of the work of Tobie Nathan, the former director of the Georges Devereux [Mental Health] Center in Saint-Denis, a northern suburb of Paris with a large *émigré* population. Nathan attaches so much importance to the cultural environment of his patients that he ends up favoring the “ghettoization” of minority populations in the interests of preserving their cultural integrity and concomitant mental health (p. 218). His philosophy and procedures are evocative of the notions of “civilization psychoses” as identified by the Algiers School (p. 221).

Commenting that “it is perhaps in the shared legacy of France and the Maghreb—their ongoing relationship as a ‘transpolitical’ space and their common memories of the colonial experience—that psychiatry has been the most relevant,” Keller offers a short description of the October 2003 inaugural meeting of the Franco-Algerian Psychiatric Society organized around the theme of complex phenomena of post-trauma memory linked to the Algerian Independence War (p. 222). The meeting “revealed ... the extent and the persistence of ... psychic wounds” resulting from this war (p. 224). It also underscored how “psychiatry and its objects of inquiry offer privileged windows into the post-colonial experience” (p. 226).

Keller’s short concluding chapter, “Pills and Paving Stones, Centers and Margins,” describes the origins of antipsychotic drug treatment, particularly the development of chlorpromazine (thorazine). The point Keller makes is that this “most lasting innovation of the century” literally passed by the Algiers School even though the first trials of antihistamines as a means of reducing stress and the dangers of hypothermia in patients undergoing surgery took place in a French naval hospital at Bizerte in Tunisia in the early 1940s (p. 229). It seems that a psychiatrist—presumably a member of the Algiers School—who witnessed one of these early trials failed to draw the conclusion that these antihistamines, really proto-chlorpromazine in the process of being developed, might be helpful in treating psychiatric patients. Even though the Algiers School had “met the accepted gold standards of psychiatric science for much of the twentieth century,” this time, according to Keller, it struck out (p. 232).

While the interdisciplinary breadth and depth of this book is obvious and the total picture it presents is dazzling, this reviewer comes away a bit disappointed and suspicious that the dazzle may hide a number of

imperfections—minor ones to be sure—but ones that do add up. A problem of perception arises from Keller’s strong anti-colonial biases that, although understandable, are grounded in historical hindsight. Because *Algerie française* came to a violent end and has been subsequently treated as a myth, Keller fails to appreciate its previous strength. Until around 1959, *Algerie française*, to quote James McDougall, “was a massive edifice of the modern inscription of will into fact.”[4] Thus, if one accepts at face value the claim that Algeria, at least until that date, was an integral part of France and that many key political and military actors in France believed unquestionably that it was so, one will have a clearer understanding of why the French Army fought as implacably as it did during the Independence War—including the use of torture. One should never underestimate the force of the Jacobin conception of the French state, particularly when the perceived integrity of the state appears to be threatened.

If one accepts the reality as well as the centrality of Algeria as an integral part of France, the ascendancy of the Algiers School becomes less surprising, or, at least, its ascendancy cannot be viewed as the surprising example of a major academic and scientific school that arose in a colonial backwater. *Algerie française* was neither a colony, in the legal sense, nor a backwater; it was, for a while, part of the center. It was no more surprising for a school of neuropsychiatry to have arisen at the University of Algiers than for a school of mathematics to have arisen at the University of Nice. Of course, one can argue that the Algiers School received a particular impetus and filled a specific ethno-psychiatric niche because of the presence of a large subject population that could be studied and sometimes subjected to experimental treatments. But these unique conditions could not detract from the centrality of the school resulting primarily from its location in Algeria. One is reminded that while the Algiers School was developing, the Public Health Service of the United States, a country having undeniable settler origins, was sponsoring the infamous Tuskegee Syphilis Study (1932-1972). As the title of the study suggests, it was implemented in the metropole—in the center (but aimed at a *de facto* subject population)—not in the American colonial periphery, which at the inception of the project included the Philippine Islands as well as Puerto Rico.

In domains other than psychiatry, numbers of French-Algerians (*pieds noirs*) lived and worked as part of the “center” and continued to do so after the repatriation of most of them to metropolitan France in 1962. One

can cite a “who’s who” inventory of eminent settlers and ex-settlers including twenty ministers having served in French governments; two members of the Constitutional Council; forty-three deputies of the French parliament; eighteen members of the French Institute; five *College de France* professors; around one hundred CEOs, including the founders of Tati and Affelou; thirteen prefects; fifteen ambassadors; nine generals; eleven admirals; approximately one hundred professors of medicine; eleven university presidents; and two grand crosses, five grand officers, and one commander of the Legion of Honor.[5] To these luminaries, one can add the founders of the Bastos tobacco company, the Robert dictionary publisher, the philosopher and linguistic scholar, Jacques Derrida, and, finally, Marshal Alphonse Juin (1888-1967). One must not forget the long and influential political career of the sometime deputy from Oran, Eugene Etienne (1844-1921).

In the opinion of this reviewer, the most useful analogy referring to the French experience in Algeria is that of the English experience in Ireland (even though French rule in Algeria did not come anywhere near to lasting as long). This analogy not only discourages less than relevant comparisons with Indo-China, Senegal, and other tropical colonies as well as the protectorates of Tunisia and Morocco, but also forces one to confront the reality that the basic barrier between native Algerians and the French was religious—not racial—however much the terms “race” and “racism” are universally employed in describing Franco-Algerian tension and conflict. The Irish analogy seemed clear to certain French statesmen, like the Duke of Aumale and Emperor Napoleon III, in the early years of French involvement in Algeria. And, Ireland, too, was part of a “center,” that of the British Empire.

A clear aim of Keller’s study is to situate Fanon and Porot (and, in general, the Algiers School) with regard to one another. While, on the whole, Keller presents a clear picture of Fanon, one is surprised to find a major error and a strange insinuation in his account. Keller has been overly influenced by Fanon’s verdict about Porot and the Algiers School and is a bit vague as to who actually did what in this school. Perhaps, the Algiers School was never as solid an edifice as Keller (and Fanon) suggest. Twice in his book, Keller claims that, in the letter of resignation from his position at the Blida-Joinville Hospital that Fanon addressed in December 1956 to Robert Lacoste, the resident-minister and governor-general of Algeria, he renounced his French citizenship. This letter, however, which Fanon reproduced in his book *Toward*

*the African Revolution* (1988), includes no such renunciation. While French authorities may have attempted to strip Fanon of his French citizenship and Fanon did come to consider himself Algerian, it is doubtful that he ever made a formal renunciation of his French citizenship. On leaving Algeria in January 1957, Fanon and his family returned voluntarily to France, living there briefly in the suburbs of Paris. From there, he moved secretly to Tunis in early March 1957.

The allegation that Fanon’s “subjection to European racism hastened his death at age thirty-six from leukemia” seems surprising, even if it is not clear whether this insinuation is Keller’s or was made by one of Fanon’s biographers (p. 89). But having evoked the possibility of induced leukemia, Keller should have commented on whether or not the technical possibilities to induce this disease as a means of political assassination existed in the early 1960s.[6] And, there is also the question of Fanon’s mysterious relationship with Olie Iselin, the American diplomat in Tunis who arranged for his final hospitalization at the National Institute of Health in Bethesda, Maryland. It turns out that this so-called diplomat was a CIA case officer.[7]

How solid the Algiers School really was is not clear, despite the impression of solidity one gets from reading *The Wretched of the Earth*. Porot returned to France in 1946, his immediate successor as holder of the Chair of Neuropsychiatry at the University of Algiers, A. Manceaux, was never a psychiatrist or a researcher, and Sutter, Porot’s former student and academic heir in a certain sense, did not accede to this chair until 1958, four years before the end of *Algerie française*. According to Alice Cherki, a contemporary observer, by the early 1950s, Sutter, at that time a staff psychiatrist at the Mustapha Hospital in Algiers, was estranged from his colleagues.[8]

Like most authors dealing with French rule in North Africa, Keller adopts the terminology of race and racism in describing the opposition of the settlers and the Muslims despite the fact that almost all populations composing both groups were “white,” predominately of the “Mediterranean” type. What “real” racial differentiation was there? One wonders if Keller overlooked the possibility that the Algiers School racial characterization of the North African brain as having an overdeveloped diencephalon, while lacking a cortex, was meant to be taken allegorically, not literally. Keller never cites the results of any physical dissections of North African brains intended to examine the relative size and quality of the diencephalon and cortex. He does, however, quote one

French North African doctor, Victor Trenga, to the effect that the “‘brain of Arabo-Berbers is well made, constituted from a cerebral substance of good quality’” (p. 128). Moreover, as Keller indicates, Porot and Sutter recognized that “North Africans were not primitives,” (p. 141) that they “were among the least ‘primitive’ of France’s colonial subjects and were at least superficially far more assimilable and far more intelligent than other colonial populations” (p. 143). So, in fact, the problem was religious and cultural. But, the settlers did not wish to favor assimilation, because “it would undermine the notion of difference that validated French rule” (p. 143). Thus, it became necessary to racialize cultural and religious differences. Keller, however, does not have to adopt such categorizations and differentiations himself.

At times, Keller can be so intent on finding fault with French practices, particularly in Algeria, that he makes careless allegations and misuses his sources. For instance, he implies that there was a direct link between electroconvulsive therapy and the use of electricity as a means of torture during the Algerian Independence War, but he does not prove that this link existed. The two procedures, one legal and the other illegal, were intended for radically different purposes: electroconvulsive treatments were intended to cure mental illness; and torture by electric shock was intended as a means for extracting information by inflicting pain that would, hopefully, not do permanent physical damage to the body.

Keller’s speculations about the links between the Algiers School and the Fifth Bureau of the French Army in Algeria in charge of *action psychologique* are also inconclusive. “The outbreak of hostilities provided a critical opportunity for psychiatrists to enhance their commitment to the colonial state,” he writes (p. 152). However, he adds that “it is difficult to discern the extent to which the work of colonial psychiatrists informed psychological warfare programs,” but he concludes that, according to a 1959 secret memorandum, the Fifth Bureau “actively sought information about ... North African mentalities from key members of the Algiers School” (p. 154). In 1960, however, Porot and Sutter blamed the terrorist attacks by militants of the National Liberation Front (*Front de Liberation Nationale*–FLN) against settlers as “a pathological form of Arab ‘xenophobia,’” (p. 152) the result of “unfavorable attitudes.” (p. 156). Were Sutter and Porot alive today, one wonders how they would explain the acts of brutality that have been repeatedly committed in Algeria since 1992 by the *Groupe Islamique Armé* and other Muslim extremists as well as by the Algerian Army.

There are other inaccuracies. At least once in the book, Keller suggests that the French authorities banned Muslims from studying and practicing medicine. Yet, he cites the work of Muslim medical practitioners, including psychiatrists. Keller’s allegation is all the more surprising in that Fanon’s *Wretched of the Earth* includes the complaint that Algerian medical students studying at the University of Algiers prior to Algerian independence were forced to learn the theses of the Algiers School relative to North African criminality and inferior brain structure.[9] Muslim Algerians have been practicing medicine and other liberal professions in Algeria since the early twentieth century. One founder of the Young Algerian movement, Ould Hamida Benthami, was a medical doctor. Furthermore, Keller’s claim that a 1941 law prohibited the sale of alcoholic beverages in Algeria to indigenous Algerians is both surprising and doubtful, given that the source he cites is a 1943 article summing up one century of French psychiatry in Algeria that Porot published in *Annales medico-psychologiques*,[10] rather than a reference to the Official Bulletin of Algeria or some other official compendium.

Keller’s concluding argument that neuroleptics, the “most lasting innovation” in psychiatry of the twentieth century, “literally passed by the Algiers School” is somewhat forced (p. 229). True, the “lytic cocktail” that evolved into chlorpromazine was first successfully used on a psychotic patient at the Sainte-Anne [Psychiatric] Hospital in Paris in 1952, yet the original experimentation with antihistamines undertaken by Henri Laborit and Pierre Huguenard in the early 1940s did take place at a French naval hospital on the Bizerte naval base in pre-independence Tunisia. Although, as Keller indicates, a psychiatrist who witnessed the results with surgical patients of this treatment did not consider using the drug for psychiatric patients, the innovativeness of the two doctors, in what was, after all, a North African colonial context and which involved surgery on “tense, anxious, Mediterranean-type patients,” reflected an attitude and willingness to experiment on what one can safely assume were North Africans (p. 229). Thus, to some extent, the development of therapies based on the use of neuroleptics reflected the mindset and procedures of the Algiers School as Keller has described them. If it could be shown that such attitudes had a determining influence on the attitudes and practices of medical practitioners in other branches of the French medical corps in North Africa and that they influenced practices in metropolitan France, one might be able to argue that the Algiers School could claim much indirect credit for the inception

of the “pharmacological revolution that chlorpromazine and its successors initiated” (p. 228). Living until 1965 and continuing to do research and to write, particularly on questions of mental illness and the law, Porot would no doubt have been aware of the rise of the neuroleptics. Did he have nothing to say about them? Keller does not address this question.

Despite a few errors, inconsistencies, sometimes careless use of sources, and sometimes excessive editorializing about the evils of colonialism, this book is an intellectual and interdisciplinary *tour de force*. Its implications, however, are pessimistic. Aside from allegations that involuntary human experimentation on colonial subjects led to medical progress, the work of the Algiers School “met the accepted gold standards of psychiatric science for much of the twentieth century”; (p. 232) however, the state-of-the-art network of psychiatric care that arose in colonial North Africa, including Algeria, began to deteriorate even before the respective countries achieved independence. Today, the three main hospitals, Er-Razi (La Manouba) in Tunisia, Frantz Fanon (Blida-Joinville) in Algeria, and Berrechid in Morocco reflect conditions of extreme overcrowding, lack of resources, and severe deterioration. By default, the three countries, it seems, are reinventing the *maristans* of the precolonial era.

#### Notes

[1]. Frantz Fanon, *The Wretched of the Earth*, trans. Constance Farrington (New York: Grove Weidenfeld, 1963), 296, 301. The first quotation is probably derived from Porot’s “Notes de psychiatrie musulmane,” *Annales medico-psychologiques* 76 (May 1918): 377-384; and the second quotation is derived from Antoine Porot and Jean Sutter, “Le primitivisme des indigenes nord-africains: des incidences en pathologie mentale,” *Sud medical et chirurgical* (April 15, 1939): 226-241.

[2]. Not everybody agreed with this position, particularly French military specialists of the period. Notably, General Paul Azan, a prolific historian of the French conquest of North Africa, argued passionately for the recruitment of North African indigenous troops for the French Army. See Paul Azan, *L’Armee indigene nord-africaine* (Paris: Charles-Lauvazelle, 1925).

[3]. Sleim Ammar, “Antoine et Maurice Porot a Tunis,” *Psychologie medicale* 15 (1983): 1717-1718.

[4]. James McDougall, *History and the Culture of Nationalism in Algeria* (Cambridge: University Press, 2006), 72.

[5]. Rene Mayer, “Les Pieds-Noirs, tous des colons?” <http://www.algerianie.com/opinions.htm#valise> (accessed October 29, 2007).

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