Fanon and Medicine: An Intellectual Biography

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Introduction

By any measure, Frantz Fanon died before his time, at the age of 36. Arguably, Fanon also lived before his time. Born in 1925 in Martinique – at the time a French colonial possession – Fanon moved to France in the late 1940s to study medicine, attending Merleau-Ponty’s lectures and reading widely in philosophy, anthropology, and literature in his spare time. From the early 1950s until his death in 1961, Fanon would write some of the twentieth-century’s most nuanced and influential analyses of modern racism and colonialism, all the while practicing psychiatry at public hospitals in France and across North Africa. Tracing the contours of Fanon’s intellectual biography, this thesis explores the ways in which Fanon’s medical training and practice informed his groundbreaking insights into the political plight of the colonized.

Elements of Fanon’s interdisciplinary methodology inspired the rise of academic disciplines like Cultural Studies and Postcolonial Studies in the late twentieth century. Over the course of his brief career as a public intellectual, Fanon would attend with care to the relationship between culture and politics. In Black Skin, White Masks he argued that European comic books contributed to feelings of racial inferiority among the black children who read them in the Antilles. In A Dying Colonialism he chronicled the vital role that radio played in the Algerian revolution. And in The Wretched of the Earth, he criticized nationalist intellectuals for perpetuating archaic stereotypes about North African culture. In the late twentieth century, scholars such as Edward Said, Homi Bhabha, and Paul Gilroy would find the conceptual pillars of postcolonial studies – multiculturalism, transnationality, hybridity – sketched out in Fanon’s seminal writings.
At the time, however, these scholars had relatively little to say about Fanon’s transgressive integration of cultural concerns into medical theory, or about the extent to which Fanon’s vocation as a physician gave shape to the concepts and arguments that later postcolonial historians and literary critics would find so useful.

In the first decade of the twenty-first century, scholars such as Alice Cherki and Nigel Gibson published intellectual biographies of Fanon, which highlighted the importance of his psychiatric and psychoanalytic practice in the evolution of his philosophical and political thought. A practicing psychoanalyst who worked with Fanon in the late 1950s, Cherki pays particular attention to Fanon’s struggles and triumphs in the medical field and their refractions in his most influential publications. Gibson pursues a more philosophical line of argument, seeking to understand how Fanon’s psychoanalytic and psychiatric practice informed his understanding of the dialectics of history and revolution. Cherki’s biographical intentions are more pronounced than Gibson’s. Whereas Cherki’s book is a biography that occasionally participates in the exegesis and critique of Fanon’s published works, Gibson’s is a body of textual commentary and interpretation grounded in occasional references to important biographical facts. This thesis seeks to combine Cherki’s keen interest in Fanon’s development as a psychoanalyst and psychiatrist with Gibson’s sharp, interpretive readings of *Black Skin, White Masks, A Dying Colonialism, The Wretched of the Earth*, as well as Fanon’s short but significant essays pertaining to politics and psychiatry.

The following chapters present a chronological study of Fanon’s major works in relation to his evolving psychoanalytic and psychiatric practice, foregrounding his lifelong interests in philosophy, anthropology, literature, and other humanistic modes of
inquiry. Chapter One argues that, in *Black Skin, White Masks*, Fanon reads G. W. F. Hegel’s philosophy of history in light of Sigmund Freud’s psychoanalytic study of *Civilization and Its Discontents*, in the process critiquing both thinkers’ agonistic vision of historical change. Ultimately, Fanon re-imagines psychoanalytic practice as an affirmative, non-violent means of fostering social and political change. Chapter Two maps Fanon’s lifelong efforts to reform the state medical institution in the direction of contributing to the psychological and political liberation of the colonized. Unlike Michel Foucault, who would never abandon his skepticism vis-à-vis the merits of institutional medicine, Fanon seeks to transform the practice of medicine in the French colonies, seeing this project as a key tactic of anticolonial resistance. Chapter Three argues that Fanon’s provocative publication of a series of psychiatric case studies at the end of *The Wretched of the Earth* demonstrates not only his tireless commitment to caring for the mentally ill but also his insistence that certain kinds of medical knowledge should inform the political strategies of revolution and the management of its aftermath. It is in part due to the psychiatric testimony that Fanon chooses to include at the end of his final book that Homi Bhabha and Nigel Gibson understand Fanon as among the first intellectuals to conceptualize the nation as an inherently multicultural and variegated polity. Fanon saw medicine, psychiatry, and psychoanalysis not only as tools of colonial control, but also as potential weapons in the struggle against racism and colonialism.

Fanon’s suspicions about the ostensibly objective and disinterested perspective of the medical sciences as well as his prescient desire to reach across entrenched disciplinary boundaries should inform twenty-first century modes of knowledge production at the university. The ascendancy of the medical humanities, inspired largely
by the work of Michel Foucault and Félix Guattari, is a promising sign. Yet harried judgments about Fanon’s so-called sermons on violence in *The Wretched of the Earth* – which obscure the fact that he cared for those traumatized by revolutionary bloodshed until he succumbed to leukemia in 1961 – perhaps account for Frantz Fanon’s low profile in the medical humanities, despite the fact that he anticipates many of its intellectual concerns. The research that I have conducted in the course of writing this thesis has led me to believe that Fanon was not only a forward-thinking cultural critic and postcolonial visionary, but also a medical practitioner who believed that his role as a physician was to create a world healthier and more equitable than the one he was born into.
Abbreviations for Fanon’s Works

English Editions


French Editions


Love, Affirmation, and Psychoanalysis as Political Action

As a fourth-year student in psychiatric medicine at the University of Lyon, Frantz Fanon “caused quite a scandal”\(^1\) when he turned in an early manuscript of *Black Skin, White Masks* as his doctoral thesis. Fanon’s advisor was Professor Jean Dechaume, a psychosurgeon who, when diagnosing patients, “attributed all psychiatric conditions to organic origins.”\(^2\) Drawing on psychoanalysis, philosophy, and literature, Fanon’s “sociodiagnostic” methodology in *Black Skin* displeased Dechaume, who rejected the thesis outright (BS xv). Intent on graduating, Fanon “decided to submit an altogether different and indisputably academic project on Friedrich’s ataxia,” a hereditary neurological disorder.\(^3\) This approach satisfied Dechaume, and Fanon received his degree as a doctor of medicine in 1951. Fortunately, however, Fanon did not burn his original manuscript, instead sending it to Francis Jeanson, editor at the Editions du Seuil. Jeanson published Fanon’s text as *Peau noire, masques blancs* in 1952, and would later publish Jacques Lacan’s *Seminars*, among other key works in psychoanalysis and philosophy.

Fanon’s groundbreaking study of racism is indebted to psychoanalysis in many ways. Fanon borrows his notion of inferiority from Alfred Adler, draws on Carl Jung’s concept of the “collective unconscious” in order to explain the relationship between European culture and racial discrimination, and, in a two-page footnote, employs Lacan’s “mirror stage” to illustrate why the Antillean imagines himself as white. Ronald A. T. Judy argues that, as a whole, *Black Skin* “bears a striking resemblance to Freud’s … *Civilization and Its Discontents*. That is to say it interprets the sociogenesis of

\(^2\) Ibid., 17.
\(^3\) Ibid., 18.
psychopathology on the basis of ontogenetic analysis.” Most often, autobiography mediates Fanon’s logical progression from the ontogenetic to the sociogenetic: Fanon frequently draws conclusions about “the colonized” on the basis of his own experiences growing up in the French Antilles. Judy’s argument also explains the appearance of brief case studies in *Black Skin*. For example, Fanon appends the case history of “Mademoiselle B” to the end of “The Black Man and Psychopathology.” Fanon’s patient exhibits symptoms of a nervous disorder; using waking-dream therapy, Fanon determines that she is terrified of “the black man,” whom she imagines as a “half-naked” cannibal intent on devouring Europeans (BS 180, 181). That this myth has penetrated into the unconscious constitutes, for Fanon, proof that “European culture has an imago of the black man that makes him responsible for every possible conflictual situation” (BS 146). Like Freud, Fanon applies the insights gained in clinical practice to the diagnosis of larger cultural phenomena.

In Freud and his followers, Fanon found a model for a more integrated intellectual approach to clinical theory and practice, one that could be traced back to the physician-humanists of the Renaissance. Like Freud, Fanon privileged evidence and modes of argument drawn from various academic disciplines, a tendency that that doctors like Jean Dechaume increasingly barred from the clinic. The arguments in *Civilization* and *Black Skin* often rely on literary, anthropological, and philosophical evidence. In *Civilization*, Freud elaborates his concept of the death-drive – on which his broader argument hinges

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5 “Nous disons que la culture européenne possède une *imago* du nègre responsable de tous les conflits qui peuvent naître” (PN 136).
almost entirely – by quoting at length from Goethe’s Faust.\(^6\) Other literary allusions include Voltaire’s Candide, whose allegorical ending Freud cites as an archetypal example of sublimation,\(^7\) and Mark Twain’s The First Melon I Ever Stole, which serves to illustrate the role the super-ego plays in the exercise of conscience.\(^8\) Totemic cultures, which Freud first explored in Totem and Taboo, serve as the starting point for his analysis of the roles that love and violence play in the development of human civilization.

Cherki’s biography of Fanon reveals that he understood the study of the humanities and social sciences as a fundamental component of his medical education. Fanon frequently read poetry, and “tried his hand at dramatic writing,” resulting in “a number of unfinished works as well as two completed plays.”\(^9\) In Black Skin, Fanon turns to the novels of Mayotte Capécia and René Maran, as well as various comic books and animated films, in order to illustrate the inferiority and abandonment complexes that haunt the French Antilles. Fanon would also read “Lévi-Strauss, Mauss, Heidegger, Hegel, as well as Lenin and the young Marx” in between shifts as an intern at Lyon’s Grange-Blanche Hospital.\(^10\) In Black Skin, Fanon mobilizes his anthropological knowledge in order to expose the flaws in Octave Mannoni’s ethnopsychiatric study of the Malagasy’s “so-called dependency complex [prétendu complexe de dépendance]” (BS 64; PN 67).

Whereas Mannoni maintains that the Malagasy’s “dependency complex” derives from essential flaws in his personality, Fanon argues that the Malagasy’s behavior is a consequence of the social and economic conditions violently imposed by European

\(^7\) Ibid., 24.
\(^8\) Ibid., 86.
\(^9\) Cherki, Frantz Fanon: A Portrait, 16.
\(^10\) Ibid.
colonialists. Moreover, the philosophical method of Jean-Paul Sartre – especially his phenomenology of anti-Semitism – serves as a heuristic in Fanon’s diagnosis of the etiology of the alienation of the black man. And in the last chapter of Black Skin, “The Black Man and Recognition,” Fanon turns to G. W. F. Hegel’s philosophy of history in his analysis of the putatively pervasive nature of neurosis on the part of “the black man.”

Fanon questions the reading of Hegel that was then dominant in French intellectual circles, one that relied on a universalizing model of human subjectivity to explain historical rupture. His re-reading of Hegel grew out of and fed into Fanon’s critical engagement with Freudian ideas about the relation between history and human subjectivity. For Fanon, Hegel’s master-slave dialectic does not offer a guide to contesting modern colonialism because of the historically unprecedented ways in which colonial subjects participate in their own exploitation. Educated into a grotesque misrecognition, the colonial subject becomes his own other in a master-slave battle waged against the self. Fanon elaborates this analysis of Hegel through his critique of Freud’s explanations of the socially binding nature of certain kinds of aggression. Convinced that neither Hegel’s ontology of negation nor Freud’s discussion of the strategic sublimation of aggression would lead to political liberation, Fanon invests another key term in Freud’s Civilization – love – with revolutionary potential. Ultimately, Fanon charges psychoanalytic practice with the responsibility of mobilizing a politics of affirmation against the racist ideology and false consciousness propagated by twentieth-century colonialism.
Hegel and History

As a student in Lyon between 1945 and 1951, Fanon encountered a universalizing interpretation of Hegel’s philosophy of history produced, in large part, by two Marxist scholars: Jean Hyppolite and Alexandre Kojève. The clearest evidence that this perspective influenced Fanon is his footnote citing Hyppolite’s translation of Hegel’s *Phenomenology of Spirit in Black Skin, White Masks* (PN 176). Fanon does not refer directly to Kojève; however, he returns multiple times to the work of J.P. Sartre and Jacques Lacan, who both attended Kojève’s influential seminar on Hegel in the 1930s. The imprint of Kojève’s Hegel is particularly visible in concepts like Lacan’s mirror stage, which Fanon engages at length. Furthermore, Fanon’s capitalized and italicized reference to “Désir” in his commentary on the *Phenomenology* recalls Kojève’s *Introduction to the Reading of Hegel*, which breaks French grammatical norms by systematically capitalizing this noun (PN 176). Whereas Kojève envisions Desire as the universal impetus for historical progress, Fanon critiques Kojève’s theory on the basis of the particular socio-historical contingencies of colonialism.

Kojève’s conception of history begins with the notion that Desire is the source of all human action, a concept that he defines as the negation of nature:

“Born of Desire, action tends to satisfy it, and can only do so by the ‘negation,’
the destruction, or at least the transformation, of the desired object. … Thus, all
action is ‘negating.’”\(^{11}\)

When Desire encounters a “natural object,” like an animal, its transformation into food and the subsequent consumption thereof constitute the negating action. However, when

Desire encounters a human being, that is, another Desire, it must negate or at least transform that Desire. The human being, therefore, risks its life upon encountering another – thereby negating its survival instinct – in order to demand recognition of its Desire. The other must either recognize the first or risk its own life in order to demand recognition. But the other cannot risk its own life, for if he perishes “with him disappears that other Desire toward which Desire must be directed in order to be a human Desire.”\(^\text{12}\)

So both must live. For Kojève, this compromise conditions a particular social situation in which “the one must fear the other, must give in to the other, must refuse to risk his life for the satisfaction of his desire for ‘recognition.’” He must give up his desire and satisfy the desire of the other: he must ‘recognize’ the other without being ‘recognized’ by him.\(^\text{13}\) Kojève calls the one who relinquishes his Desire the “Slave,” and the one whose Desire is recognized, the “Master.”

Kojève insists that the dialectic between an abstract Master and his abstract Slave provides a model for the interpretation of human history.\(^\text{14}\) Following Marx, moreover, Kojève privileges the historical role of the Slave: “If idle Mastery is an impasse, laborious Slavery, in contrast, is the source of all human, social, historical progress. History is the history of the working Slave.”\(^\text{15}\) This is because, Kojève argues, only the Slave has the Desire to restart the fight for recognition by risking his life: “If the Master has no desire to “overcome … himself as master (since this would mean, for him, to become a Slave), the slave has every reason to cease to be a slave.”\(^\text{16}\) In other words, only the Slave desires to take the action of negating himself as a Slave. Furthermore, Kojève

\(^{12}\) Ibid., 8.
\(^{13}\) Ibid.
\(^{14}\) Ibid., 10.
\(^{15}\) Ibid., 20.
\(^{16}\) Ibid., 21.
argues, the Slave is in a privileged position to effect historical change because of his unique capacity for work, that is, the active negation or transformation of Nature. The Slave, therefore, has both the Desire and the ability to make historical change: “If the fear of death is the *sine qua non* of historical progress, it is solely the Slave’s work that realizes and perfects it.”\(^\text{17}\) In Europe’s industrial twentieth-century, Kojève’s optimistic view on the relationship between labor and historical progress proved highly influential. Many prominent and politically minded intellectuals – often Kojève’s own students – were happy to imagine the relationship between the bourgeoisie and proletariat as one between Master and Slave.

Fanon critiques these readings of Hegel on the grounds of their ahistoricity, thus anticipating twenty-first century scholars who insist that Hegel was aware of the historical contingency of his own argument and terminology. In his 2004 essay, “What Hegel’s Master/Slave Dialectic Really Means,” Andrew Cole argues that Hegel’s view of history was deeply influenced by the fact that he was living in and writing about a society that was still predominantly feudal.\(^\text{18}\) Cole argues that Hegel's historical judgments about feudalism are embedded in his language. In the *Phenomenology*, for example, Hegel opposes *der Herr*, meaning “lord,” to *der Knecht*, meaning “bondsman” or “serf.”\(^\text{19}\) Hyppolite’s influential translation, Cole argues, disregards the consistent and historically precise way in which Hegel employed his terms: when Hegel mentions the *Sklave* (“slave”), for example, in *The Philosophy of Right*, it is in specific reference to the laws

\(^{17}\) Ibid., 23.


\(^{19}\) Ibid., 578–579.
of slave-holding Rome.\textsuperscript{20} Merging the Roman \textit{Sklave} and the Feudal \textit{Knecht} into an abstract \textit{esclave} subservient to an abstract \textit{maître}, Kojève and Hyppolite eliminate the attention to historical and cultural difference that Cole argues is central to Hegel’s philosophy. Susan Buck-Morss emphasizes a different aspect of nineteenth-century politics and culture in her \textit{Hegel, Haiti, and Universal History} (2009), arguing that Hegel not only read about the slave revolt that became the Haitian Revolution in newspapers like \textit{Minerva} but that he also: “elaborated his dialectic of lordship and bondage deliberately within this contemporary context.”\textsuperscript{21} Ultimately, Buck-Morss’ historicist analysis displays a theoretical affinity with Kojève’s abstract idealism by emphasizing the role that “recognition” played in the Haitian slaves’ success:

The actual and successful revolution of Caribbean slaves against their masters is the moment when the dialectical logic of recognition becomes visible as the thematic of world history, the story of the universal realization of freedom.\textsuperscript{22}

In conclusion, Buck-Morss demonstrates her belief that Hegel’s dialectic can be applied to other historical contexts by urging fellow and future scholars to “juxtapose” what she reads as Hegel’s analysis of the Haitian Revolution with other moments in the history of decolonization.\textsuperscript{23}

If Fanon anticipates twenty-first-century scholars’ interest in historicizing readings of Hegel, he would have disagreed with some of their conclusions. For example, Fanon’s critique of the French Hegelians diverges from Buck-Morss’ starkly in that Fanon differentiates the blacks who successfully overthrew their masters in the Haitian

\bibitem{ibid} Ibid., 581.
\bibitem{buck} Susan Buck-Morss, \textit{Hegel, Haiti, and Universal History} (Pittsburgh, PA: University of Pittsburgh Press, 2009), 50.
\bibitem{ibid2} Ibid., 59–60.
\bibitem{ibid3} Ibid., 75.
Revolution from the blacks living under colonial rule in the mid-twentieth century. Unlike the Haitian slave, the modern colonial subject did not have to risk his life in a fight to the death. Aside from Haiti, in France and the French colonies, the black man was “set free by the master [a été libéré par le maître]” (BS 194; PN 178). Yet, this did not constitute “recognition [reconnaissance]” because, according to Fanon, “the black man was acted upon [le Noir a été agi]” (BS 194; PN 178). There was no revolution; nothing turned over; there was no dialectical reversal. “The black man did not become a master” (BS 194). Instead, there was a paradigm shift in social relations: “When there are no more slaves, there are no masters” (BS 194).24 Fanon argues that colonial societies are distinct from all other Hegelian models, whether elaborated in feudal, Haitian, or abstract historical contexts.

In Black Skin, White Masks, Fanon turns to Freudian psychoanalysis in order to develop a concept of politics and history distinct from the French Hegelians’. Drawing on Freud's discussion of “love” in Civilization and Its Discontents, Fanon juxtaposes the Freudian concept to Kojève’s “Desire,” in the process defining revolutionary action in terms of affirmation rather than negation. At the same time, Fanon rejects Freud’s argument in Civilization that engaging in nationalist or ethnic rivalries is a politically valuable means of sublimating the aggressive impulse. In fact, Black Skin questions Freud’s nonchalance towards racial scapegoating, as well as his insistence that psychoanalysis cannot lead to lasting political and societal change in the world.

24 “Le nègre n’est pas devenu un maître. Quand il n’y a plus d'esclaves, il n’y a pas de maîtres” (PN 178).
Freud and the Sublimation of Aggression

In Civilization and Its Discontents, Freud begins his analysis of human society with the role that the pleasure principle plays in determining the family unit: “One may suppose that the founding of families was connected with the fact that a moment came when the need for genital satisfaction no longer made its appearance like a guest who drops in suddenly, and, after his departure, is heard of no more for a long time, but instead took up its quarters as a permanent lodger.” This “primitive family” does not constitute civilization for Freud because the will of one individual, the father, overpowers all others. Although the impulse for sexual satisfaction may have first brought people together, it is the degree to which “the members of the community restrict themselves in their possibilities of satisfaction” that keeps them together. The first sexual restriction, Freud argues, is “the prohibition against an incestuous choice of object.” Later, in “Western European civilization, … the choice of an object is restricted to the opposite sex, and most-extra genital satisfactions are forbidden as perversions.” The impulse for sexual satisfaction is also sublimated in the form of “aim-inhibited love,” which aids the growth of civilization in the form of “positive feelings between parents and children, and between the brothers and sisters of a family” as well as friendships. Despite the sublimating possibility of friendship, Freud argues that the repressive demands that civilization places on sexuality remain a source of hostility between human beings. Although love may constitute the foundation of civilization, it also has the possibility to destroy civilization if not properly regulated.

26 Ibid., 49.
27 Ibid., 59.
28 Ibid., 60.
29 Ibid., 58.
Whereas Freud emphasizes the coherence and importance of the family unit, Fanon argues that, under modern colonialism, the Oedipal complex is taken out of the familial sphere and institutionalized through the legal apparatus and through the indoctrination of children into racist ideology. As a result, colonial law literalizes the threat of castration while colonial subjects identify themselves with the very agency that issues this threat and holds them in contempt. “Historically,” Fanon writes, “the Negro found guilty of sleeping with a white woman was castrated” (BS 53). Even in Fanon’s time, “As regards the black man everything in fact takes place at the genital level”; Europe fears that “if we’re not careful they’ll inundate us with little mulattoes” (BS 135).

So Jean Veneuse, the main character of René Maran’s novel, *Un homme pareil aux autres*, cannot marry Andrée Marielle, the white woman he loves. For, she is told, “associating with anybody of that race is disgracing yourself” (BS 47). And, according to her autobiographical novel, Mayotte Capécia feels permanently inferior to André, the white man of her dreams, since the “colored woman is never quite respectable in the eyes of a white man” (BS 25). In pursuit of love, Veneuse and Capécia “[strive] for lactification” (BS 29). They try, in vain, to eliminate the black within. In order to direct attention away from the color of their skin, Capécia brags about her “white grandmother [*une grand-mère blanche*]” and “white blood [*du sang blanc*]” and Veneuse asserts his mastery of European culture and French-issued birth certificate (BS 28, 29; PN 37).

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30 “Historiquement, nous savons que le nègre coupable d’avoir couché avec une Blanche est castré” (PN 58).
31 “Vis-à-vis du nègre, en effet, tout se passe sur le plan génital. … Ils ont tellement d’enfants qu’ils ne les comptent plus. Méfions-nous, car il nous inonderaient de petits métis” (PN 127-128).
32 “C’est déchoir que frayer avec quelque individu que ce soit de cette race” (PN 53).
33 “Seulement une femme de couleur n’est jamais tout à fait respectable aux yeux d’un Blanc” (PN 34).
34 “C’est vers la lactification que tend Mayotte” (PN 38).
doing so, however, both demonize blackness, invariably causing a “devaluation of self [la non-valorisation de soi-même]” (BS 54; PN 59). “Authentic love,” Fanon argues, “remains impossible as long as this feeling of inferiority … has not been purged” (BS 25). As Veneuse and Capécia demonstrate, however, purging the colonized’s feeling of inferiority is in fact the opposite of purging the colonized of his blackness. Political equality is not a matter of the black man “[elevating] himself to the white man’s level [s’élever jusqu’au Blanc]” Fanon writes (BS 63; PN 66). “We shall see that another solution is possible. It implies restructuring the world” (BS 63).

For Fanon, Capécia and Maran’s novels illustrate how, under colonialism, the aggressive impulse is channeled inward – and internalized by the colonized subject – rather than outward toward the colonizer in the way that Hegelian accounts of historical struggle would suggest. Moreover, Black Skin, White Masks offers a new perspective on Freud’s argument that certain strategic externalizations of the aggressive impulse play a key role in social cohesion. The essence of Freud’s famous hypothesis is that: “[I]t is always possible to bind together a considerable number of people in love, so long as there are other people left over to receive the manifestations of their aggressiveness.” Historically, what Freud calls “the narcissism of minor differences” would manifest in the form of fraternal “feuds” between the “Spaniards and Portuguese, … North Germans and South Germans, the English and Scotch.” Even in light of “all the massacres of the Jews in the Middle Ages,” Freud goes on to describe this scapegoating mechanism as “a

35 “Il s’agit, pour nous, dans ce chapitre consacré aux rapports de la femme de couleur et de l’Européen, de déterminer dans quelle mesure l’amour authentique demeurerà impossible tant que ne seront pas expulsés ce sentiment d’inferiorité ou cette exaltation adlérienne” (PN 33).
36 “Nous verrons qu’une autre solution est possible. Elle implique une restructuration du monde” (PN 66).
37 Freud, Civilization and Its Discontents, 72.
convenient and relatively harmless satisfaction of the inclination to aggression.”  

As Freud himself observed, aggression binds groups only insofar as any two members of any two “feuding” groups consent to a reciprocal sublimation of aggression. Freud’s critiques of Christianity’s injunction to “love they neighbor as thyself,” of fascism and Nazism, and of Communism’s utopian desires all hinge on the question of what would happen to those movements if the infidels, undesirables, and bourgeoisie were ever successfully “wiped out.” Since “neither Freud nor Adler nor even the cosmic Jung took the black man into consideration in the course of his research,” Fanon takes it upon himself to distinguish colonialism from “the narcissism of minor differences” and associate it with other destructive ideologies by exposing the forces that render the black man without “ontological resistance in the eyes of the white man” (BS 90).

Black Skin reveals the ways in which the colonial education system and culture industries designate the black man as the target of the hostile and aggressive impulses that “come to light” when the death-drive “is diverted towards the external world.” As the novels of Mayotte Capécia and René Maran demonstrate, this problem is double because it is not only the Frenchman but also the colonized subject who channels his aggression towards the black man. Through “education” the colonized subject learns to aggress, unconsciously, against his very self. In “the Tarzan stories, the tales of young explorers, the adventures of Mickey Mouse,” Fanon writes, “the Wolf, the Devil, the Wicked Genie, Evil, and the savage are always represented by Blacks or Indians” (BS 124-125). “Since one always identifies with the good guys,” Fanon continues, “the little

38 Ibid.
39 Ibid., 73.
40 “Le Noir n’a pas de résistance ontologique aux yeux du Blanc” (PN 89).
41 Freud, Civilization and Its Discontents, 78.
black child, just like the little white child, becomes an explorer, an adventurer, and a missionary ‘who is in danger of being eaten by the wicked Negroes’” (BS 125). As for education:

In the Antilles, the black schoolboy who is constantly asked to recite ‘our ancestors the Gauls’ identifies himself with the explorer, the civilizing colonizer, the white man who brings truth to the savages, a lily-white truth. The identification process means that the black child subjectively adopts a white man’s attitude. He invests the hero, who is white, with all his aggressiveness—which at this age closely resembles self-sacrifice: a self-sacrifice loaded with sadism. … As a schoolboy I spent hours discussing the supposed customs of the Senegalese savages. In our discussions, there was a lack of awareness that was paradoxical to say the least. The fact is that the Antillean does not see himself as Negro: he seems himself as Antillean. The Negro lives in Africa. Subjectively and intellectually the Antillean behaves like a white man. But in fact he is a black man. (BS 126)

Eventually, these images, stories, and histories crystallize in the form of what Fanon identifies as Europe’s culturally-constructed “collective unconscious” of racist myth,

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42 “Les histoires de Tarzan, d’explorateurs de douze ans, de Mickey, et tous les journaux illustrés, tendent à un véritable défolement d’agressivité collective. … Et le Loup, le Diable, le Mauvais Génie, le Mal, le Sauvage sont toujours représentés par un nègre ou un Indien, et comme il y a toujours identification avec le vainqueur, le petit nègre se fait explorateur, aventurier, missionnaire ‘qui risque d’être mangé par les méchants nègres’ aussi facilement que le petit Blanc” (PN 119).

43 “Aux Antilles, le jeune Noir, qui à l’école ne cesse de répéter ‘nos pères, les Gaulois,’ s’identifie à l’explorateur, au civilisateur, au Blanc qui apporte la vérité aux sauvages, une vérité toute blanche. Il y a identification, c’est-à-dire que le jeune Noir adopte subjectivement une attitude de Blanc. Il charge le héros, qui est Blanc, de toute son agressivité, — laquelle, à cet âge, s’apparente étroitement à l’oblativité : une oblativité chargée de sadisme. … Etant écolier, nous avions pu discuter pendant des heures entières sur les prétendues coutumes des sauvages sénégalais. Il y avait dans nos propos une inconscience pour le moins paradoxale. Mais c’est que l’Antillais ne se pense pas Noir ; il se pense Antillais. Le nègre vit en Afrique. Subjectivement, intellectuellement, l’Antillais se comporte comme un Blanc. Or, c’est un nègre” (PN 120).
symbolism, and stereotype (BS 165-166). In colonialism, the image of the black man represents “bad instincts [des mauvais instincts]” “sin [le péché]” “the dark side of the personality [l'archétype des valeurs inferieurs]” and “the essence of evil [le principe du mal]” for both the white man and the black man – that is, himself (BS 164, 166, 167; PN 151, 153). Thus, Fanon laments, “it is normal for the Antillean to be a negrophobe [il est normal que l’Antillais soit négrophobe]” (BS 168; PN 154).

Psychoanalysis as Political Action

At the end of Civilization and Its Discontents, Freud argues that psychoanalysis can offer no decisive solution to the perennial human problems of violence, inequality, and discrimination. Yet, in Black Skin, White Masks, Fanon understands psychoanalysis as a crucial part of the politics of decolonization.44 Reading Freud’s Civilization through the existentialist thought of Sartre’s Being and Nothingness, Fanon suggests that human beings have some choice over the impulses that they submit to:

Man moves toward the world and his kind. A movement of aggressiveness, engendering servitude or conquest; a movement of love, a gift of self, the final stage of what is commonly called ethical orientation. Every consciousness seems to be able to express these two elements simultaneously or alternatively. (BS 24, translation modified)45

Fanon argues that the psychoanalyst has not only the intellectual ability to distinguish the loving impulse from the aggressive impulse but also the political responsibility to

44 Freud, Civilization and Its Discontents, 110–112.
45 “L’homme est mouvement vers le monde et vers son semblable. Mouvement d’agressivité, qui engendre l’asservissement ou la conquête; mouvement d’amour, don de soi, terme final de ce qu’il est convenu d’appeler l’orientation éthique. Toute conscience semble pouvoir manifester, simultanément ou alternativement, ces deux composantes” (PN 33).
encourage his patient to move toward love rather than aggression. For Fanon, psychoanalytic therapy should lead the patient to realize the destructive ways in which colonial society conditions him to direct his aggression toward himself. Instead of guiding his patient to direct his aggression towards the colonist – in hopes of enabling the “narcissism of minor differences” – Fanon offers a less agonistic vision of revolutionary politics:

We said in our introduction that man was an affirmation. We shall never stop repeating it. Yes to life. Yes to love. Yes to generosity. But man is also a negation. No to man’s contempt. No to the indignity of man. To the massacre of what is most human in man: freedom. (BS 197)\(^{46}\)

Achieving the psychological and political disalienation of the black man requires saying “no” to the theory of history and politics proposed by the French Hegelians and, in many ways, the one offered by Freud in Civilization and Its Discontents. For Fanon, psychoanalysis provides a means of transforming a colonial society of dehumanizing negation and aggression and into a post-colonial society of mutual affirmation and love:

My patient is suffering from an inferiority complex. … If he is overcome to such a degree by a desire to be white, it’s because he lives in a society that … proclaims the superiority of one race over another. … What emerges then is a need for combined action on the individual and the group. As a psychoanalyst I must help my patient to ‘consciousnessize’ his unconscious, to no longer be

tempted by a hallucinatory lactification, but also to act along the lines of a change in the social structure. (BS 80)\(^47\)

Psychoanalysis guides man towards action only by “maintaining by in his circularity the respect of the fundamental values that make the world human [en maintenant dans sa circularité le respect des valeurs fondamentales qui font un monde humain]” (BS 197; PN 180). For Fanon, the “fateful question” is not, as Freud argues, one of controlling aggression but one of fostering love.\(^48\)

These largely neglected humanist strains of *Black Skin, White Masks* contradict what Lou Turner calls the “hegemonic” understanding of Fanon in the contemporary academy as an “apostle of violence.”\(^49\) Following Sartre, whose preface to *The Wretched of the Earth* glorifies the role violence plays in Fanon’s final book, many scholars have characterized Fanon as a rabble-rouser and militant firebrand. In order to contextualize and ultimately rethink the place of violence in *The Wretched*, Chapter Three will highlight the attention that Fanon devotes in his writing as well as his medical practice to the negative psychological and emotional consequences of decolonial warfare. As early as *Black Skin*, however, which Fanon finished before moving to Algeria in 1953, the passion with which he returns to the concepts of “love” and “affirmation,” even in the face of the humiliating aggression and negation of colonial racism, suggests at least a

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\(^47\) “Mon patient souffre d’un complexe d’infériorité. … S’il se trouve à ce point submergé par le désir d’être blanc, c’est qu’il vit dans une société qui … affirme la supériorité d’une race. … Ce qui apparaît alors, c’est la nécessité d’une action couplée sur l’individu et sur le group. En tant que psychanalyste, je dois aider mon client à conscienciser son inconscient, à ne plus tenter une lactification hallucinatoire, mais bien à agir dans le sens d’un changement des structures sociales” (PN 80).

\(^48\) Freud, *Civilization and Its Discontents*, 111.

keen interest in non-violent methods of political action, one that grows out of his understanding of the ethical mandate of the psychoanalyst and the physician.

Chapter Two chronicles Fanon’s efforts to reform other, non-psychoanalytic forms of medicine and psychiatry that he realized were systematically deployed in the service of colonialism. Fanon's mid-career writing poses the question of how medical knowledge and practice might contribute to the politics of decolonization. As he did in *Black Skin, White Masks*, Fanon will continue to adapt elements of Freud’s thought to reflect on the lived experience of the black man under colonialism, and, increasingly, on the complicity of physicians in France’s violent exploitation of its colonial possessions. Fanon’s later works aim to strip the medical institution and medical practice of the racist prejudices that prevent the colonized from realizing the public health and quality of life benefits that Fanon believes European medicine can offer.
In a 2007 essay, Richard C. Keller suggests a connection between Frantz Fanon’s political and philosophical writings and his medical training and practice: “In addition to being a founder of postcolonial studies, Fanon was also a practicing colonial physician who merits contextualization in his own right.”¹ This chapter and the one that follows it explore a modified version of Keller’s argument, one that sees Fanon’s vocation as a psychiatrist and psychoanalyst in North Africa as a decisive factor in his understanding of the postcolonial future. Rather than rejecting the knowledge and the skillset he acquires in the fundamentally racist university hospital, Fanon critiques and repurposes his training in pursuit of the psychological and political liberation of the colonized. Fanon’s experience practicing medicine first in France and then North Africa alerts him to the ways in which the physician and the knowledge that he produces are always embedded in a particular historical and political context. It is from the colony that Fanon critiques the way in which the “science” of Antoine Porot’s psychiatry justifies the exercise of disciplinary power in North Africa under French rule, an analysis that anticipates Michel Foucault’s later interest in the ways in which medicine colludes with the law in the maintenance of state power. Fanon diverges from Foucault, however, in granting to the activist-physician the power to redefine medicine’s ethical mandate – a line of argument that Foucault would no doubt question, since the training of new doctors would entail new institutions that, despite their founders’ best intentions, could be appropriated by the state as disciplinary mechanisms. Foucault’s attention to the historical conditions of

knowledge production would lay the groundwork for the development of postcolonial studies in the late 1970s by scholars like Edward Said, whose *Orientalism* (1978) reconsidered centuries of intellectual work in light of Europe’s exploration and subsequent colonization of the rest of the world. In the 1990s, Homi Bhabha’s *The Location of Culture* (1994) and Ann Laura Stoler’s *Race and the Education of Desire: Foucault’s History of Sexuality and the Colonial Order of Things* (1995) mobilized Foucault’s analyses of power, language, and the state in order to critique colonial models of society, culture, and politics. In particular, Stoler’s book emphasized the role that medical discourse, knowledge, and power played in the “conduct of conduct” in the French and Dutch colonies. As a cautious, self-aware graduate of the French medical school, Fanon offered a “Foucaultian” analysis of colonial medicine before Foucault, and – in his lifelong commitment to providing medical assistance and leadership to the colonized – arguably offered a clearer path to political action than either Foucault or the postcolonial literary critics and cultural historians that Foucault inspired.

**Medicine as Discipline**

The French journal *Esprit* published Frantz Fanon’s article “The ‘North African Syndrome’” in 1952. Fanon had just finished his psychiatric internship at Lyon’s Grange-Blanche Hospital, where he noticed that French doctors were often unable to treat the North African immigrants who came in search of medical assistance. Much to the doctor’s dismay, Fanon recounts, the North African patient would complain of various, diffuse – even contradictory – pains. This symptomology disrupts the logic of what Fanon describes as France’s “exacting medical philosophy” which, in all cases, “proceeds
from the symptom to the lesion” (TR 8). Since the doctor cannot identify the “lesion” causing the inconsistent symptoms that the North African presents, he is forced to make a choice: either he must “conclude that medical thinking was at fault” or “find the patient at fault” (TR 8). Invariably the doctor picks the latter, determining that the North African patient is a “man who fancies himself to be ill [malade imaginaire]” (TR 8; PR 18). The doctor’s diagnosis preserves the integrity of French medical philosophy only by resorting to the “science” of phylogeny: “Every Arab is a man who suffers from an imaginary ailment [Tout Arabe est un malade imaginaire]” (TR 9). In other words, North African’s symptoms are the consequence of a childlike inability to distinguish the imaginary from the real; the North African’s “lesion” is his race’s intellectual underdevelopment.

In the face of the politics and history that the North African immigrant embodies, the doctor asserts his “objectivity” by insisting that all symptoms proceed from organic origins. In order to validate this claim, however, he reveals his own imbrication in politics and history by judging the colonized North African biologically inferior to the colonizing Frenchman. The truth-effects of the doctor’s scientific discourse reinforce the racist mythology of colonialism: every “diagnosis of ‘North African syndrome’ constitutes proof that “the North African is a simulator, a liar, a malingering, a slaturday, a thief” (TR 8, 7). However, the confluence of racist mythology and medical practice renders the doctor useless to his North African patients. Confident that the North African is lying about his pain, the doctor makes a snide remark and sends his patient away away

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2 “[U]ne pensée médicale exigeante … [qui] va du symptôme à la lésion” (PR 17).
3 “Mais, qu’à l’occasion de ces mêmes symptômes on ne trouve … en tout cas rien de positif, le médecin alors verra la pensée médicale en défaut ; et comme toute pensée est pensée de quelque chose, il verra le malade en défaut” (PR 18).
4 “A l’extrême, le Nord-Africain est un simulateur, un menteur, un tire-au-flanc, un fainéant, un feignant, un voleur” (PR 17).
instead of prescribing medication or performing an operation.

In order to care for his North African patients, Fanon must renounce the abstract, impartial subject position that his colleagues pretend to occupy:

I am sorry, but I find myself incapable of analyzing this phenomenon without departing from the objective attitude to which I have constrained myself. (TR 9)⁵

Artificially separating medicine from its historical, geographical, and political contexts blinds the doctor to the ways in which he reinforces colonial France’s social and political inequalities. In many cases, Fanon argues, it is the “situation” of discrimination, poverty, and loneliness that causes the North African immigrant’s physiological and mental suffering (TR 10; PR 20). Fanon writes:

Threatened in his affectivity, threatened in his social activity, threatened in his membership in the community – the North African combines all the conditions that make a sick man. (TR 13)⁶

The doctor begins to treat the “North African Syndrome,” Fanon suggests, at the moment when he improves his bedside manner. Keeping in mind the material difficulties the North African immigrant encounters every day in a foreign land, the doctor affords his patient the dignity and respect he deserves. Ultimately, Fanon’s course of therapy culminates outside the clinic, in the betterment of the immigrant’s material standard of living:

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⁵ “Je m’excuse, je me sens incapable d’analyser ce phénomène sans abonder l’attitude objective que je me suis imposée” (PR 19).
⁶ “Menacé dans son affectivité, menacé dans son activité sociale, menacé dans son appartenance à la cité, le Nord-Africain réunit toutes les conditions qui font un homme malade” (PR 22).
There are houses to be built, schools to be opened, roads to be laid out, slums to be turn down, cities to be made to spring from the earth, men and women, children and children to be adorned with smiles. (TR 15-16)7

As Françoise Vergès remarks, “Fanon’s argument that medical practitioners must know the historical and social conditions of formation of the society in which they exercise, as well as its cultural practices and beliefs, radically questioned a medical practice which wants to believe in its neutrality.”8

In his attention to the relationship between scientific and medical knowledge on the one hand and the exercise of state power on the other, Fanon anticipates many aspects of the work of Michel Foucault. In his “Two Lectures,” delivered in 1976, Foucault argues that medical science relies on its presupposed objectivity in order to camouflage its complicity with disciplinary power. After emerging as the regulating gaze of the school, the hospital, and the barracks, disciplinary power supersedes the overt violence and hyper-theatrical exercise of sovereign power. The rhetoric of sovereignty, however, re-appears in the State’s legal apparatus, which nominally delegates rights and freedoms to each citizen in order to disguise the “closely linked grid of disciplinary coercions whose purpose is in fact to assure the cohesion of ... the social body.”9 Inevitably, the promises of sovereignty – like rights and freedom – come into conflict with the repressions and coercions effected in the name of discipline. Medicine – ostensibly

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7 “[Il] y a des immeubles à construire, des écoles à ouvrir, des routes à tracer, des taudis à démolir, des villes à faire surgir de terre, des homes et des femmes, des enfants et des enfants à garnir des sourires” (PR 25).
neutral, objective, impartial, and disinterested – intervenes as a gentler means of disciplinary repression and coercion that does not openly contradict sovereignty’s mandate of rights and freedoms. Foucault designates the “general medicalization of behaviors, conducts, discourses, desires, etc.” as the catalyst of the “society of normalization” that defines his own historical moment.10

In “North African Syndrome,” Fanon suggests that medicine’s role in colonial politics is twofold: Medicine ensures, on the one hand, the North African’s orderly conduct and, on the other, it offers a fig leaf for the fiction that the North African enjoys the same rights and freedoms as the Frenchman. In “Fanon, Foucault, and the Politics of Psychiatry,” Chloë Taylor argues that, although France’s colonization of North Africa began with “systematic violence,” the cost of lives and manpower ultimately leads France to introduce medicine as a “discipline … [of] seduction and assimilation … [that] may be harder for the colonized to recognize as power...[that] he or she may be less motivated to resist.”11 At the same time, the colonial hospital nominally extends the French citizen’s right to healthcare to the colonized. In “North African Syndrome,” Fanon employs his trademark sarcasm to reveal France’s universalist discourse of sovereignty as the bearer of empty promises for the North African immigrant:

[The North African] has rights, you will tell me … Rights, Duties, Citizenship, Equality! The North African on the threshold of the French Nation – which is, we are told, his as well – experiences in the political realm, on the plane of citizenship, an imbroglio which no one is willing to face. What connection does

10 Ibid., 108.
this have with the North African in a hospital setting? It so happens that there is a connection. (TR 13)¹²

That the North African’s predicament remains “an imbroglio which no one is willing to face” is evidence of the ideological supremacy that the rhetoric of sovereignty holds at the moment Fanon is writing. But Fanon is not fooled. Although the French State may frame the admission of North Africans into colonial hospitals as an egalitarian gesture, “North African Syndrome” criticizes the (lack of) treatment they receive from French doctors and the deleterious psychological consequences of their institutionalization.

Fanon would have another opportunity to observe the disciplinary power of French medicine when he accepted a position at Algeria’s Blida-Joinville psychiatric hospital in 1953. His 1959 essay, “Medicine and Colonialism,” recalls his experiences at Blida in order to foreground the doctor’s pernicious role in the colonial juridical process. Although the French physician in Algeria may present himself as the “doctor who heals the wounds of humanity [le médecin qui panse les plaies de l’humanité]” in this “colony which attracts settlers … the doctor is an integral part of colonization, of domination, of exploitation. In Algeria we must not be surprised to find that doctors and professors of medicine are leaders of colonialist movements” (DC 133-134; PN 126).¹³ The most obvious reason for the physician's participation in this exploitation is that “the Algerian doctor is economically interested in the maintenance of colonial oppression,” since he can scam Algerians ignorant of Western medicine into useless but expensive treatments

¹² “[Le Nord-Africain] a des droits … Droits, Devoirs, Citoyenneté, Egalité, que de belles choses ! Le Nord-Africain au seuil de la Nation française – qui est, nous dit-on, la sienne – vit dans le domaine politique, sur le plan civique, un imbroglio que personne ne veut voir en face. Quel rapport avec le Nord-Africain en milieu hospitalier ? Justement, il y a un rapport” (PR 22).

¹³ “[En] Algérie, colonie type de peuplement, … le médecin fait corps avec la colonisation, avec la domination, avec l’exploitation. En Algérie, il ne faut donc pas s’étonner que des médecins et des professeurs de Faculté soient à la tête des mouvements colonialistes” (RA 126-128).
while also collecting profits as the owner of “mills, wine cellars, or orange groves” (DC 134). Yet, for Fanon, economic opportunist alone is not able to explain the “murder of certain doctors in Algeria [l’assassinat de certains médecins en Algérie]” (DC 135; RA 128). That phenomenon is a function of the doctor’s unique position as the translator between colonialism’s medical and juridical systems. “Not infrequently,” Fanon reports, “the European doctor in Algeria would deliver to the legal authority a certificate of natural death for an Algerian who had succumbed to torture or who, more simply, had been coldly executed” (DC 137). The doctor’s ostensible objectivity serves to disguise the politics that in fact led to this loss of life. By locating the medical expert at the juncture of scientific and juridical knowledge, Fanon begins a critique of medicine’s role at the heart of the criminal justice system that he will return to in The Wretched of the Earth and that Michel Foucault would later carry out in the series of lectures posthumously collected in the volume titled Abnormal.

The “Science” of Criminality

Toward the end of 1962’s The Wretched of the Earth, there appears a short essay, “From the North African’s Criminal Impulsiveness to the War of National Liberation,” in which Fanon excoriates the Algiers School of ethnopsychiatry (WE 219). Founded by Antoine Porot in the first half of the 20th century, the Algiers School developed biological justifications for Europe’s dehumanizing stereotypes of Africans. In The Wretched, Fanon provides lengthy excerpts from Porot’s 1935 and 1939 conference papers, which

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14 “Le médecin algérien est intéressé, économiquement, au maintien de l’oppression colonial” (RA 128).
15 “Il arrive également au médecin européen en Algérie, de délivrer à l’autorité judiciaire un certificat de mort naturelle pour un Algérien décédé sous la torture, ou plus simplement, froidement exécuté” (RA 130).
invoke the rhetoric of neuroscience in order to absolve European colonialists of any moral guilt:

The North African native whose cortex and reflexes are poorly developed … is a primitive being whose essentially vegetative and instinctive life is primarily governed by his diencephalon. … The cortical functions, if they exist, are extremely weak, virtually excluded from the brain’s dynamics. There is therefore neither mystery nor paradox. The colonizer’s reluctance to entrust the native with any kind of responsibility does not stem from racism or paternalism but quite simply from a scientific assessment of the colonized’s limited biological possibilities. (WR 225-226)16

As in “North African Syndrome,” the colonial doctor conspicuously positions himself outside of the realm of history and politics. Moreover, Porot attempts to extend medicine’s objectivity so far as to erase the possibility of history or politics altogether, reducing both to a question of phylogenetic determinism. Fanon, however, tasks himself in this essay with revealing the historical, the political, and – especially – the juridical functions of Porot’s pretensions to impartiality.

The history of “the control of the abnormal individual”17 that Michel Foucault elaborates in 1975’s *Abnormal* illuminates the pivotal role that Porot’s psychiatric “science” plays in France’s surveillance and discipline of the Algerian people. In the

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16 “L’indigène nord-africain, dont les activités supérieures et corticales sont peu évoluées, est un être primitif dont la vie essentiellement végétative et instinctive est surtout réglée par son diencéphale. … Les fonctions corticales, si elles existent, sont très fragiles, pratiquement non intégrées dans la dynamique de l’existence. Il n’y a donc ni mystère ni paradoxe. La réticence du colonisateur à confier une responsabilité à l’indigène n’est pas du racisme ou du paternalisme mais tout simplement une appréciation scientifique des possibilités biologiquement limitées du colonisé” (DT 221-222).
beginning of the 19th century, Foucault argues, there arises a fundamentally new penal code that doles out punishment in proportion not to the violence of the crime or the damage caused by it, but to “the level of interest that underpinned it.” The goal of punishment is no longer to “expiate” the crime, but rather to “[nullify] … the mechanisms of interest at work in the criminal that gave rise to the crime and which could give rise to similar crimes in others.” In order to punish, therefore, the new penal system must be able, first, to prove the criminal’s “reason (raison), which makes him punishable” and, second, to understand the criminal’s “motives (raisons) for committing the act.”

The “famous Article 64” absolves the penal system of responsibility when faced with an irrational criminal; such a criminal is simply deemed “insane” and sent to the asylum. But the penal system is “[embarrassed]” when confronted with a rational and sane person who commits a “crime without reason,” whose motives and intent cannot be logically rationalized. In this case, Foucault writes, “[the law] can no longer judge; it is obliged to come to a halt and put questions to psychiatry.”

As Fanon will demonstrate in *The Wretched of the Earth*, the colonial legal system in Algeria turns to the psychiatry of the Algiers School in order to explain and make punishable those crimes that juridical inquiry cannot.

Foucault claims that psychiatry gains its privileged role in the juridical process by demonstrating a unique ability to interpret what would otherwise seem like an “irrational”

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18 Ibid., 114.
19 Ibid.
20 Ibid., 115.
21 Ibid.
22 Ibid., 122.
23 Ibid., 117.
crime as the product of “a certain morbid dynamic of the instincts.” Foucault’s argument in *Abnormal* hinges on the case of Henriette Cornier, a Frenchwoman who cuts the throat of a young girl for no apparent reason. The court cannot invoke Article 64 in order to commit her to an asylum because Cornier demonstrates “perfect lucidity” before and after committing the crime:

When questioned, she acknowledged that at a certain point she decided that at some time she would kill her neighbor’s little daughter. … Second, she had arranged her room so as to be able to commit the crime, since she had placed a chamber pot on the foot of the bed to catch the blood that would flow from her victim’s body. … Finally, according to the indictment, immediately after the deed, “she was fully aware of the gravity of what she had done.” The proof of is what she said, one of the phrases she uttered after the murder: “This deserves the death penalty.”

A rational woman who has done an irrational deed, Cornier stumps her judges and jurists. It is only when the lawyers suggest during Cornier’s trial that an “instinctive propensity” for violence accounts for her criminal act that an explanation begins to emerge. “With Henriette Cornier,” Foucault argues, “we see the mechanism that transforms an act that was a legal, medical, and moral scandal because it lacked a motive into an act that poses medicine and law specific questions inasmuch as it arises from a dynamic of instinct.”

Henceforth, the medical apparatus and penal system enmesh, effecting a politics of

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24 Ibid., 131.
25 Ibid., 112.
26 Ibid., 124.
27 Ibid., 125.
28 Ibid., 130.
29 Ibid., 131.
normalization that seeks to “control,” “correct,” and “rectify” instinct. In fact, Foucault hews closest to Fanon’s critique of racial prejudice in colonial Algeria’s penal system when he describes Nazi Germany’s embrace of eugenics as an attempt at “the correction of the human instinctual system by purification of the race.”

In The Wretched of the Earth, Fanon argues that Porot’s “discovery” of the North African’s “hereditarily violent [héréditairement violent]” disposition enables the colonial penal system to incarcerate Algerians on the basis of their “race” (WE 223; DT 219). “Prior to 1954,” Fanon reports, “magistrates, police, lawyers, journalists, and medical examiners were unanimous that the Algerian’s criminality posed a problem” (WE 221). The problem was not the simple fact, which Fanon corroborates, that Algerians were committing crimes – for the French could build plenty of jails. The problem was that the penal system in Algeria could not logically or rationally explain why Algerians were robbing and murdering each other:

Very often the magistrates and police officers are stunned by the motives for the murder: a gesture, an allusion, an ambiguous remark, a quarrel over the ownership of an olive tree or an animal that has strayed a few feet. The search for the cause, which is expected to justify and pin down the murder, in some cases a double or triple murder, turns up a hopelessly trivial motive. (WE 222)

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30 Ibid., 132.
31 Ibid., 133.
32 Although Chapter Three will discuss the psychiatric case studies that Fanon includes in The Wretched at length, it is important at this juncture to note that one of Fanon’s patients asks: “Why are there only Algerians in prison?” (WE 200). Fanon chooses not to answer during the course of treatment, but this essay on the Algiers School provides a rather thorough response to the question. 33 “Avant 1954, les magistrats, les policiers, les avocats, les journalistes, les médecins légistes convenaient de façon unanime que la criminalité de l’Algérien faisait problème” (DT 217).
34 “Très souvent magistrats et policiers demeurent interdits devant les motifs du meurtre : un geste, une allusion, un propos ambigu, une altercation autour d’un olivier possédé en commun, une bête qui s’aventure dans un huitième d’hectare... Devant ce meurtre, quelquefois devant ce double ou ce triple...
As Foucault illustrates, without an understanding of the criminal’s actions and motives, the penal system cannot determine or apply punishment. The Algiers School, then, collaborates with the penal system by explaining the Algerian’s criminality as a consequence of phylogenetic instinct: “We have observed,” writes Porot, “that the impulsiveness of the Algerian, the frequency and nature of his murders, his permanent criminal tendencies and his primitivism are no coincidences” (WE 226, emphasis mine). 35 “The Algerian,” Fanon ironizes, “needs to feel the heat of blood and steep himself in his victim’s blood. … He finds it impossible to discipline himself” (WE 222-223). 36 Disciplining him, therefore, becomes the colonial penal system’s responsibility. The official policy comes from a certain préfet in Algeria: “These instinctive beings … who blindly obey the laws of their nature must be strictly and pitilessly regimented” (WE 228). 37 Thanks to Porot, the colonial state possesses sufficient “scientific proof [preuves scientifiques]” for the Algerian’s “appalling criminality [criminalité effarante]” to justify keeping an entire country under lock and key (WE 221; DT 217).

Medical Reform as Political Action

Fanon’s critique of the medico-legal system in The Wretched of the Earth resembles Foucault’s in Abnormal insofar as both reveal the physician’s ostensible objectivity as myth by situating the practice of medicine within a politics of discipline,

meurtre, la cause recherchée, le motif dont on attend qu’il justifie et fonde ces meurtres se trouve être d’une banalité désespérante” (DT 218).
35 “Comme on le voit l’impulsivité de l’Algérien, la fréquence et les caractères de ses meurtres, ses tendances permanentes à la délinquance, son primitivisme ne sont pas un hasard” (DT 221-222).
36 “L’Algérien, vous dira-t-on, a besoin de sentir le chaud du sang, de baigner dans le sang de la victime. … Il y a chez lui une impossibilité à se discipliner” (DT 218-219).
37 “Et la conclusion c’est un sous-préfet – aujourd’hui préfet – qui me la donnait : ‘A ces êtres naturels,’ disait-il, ‘qui obéissent aveuglément aux lois de leur nature, il faut opposer des cadres stricts et implacables. Il faut domestiquer la nature, non la convaincre’” (DT 223).
colonial or otherwise. However, Fanon’s last works, written in Algeria and Tunisia in the late 1950s, pursue an idea anathema to the conclusions Foucault would draw in the 1970s in France: that the doctor-patient relationship could be reformed and reoriented in a non-coercive, dialogic, and publicly beneficial direction. Fanon’s belief in the therapeutic potential of European medicine is all the more surprising given that his first feelings of racial inferiority arise as a result of his medical education. In Black Skin, White Masks, which he composed (and, in fact, submitted) as his doctoral thesis at the University of Lyon, Fanon indicts the French teaching hospital as the producer and popularizer of a reductive, racist calculus about the relative value of human lives:

In the twentieth century the black man on his home territory is oblivious of the moment when his inferiority is determined by the Other. … And then we were given the occasion to confront the white gaze. (BS 90)\(^{38}\)

Notwithstanding this harsh judgment, Fanon would conclude that medicine could be reformed in the interest of the communal good, a conviction that perhaps began to take shape during his apprenticeship under the Catalan psychiatrist François (Francesc) Tosquelles, who, Alice Cherki notes, “also happened to be an immigrant and an anti-Franquist.”\(^{39}\) Tosquelles became increasingly alert to the interrelationship of material and psychic suffering as a consequence of his status as a cultural minority in the aggressively homogenizing and nationalistic context of fascist Spain. Tosquelles chose to leave Catalonia, sharing with Fanon the experience of living as an immigrant and medical professional in France. During the period of their collaboration, the two psychiatrists reconsidered “madness … in light of its close tie to social and/or cultural alienation. The

\(^{38}\) “Le Noir chez lui, au XXe siècle, ignore le moment où son infériorité passe par l’autre. … Et puis il nous fut donné d’affronter le regard blanc” (PN 89).

\(^{39}\) Cherki, Frantz Fanon: A Portrait, 20.
Psychiatric institution itself was itself subject to inquiry and evaluation, and before work of any consequence could be undertaken, the institution had to be rid of its own alienation and transformed into a space in which the sick and the well could develop appropriate models together. In short, Tosquelles inspired Fanon to reform psychiatric medicine from the inside.

In 1953, Fanon accepted a job as an attending physician at Algeria’s Blida-Joinville mental hospital, with the intention of implementing the methods of institutional psychotherapy he had developed with Tosquelles. Until his resignation and subsequent exile from Algeria in 1956, Fanon would work in vain to establish a sociotherapy program at Blida. According to Alice Cherki and Nigel Gibson, Fanon ascribed his failure to his unfamiliarity with Algerian culture. Since Fanon could not speak Arabic, he had to resort to an institutional translator who only “further alienated the doctor/patient relationship” that Fanon was trying to humanize. But Fanon did not give up on the possibility of psychiatric reform. On the contrary, Nigel Gibson argues that “Fanon’s appreciation of his failed psychological experiment indicates how quickly he was willing to change approaches. His new program included field trips and further studies of Algerian history and culture.”

In 1957, Fanon was convinced that he should flee an increasingly dangerous Algeria for Tunis, where he immediately began working at the Manouba Hospital. But rising ethnic and religious tensions at Manouba meant that he and his staff were quickly transferred to the Charles-Nicolle Hospital. It was during his tenure at the Charles-

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40 Ibid., 21.
41 Ibid., 69–70.
43 Ibid.
44 Ibid., 88–89.
Nicolle that Fanon wrote “Medicine and Colonialism” and the other essays in 1959’s *A Dying Colonialism*, in addition to developing a groundbreaking “day-clinic” model that was unlike anything else in either France or the Third World. Like his experiments in sociotherapy at Blida, Fanon’s day-clinic was an attempt to move away from the medical practice he critiqued in *Black Skin* and “North African Syndrome.” According to Cherki, the day-clinic succeeded where Fanon’s sociotherapy had failed in equalizing the relationship between doctor and patient:

The setup of the Day Clinic allowed for … conflicts to be engaged in an open therapy in which they did not become “objectified” and for the doctor/patient relationship to unfold in a realm of mutual freedom.\(^\text{45}\)

Gibson concurs, arguing:

On the cutting edge of psychiatric hospitalization reform, day hospitalization was the form that Fanon pursued to work out a humanistic approach to mental illness, to get beyond the Manicheanism of the Algiers School and the jailer/jailed relationship of the traditional institution. The point was to bring a “sense of normalcy” to a relationship between human beings.\(^\text{46}\)

Ultimately, however, illness would force Fanon to abandon his reforms. He was diagnosed with a fatal form of leukemia in late 1960, barely finishing *The Wretched of the Earth* before his death in 1961.

The therapeutic success that Fanon achieved with Tosquelles and in the day-clinic at Manouba informs the reformist argument in “Medicine and Colonialism,” namely, that, in the right hands, European medicine has the potential to contribute to political progress

\(^{45}\) Cherki, *Frantz Fanon: A Portrait*, 119.

in the Third World. During the Algerian Revolution, the French authorities established an “embargo” banning pharmacists from selling “antibiotics, ether, alcohol, [or] anti-tetanus vaccine” to Algerians (DC 139). The many fighters wounded in the revolution exacerbated what in any case would have been a “dramatic public health problem”; the National Liberation Front “found itself faced with the necessity of setting up a system of public health capable of replacing the periodic visit of the colonial doctor” (DC 141). A large share of the responsibility would fall to the likely autobiographical figure Fanon calls “the native doctor [le médecin autochtone],” a European-trained physician whose allegiance nevertheless lay with the Algerians (DC 142, RA 137). Formerly suspected of colluding with the French during the colonial period, the native doctor would demonstrate his national solidarity by “sleeping on the ground with the men and women of the mechtas [couchant sur la terre avec les homes et les femmes de mechtas]” (DC 142; RA 137). This interaction strips European medicine “of its foreign characteristics [ses caractères étrangères],” like racial discrimination and civilizing “paternalism” (DC 142; RA 137). Fanon’s ambiguous turn of phrase suggests that these traits are foreign to not only Algeria but also medicine’s primary, humanitarian mission. Practiced by an honest, ethical physician, European medicine proves to be as much of a help to the Algerian people as it was a hindrance during the colonial period. Even the most ideologically freighted of medical concepts – “hygiene” – could be divorced from the

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47 “Nous avons signalé que dès les premiers mois de la lute, les autorités françaises décident de mettre l’embargo sur les antibiotiques, l’éther, l’alcool, le vaccine antitétanique” (RA 134).
48 “Le développement de la guerre en Algérie … posent de façon dramatique le problème de la santé publique. … [Le Front de Libération nationale] se voit obligé de mettre en place un système sanitaire capable de se substituer à la visite périodique du médecin de colonisation” (RA 136).
49 When Fanon moved to Algeria in 1953, the French-educated, dark-skinned, Antillean doctor who knew neither Arabic nor rural poverty quite literally stuck out among his fellow colonial subjects. By 1959, Fanon’s experiences living with and treating the Algerian people had not only educated him in their culture but also earned their utmost respect in his eyes.
The problems of hygiene and of prevention of disease were approached in a remarkably creative atmosphere. The latrines recommended by the colonial administration had not been accepted in the mechtas but they were now installed in great numbers. Ideas on the transmission of intestinal parasites were immediately assimilated by the people. The elimination of stagnant pools was undertaken and the fight against post-natal ophthalmia achieved spectacular results. (DC 142-143)  

Unlike Foucault, Fanon argues not only that it is possible to remove the disciplinary aspect from the doctor-patient relationship but also that, in doing so, physicians play a vital role in liberating the colonized from their psychological and ideological chains.

In *The Wretched of the Earth*, Fanon would develop a theory and practice of political struggle that focused, like his psychiatric reforms, on relationships of power between individuals. As Chloë Taylor notes, Fanon’s handbook to decolonization provides further evidence of his affinity to yet crucial distance from Foucault: “While Foucault raises the political rather than the scientific character of the psychological disciplines in order to oppose their practice, Fanon acknowledges but also takes up the nonscientific and political function of psychiatry and psychoanalysis, using them as tools for anticolonial engagement.”  

Chapter 3 highlights those moments in *The Wretched* in which Fanon’s political recommendations are formulated from the perspective of his

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50 “Les problèmes de l’hygiène et de la prophylaxie sont abordés dans une atmosphère créatrice remarquable. Les latrines que les plans d’Hygiène élaborés par l’administration coloniale s’étaient révélés incapables de faire admettre dans les mechtas, se multiplient. Les notions sur la transmission des parasitoses intestinales sont immédiatement assimilées par le peuple. La chasse aux eaux stagnantes est entreprise et la lutte contre les ophalmies néonatales obtient des résultats spectaculaires” (RA 137).

medical expertise in order to underscore the connections that Fanon saw between psychiatric practice and political praxis during Algeria’s rough transition to national independence. Writing as a philosopher, political activist, and physician, Fanon understood the diagnosis of the societal symptom not as an end in itself, but as the first step toward a cure.
Frantz Fanon dictated *The Wretched of the Earth* to a team of typists in a race against time. In letters, Fanon attributes his haste to the ongoing war in Algeria and the sparks of revolution lighting up the rest of the African continent. To François Maspero, his publisher, Fanon writes: “I am only compelled to insist [on an earlier publication date] because of concrete and important political considerations…. This book is being impatiently awaited in Third World political circles.” Alice Cherki suggests that Fanon tended to downplay the rapid decline of his health, which clearly affected the pace of his writing. She recalls how he read the completed manuscript of “On Violence,” the book’s first chapter, to her and other friends from his deathbed, shaking from feverish convulsions. Leukemia would claim his life a few short weeks after *The Wretched* was published in November 1961.

Although *The Wretched* may be Fanon’s last will and testament to the Algerian Revolution, it is not, as J. P. Sartre suggests in his influential preface to Fanon’s final work, a justification of its violence. On the whole, *The Wretched* is a cautionary tale, littered with warnings to the nascent Algerian government that, in hindsight, are eerily prophetic of the military dictatorships, widespread corruption, and bloody tribal conflicts that continue to haunt the African continent today. In “Fanon and the Biopolitics of Torture,” Lou Turner argues that Fanon develops a “realist attitude to ‘revolutionary violence’” by juxtaposing its temporary political necessity with the lasting psychological

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1 Cherki, *Frantz Fanon: A Portrait*, 161–162.
2 Ibid., 161.
3 Ibid., 164.
and emotional traumas it inflicted on “a whole generation of Algerians.” Turner’s reading puts an unprecedented emphasis on The Wretched’s fifth chapter, “Colonial War and Mental Disorders,” which is comprised of a discontinuous series of psychiatric case studies whose “dismissal has been so unanimous,” writes Alice Cherki, “that it has been treated as incidental and its discussion relegated to the footnotes.”

Fanon himself suspected that few would understand his decision to include medical observations in a book about politics: “Perhaps the reader will find these notes on psychiatry out of place or untimely in a book like this,” he writes (WE 181).

Once again repudiating the doctrine of epistemological apartheid that he learned to despise in medical school, Fanon marshals the diagnostic procedures and rhetorical methods of psychiatry in order to make observations about military, juridical, and historical matters. The case studies in “Colonial War and Mental Disorders” perform a simultaneous critique of dominant medical practices and of revolutionary narratives. Departing from what Turner calls the “now hegemonic view that Fanon was an ‘apostle of violence’” requires an interdisciplinary perspective that decades of Fanon scholars were paradoxically unwilling or unable to adopt.

By publishing these case studies as a part of his final work, Fanon demonstrates not only his Hippocratic commitment to those minds that were sometimes irreparably damaged by the violence of decolonization but also his belief that this psychiatric

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5 Cherki, Frantz Fanon: A Portrait, 178.
6 “On trouvera peut-être inopportunes et singulièrement déplacées dans un tel livre ces notes de psychiatrie” (DT 177).
7 Chapters One and Two argue that Fanon’s Black Skin, White Masks and “The ‘North African Syndrome’” deny the French medical establishment’s assertion that politics and history play no role in the genesis or treatment of disease.
testimony makes an important contribution to the groundbreaking reading of the process of decolonization that is *The Wretched of the Earth*. Fanon’s tangible concern for the health and wellbeing of the Algerian people prolongs the timeline of revolution into his present, interrupting “Manichean” historical narratives that hastily declare independence on the part of a nation that has not yet established equitable systems of governance and economy: “But the war goes on,” Fanon warns, “and for many years to come we shall be bandaging the countless and sometimes indelible wounds inflicted on our people by the colonialist onslaught” (WE 181). As if to quiet premature cheers and applause, these opening lines to “Colonial War and Mental Disorders” recall the argument that Fanon makes in so many contexts in *The Wretched* that the transition from colonial territory to independent nation does not end with the expulsion of the colonial power. In earlier chapters, Fanon criticizes those who “imagined [they] could switch straight from colonized subject to sovereign citizen of an independent nation,” insisting that “in actual fact everything has to be started over from scratch” (WE 88, 56). *The Wretched* evinces the extensive theoretical evaluations and material changes that both the hospital and state must undergo in order to be fully rid of colonialism’s dehumanizing logics. The unconventional casebook at the end of *The Wretched* lays out a roadmap for revolution both in psychiatry and in politics.

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9 “Mais la guerre continue. Et nous aurons à panser des années encore les plaies multiples et quelquefois indélébiles faites à nos peuples par le déferlement colonialiste” (DT 177).
10 “Tant qu’il s’imaginait pouvoir passer sans transition de l’état de colonisé à l’état de citoyen souverain d’une nation indépendante, tant qu’il se prenait au mirage de l’immédiateté de ses muscles le colonisé ne réalisait pas de véritables progrès dans la voie de la connaissance” (DT 87).
11 “Le pays se retrouve entre les mains de la nouvelle équipe mais en réalité il faut tout reprendre, tout repenser” (DT 57, emphasis mine).
A New Kind of Case Study

In “Colonial War and Mental Disorders,” Fanon modifies the formal and rhetorical structures of the case study in order to challenge dominant ideas in psychoanalysis and other psychiatric schools of thought. Whereas in Black Skin, White Masks Fanon reconsiders Freudian psychoanalytic theory from the perspective of the colonized, in The Wretched of the Earth Fanon alters Freudian psychoanalytic practice to suit the needs of the postcolonial nation. Fanon relinquishes the interpretive authority that the Freudian case study accords to the analyst in order to treat his patients as dialogic interlocutors in their own therapy and recovery. Fanon’s case studies also repudiate the methodological assumptions that he was taught in medical school by giving voice to those patients who suffered from psychopathological responses to the violence of the Algerian Revolution. By juxtaposing never-before-heard psychiatric testimony with the political recommendations that comprise the first 200 pages of The Wretched, Fanon highlights Algeria’s public health as a key challenge that the newfound nation will have to address in the postcolonial era.

In one of his most famous case studies, Freud approaches the child he calls “Little Hans” not as a thoughtful human being capable of providing insights into psychological, cultural, and political phenomena, but rather as empirical evidence for various psychoanalytic hypotheses: “The physician who treats an adult suffering from neurosis by means of psychoanalysis … eventually arrives at certain assumptions about infantile sexuality. … But the psychoanalyst may admit to the desire for more direct, more immediate proof of these fundamental principles.”\(^{12}\) This proof is “Little Hans,” a five-

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year-old boy, whose father – a disciple of Freud’s – is subjecting him to analysis at home. Whenever Hans’ father is perplexed by his son’s symptoms, the two go to visit Freud in search of an interpretation that conforms to psychoanalytic theory. The inadequacy of the apprentice psychoanalyst reinforces the virtual omniscience of the master. During one session, for example, Freud comments on the resemblance between the face of a horse (Little Hans is terrified of horses) and Little Hans’s bearded and bespectacled father:

“Such details as I now learnt, things that particularly bothered him – what the horses had over their eyes and the black around their mouths – ... [lead to] a further intimation of what the solution could be, and [I] understood very well why it might elude Hans’s father in particular.”

Based on his schema of infantile sexuality, Freud concludes that Little Hans transfers his libidinal “hostility” towards his father onto the horse. In Freud’s narrative, it is Little Hans himself who pronounces the uncanny accuracy of psychoanalytic interpretation: “Does the Professor talk to the good Lord, since he knows everything before he is told?” Hans asks his father.

In Fanon’s case studies, many of his patients’ words and actions are made to stand on their own, without interpretation. Fanon intimates in *Black Skin, White Masks* that he does not believe in the therapeutic power of leading the patient to the conclusion arrived at by the analyst; instead, Fanon seeks to enable his patient to “choose action (or passivity) with respect to the real source of the conflict, i.e., the social structure” (BS 80). In the case studies of “Colonial War and Mental Disorders,” Fanon demonstrates

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13 Ibid., 32.
14 Ibid.
15 Ibid.
16 “[M]on but, au contraire, sera, une fois les mobiles éclairés, de le mettre en mesure de choisir l’action (ou la passivité) à l’égard de la véritable source conflictuelle — c'est-à-dire à l’égard des structures sociales” (PN 81).
his continued belief that formal psychoanalysis should play a limited role in treatment. For example, in the case of an Algerian man who barely survived a French massacre, the patient’s “disinclination to communicate and a tendency to keep to himself [une réticence, une certaine tendance à la solitude]” lead Fanon to “[fear] the worst [craindre une évolution plus grave]”; however, instead of pursuing psychoanalytic therapy, Fanon discharges the patient from the mental hospital into “the care of the FLN’s social services [au service social du F.L.N.]” (WE 191-192; DT 187). Removing the patient from the context of the mental hospital constitutes a treatment decision that is justified when the patient returns after six months of employment and is “doing well [va bien]” (WE 192; DT 187). In another case, in which an Algerian man has nightmares of disemboweled women after having killed a French woman with a knife, Fanon concludes that he can offer no therapeutic solution: “As unscientific as it may seem, we believe only time may heal the dislocated personality of this young man” (WE 194).

In another case, extended conversations with his patient lead Fanon to renounce a classic Freudian diagnosis and treatment plan in favor of sociotherapy (WE 187). The patient in question is a FLN fighter who experiences impotence after learning that French soldiers have imprisoned and raped his wife. He tells Fanon that he has since tried and failed to have sex with other women; in one instance, “before the act he had an irresistible impulse to tear up a photo of his little girl [quelques instants avant l’acte, irraisonné à la vue d’une photo de sa fille].”

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17 The FLN (Front de Libération Nationale) waged the war for independence in Algeria.
18 This interpretation of the case of the massacre survivor is reinforced by Fanon’s implementation of sociotherapy and the day-clinic model that was discussed in Chapter Two. By relaxing, in the case of sociotherapy, or truncating, in the case of the day-clinic, the rigid social structure of the psychiatric institution, Fanon ventures to equalize the relationship between the doctor and the patient. The case of the massacre survivor likewise highlights the role that the patient’s re-introduction into social life plays in the process of psychiatric healing and recovery, all the while downplaying the importance of the doctor’s interventions.
19 “Aussi peu scientifique que cela puisse sembler, nous pensons que seul le temps pourra apporter quelque amélioration dans la personnalité disloquée du jeune homme” (DT 189).
envie irrésistible de déchirer une photo de sa petite fille]” (WE 187; DT 183). This leads Fanon to consider whether “unconscious incestuous drives [pulsions incestueuses inconscientes]” are at work (WE 187; DT 183). However, Fanon determines that the photograph of the patient’s daughter simply leads the patient to think about his family, including his wife. Moreover, the case study suggests that the patient does not primarily feel jealous that other men had sex with his wife but rather guilty that his political engagements led to the abuse of someone he cared about. We learn that the patient married out of obligation and custom rather than love, and that before the war, the married couple barely spoke to one another. Upon hearing of the rape, and understanding its primarily political motivation, the patient’s indifference turns to respect; he describes his wife to Fanon as a “tenacious woman who was prepared to accept anything rather than give up her husband. … That woman had saved my life and had protected the network” (WE 188). He realizes her value in relation to the revolution, and, discarding the sexist traditions that would mark a raped woman as dishonored, decides to take her back after independence. By presenting his patient’s “confidences” as a monologue, uninterrupted by the voice of the physician, Fanon emphasizes the degree to which the patient’s gradual recovery is the result not of Fanon’s psychoanalytic judgments but rather an individual and communal process of reflection and healing: Fanon marks the beginning of the patient’s recovery as the day when he “accepted to listen to political discussions” among his peers (DT 185, WE 189).

20 “Ce n’était donc pas un simple viol, par désœuvrement ou par sadisme comme j’ai eu l’occasion d’en voir dans les douars, c’était le viol d’une femme têtue, qui acceptait tout au lieu de vendre son mari. Et ce mari, c’était moi. Cette femme m’avait sauvé la vie, et avait protégé le réseau” (DT 184).
Alice Cherki argues that the innovative psychoanalytic and psychiatric practice documented in Fanon’s case studies represents one of the first attempts to diagnose and treat what today we know as post-traumatic stress disorders. In his critique of Octave Mannoni’s psychoanalytic interpretation of the French colonization of Madagascar in *Black Skin, White Masks*, Fanon argues that the trauma responsible for the Malagasy’s alienation and neurosis was not inflicted during childhood, but rather during a much more recent past marked by widespread discrimination and violence. Fanon supports his argument by re-interpreting seven of Mannoni’s case studies in light of the military conflict in Madagascar, eschewing the archetypal analysis that Mannoni had learned from Freud. Pointing out the historical fact that the French forced Senegalese conscripts to torture and kill rebellious Malagasies, Fanon argues that the “fierce black bull” in the cook’s dream does not represent an abstract “phallus” and that the two black men in the thirteen-year-old’s dream do not stand for “two fathers—one representing the actual father, the other the ancestor,” but that in fact these black figures are a terrorized unconscious’ manifestations of “the Senegalese in the criminal investigation department” (BS 86, 85). Another adolescent dreams that black soldiers are chasing him with guns; Fanon insists that “the Senegalese soldier’s rifle is not a penis, but a genuine Lebel 1916 model” (BS 86). In these cases Fanon highlights psychoanalysis’ propensity to produce abstruse and misleading interpretations when, in many cases, the truth is on the surface of the patient’s testimony. In *The Wretched*, Fanon seeks to reform another method of

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21 Cherki, *Frantz Fanon: A Portrait*, 179.
22 “Le taureau noir furieux, ce n’est pas le phallus. Les deux hommes noirs, ce ne sont pas les deux pères — l’un représentant le père réel, l’autre l’ancêtre”; “le taureau noir, les hommes noirs, ce ne sont ni plus ni moins que les Sénégalais du bureau de la Sûreté” (PN 86, 85).
23 “Le fusil du tirailleur sénégalais n’est pas un pénis, mais véritablement un fusil Lebel 1916” (PN 86).
psychiatric knowledge production by suggesting a causal relationship between the brutal violence of the Algerian Revolution and the shocking prevalence of psychopathology in post-revolutionary Algeria (WE 183). Fanon’s case studies invert the clinical psychiatric doctrine that “privileges the event that triggered the disorder, perhaps mentioning – here and there – the role played by the psychological, affective and biological history of the patient and by his milieu” (WE 183, translation modified). In decolonized Algeria, Fanon argues, “the triggering factor is principally the bloody, pitiless atmosphere, the generalization of inhuman practices, of people’s lasting impression that they are witnessing a veritable apocalypse” (WE 183, emphasis mine). What follows is the novel suggestion that even if the patient wasn’t directly involved in combat, he or she may still suffer from a psychotic reaction to the diffuse and violent trauma of everyday life under decolonization.

Fanon argues that the “well-established notion” in the French psychiatric community that the psychotic disorders triggered by the violence of decolonial war are “relatively benign” is the beginning of a public mental health crisis (WE 184). Fanon insists that his psychiatric contemporaries underestimate both the virulence and prevalence of what today we would recognize as post-traumatic stress disorders. For

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24 “[O]n privilégie l’évènement qui a déclenché la maladie quoique. Ca et là, soit mentionné le rôle du terrain (l’histoire psychologique, affective et biologique du sujet) et celui du milieu” (DT 179).
25 “Il nous semble que dans les cas présentés ici, l’évènement déclenchant est principalement l’atmosphère sanglante, impitoyable, la généralisation de pratiques inhumaines, l’impression tenace qu’ont les gens d’assister à une véritable apocalypse” (DT 179).
26 This type of case is exemplified by the young Frenchwoman who suffers from anxiety after her father’s death. Her father made a career out of torturing Algerians in the basement of the family home and is recognized after his death as an upstanding and patriotic Frenchman. The daughter says she heard the screams. She refuses a pension from the government on her own volition, but turns to Fanon to dry her sweaty palms. Characteristically, he never tells us his treatment plan or if he sees any improvement in the patient.
27 “Une autre notion fortement établie mérite à nos yeux un léger assouplissement : il s’agit de la relative bénignité de ces troubles réactionnels” (DT 180).
Fanon, the case studies illustrate that “these disorders last for months, wage a massive attack on the ego, and almost invariably leave behind a vulnerability virtually visible to the naked eye. In all evidence the future of these patients is compromised” (WE 184).28 The patients that Fanon refers to are not just the dozen or so whose case histories are compiled in “Colonial War and Mental Disorders”; Fanon’s case studies evince a pattern of contagion that suggests a dangerous mental health epidemic. Fanon argues that the scope and violence of decolonial warfare in Algeria is unprecedented. He compares the Algerian Revolution to the two World Wars, only to conclude that “the novel physiognomy of some of the case histories mentioned here provides confirmation, if we still need it, that this colonial war is a new phenomenon even in the pathology it produces” (WE 184).29 Fanon suggests that the Algerian Revolution affected Algerian society in a more totalizing way than the two World Wars impacted Europe: at times, Fanon argues, the conflict in Algeria “takes on the aspect of a genuine genocide [prend l’allure d’un authentique génocide] … which radically disrupts and shatters the world [qui bouleverse et casse le monde]” (WE 183). Although Richard Philcox translates Fanon’s choice to “[accorder] ici une singulière priorité à la guerre prise dans sa totalité et dans ses particularités” as “[putting] particular emphasis on war in general and the specific circumstances of a colonial war,” in light of Fanon’s earlier references to “apocalypse” and “genocide” it is more likely that Fanon here is arguing that the unique quality of colonial war is its totality. There is no escaping it, whether you are a soldier,

28 “Ce sont des troubles qui persistent des mois durant, attaquant massivement le moi, et laissant presque toujours comme séquelle une fragilité pratiquement discernable à vue d’œil. De toute évidence, l’avenir de ces malades est hypothéqué” (DT 180).
29 “La physionomie inédite de certains tableaux psychiatriques signalés ici confirme, s’il en est encore besoin, que cette guerre coloniale est originale même dans la pathologie qu’elle sécrète” (DT 179-180).
policeman, intellectual, mother, or child. By including these case studies in *The Wretched of the Earth*, Fanon argues that any genuine narrative of “national consciousness [*la conscience nationale*]” must include the voices of the mentally ill (WE 179; DT 174). For Fanon, one of the primary challenges facing the burgeoning Algerian nation would be to care for its many citizens suffering from the psychopathologies of anticolonial war.

**A New Kind of Nation**

The case studies play an essential part in Fanon’s critique of the triumphalist narratives of bourgeois and militant nationalism that he feared would dictate the politics of post-colonial Algeria. Fanon understands both bourgeois and militant nationalism as reproductions of the morals and culture that were imposed under colonial rule. Both narratives of national progress produce a “Hegelian” or what Fanon calls “Manichean” opposition between a privileged group and a disinherited one. For Fanon, the nationalist bourgeoisie enriches itself at the expense of the working class and peasants, preferring to spend its wealth on conspicuous consumption rather than investments in national infrastructure. The militant nationalism of groups like the FLN, Fanon argues, causes a fissure between the party’s intellectual leaders and the masses. On the one hand, Fanon sees the beginnings of “a bourgeois dictatorship [*une dictature bourgeoise*]”; on the other, “a dictatorship of civil servants [*une dictature de fonctionnaires*]” (WE 111, 123; DT 108, 120). Furthermore, both the bourgeoisie and the party inherit the European colonizers’ tendency to demarcate social and political groups according to race. First, Fanon resumes his earlier critique of Freud’s “narcissism of minor differences” in *The Wretched* by exposing the racism implicit in bourgeois nationalism. The respective
bourgeoisies of North and Sub-Saharan Africa discriminate against one another: the North Africans describe Sub-Saharan Africa as “wild, savage, uncivilized, and lifeless”; the Sub-Saharan make “hateful remarks about veiled women, polygamy, and the Arabs’ alleged contempt for the female sex” (WE 108). \(^{30}\) Whereas Freud would likely describe this feud as harmless, Fanon understands it as “the [foundation] for a racist philosophy that is terribly prejudicial to the future of Africa. Through its apathy and mimicry it encourages the growth and development of racism that was typical of the colonial period” (WE 108). \(^{31}\) Second, Fanon exposes the frequency with which a “dictatorship of civil servants” is also “a genuine ethnic dictatorship [une authentique dictature ethnique]” (WE 126; DT 122). However, Fanon argues that the tribal unity of the “so-called national party” is often short-lived:

The ministers, private secretaries, ambassadors, and prefects are chosen from the leader’s ethnic group, sometimes even directly from his family. … This tribalization of power results, much as one would expect, in regionalist thinking and separatism. Decentralizing trends surface and triumph, the nation disintegrates and is dismembered. (WE 126)\(^ {32}\)

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\(^{30}\) “On regarde l’Afrique Noire comme une région inerte, brute, non civilisée… sauvage. Là, on entend à longueur de journée des réflexions odieuses sur le voile des femmes, sur la polygamie, sur le mépris supposé des Arabes pour le sexe féminin” (DT 105).

\(^{31}\) “Toutes ces réflexions rappellent par leur agressivité celles que l’on a si souvent décrites chez le colon. La bourgeoisie nationale de chacune de ces deux grandes régions, qui a assimilé jusqu’aux racines les plus pourries de la pensée colonialiste, prend le relais des Européens et installe sur le continent une philosophie raciste terriblement préjudiciable pour l'avenir de l’Afrique. Par sa paresse et son mimétisme elle favorise l'implantation et le renforcement du racisme qui caractérisait l'ère colonial” (DT 105-106).

\(^{32}\) “Les ministres, les chefs de cabinets, les ambassadeurs, les préfets sont choisis dans l’ethnic du leader, quelquefois même directement dans sa famille. … Cette tribalisation du pouvoir entraîne on s’en doute l’esprit régionaliste, le séparatisme. Les tendances décentralisatrices surgissent et triomphent, la nation se disloque, se démembre” (DT 122).
Fanon’s case studies show the prevalence and consequences of “Hegelian,” Manichean, and fundamentally racist narratives of national consciousness in Algeria. In the case studies, Fanon underscores the violent and destructive consequences of nationalist ideologies that pit one cultural or ethnic group against the other.

The juxtaposition of two of Fanon’s most haunting case studies illuminates the similarity that Fanon saw between European narratives of racist nationalism and revolutionary Algeria’s triumphant narratives of national independence. In the first case, Fanon is required to treat a French torturer suffering from nightmares and from lack of appetite. The patient smokes three packs of cigarettes a day and beats his wife and children. In addition to brutalizing his family, the patient threatens those ahead of him in the line for a newspaper with violence. It is clear that he can no longer distinguish between his home-life and work-life; everything is a contest of physical force. The patient’s extended testimony reveals that what has turned this père de famille into a “radical and absolute [sadist]” is France’s “coherent system” of racist national ideology (WE 199). Despite his psychiatric symptoms and family troubles, the torturer sees his role in the French war effort as too crucial to allow him to resign:

The fact is … we’re now doing the infantrymen’s work. Last week, for example, they treated us as if we were in the army. Those guys in the government say there’s no war in Algeria and the police force must restore law and order. But there is a war in Algeria, and when they realize it, it’ll be too late. (WE 197, translation modified)

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33 “On se trouve en présence avec cette observation d’un système cohérent qui ne laisse rien intact. … [I]l y a bel et bien une existence qui s’inscrit sur le registre d’un sadisme radical et absolu” (DT 194).
34 “C’est que … nous faisons maintenant un travail d’infanterie. La semaine dernière par exemple, nous étions en opération comme si nous appartenions à l’armée. Ces messieurs du gouvernement
The patient’s testimony also reveals that it is a particular conflation of French masculinity and racial and ethnic identity that makes systematically inflicting pain on other human beings possible in the first place. The torturer is motivated by an ostensibly patriotic “competition [compétition]” that measures “personal success [succès personnel]” according to the amount of information he can produce for the French state (WE 198). Fanon’s patient reveals that, at the police station, he is “careful” not to let “the other guy take all the glory” (WE 198).  

Fanon’s patient describes torture as a kind of skillful art that requires “flair”: “You need to know when to tighten your grip and when to loosen it. … When the guy is ripe [mûr], there’s no point continuing to hit him” (WE 198, DT 193). The torturer’s agricultural language underscores the racial dehumanization at work in the torture chamber. He recalls that the Senegalese torturers that the commissariat employed at one point lacked the “[intelligence] needed to succeed in this kind of work” (WE 198, translation modified). It would follow that the Algerians being tortured lack the “intelligence” or mental capacity to deserve a fair trial or human compassion.

The second case study indicts Algerian ethnic nationalism as a cause of senseless and needless violence. Of all the cases, this one is least marked by Fanon’s interpretations: large portions are printed as a dramatic dialogue between Fanon and his two patients. The primary figures in this case study are two Algerian boys who admit to disent qu’il n’y a pas de guerre en Algérie, et quand ils s’en rendront compte, ce sera trop tard” (DT 193).

35 “Il est vrai qu’on se relaie, mais c’est une question que de savoir à quel moment passer la main au copain. Chacun … se garde bien de céder l’oiseau préparé à l’autre, qui naturellement, en tirera une gloire” (DT 193).

36 “C’est une question de flair. Quand le gars est mûr, ce n’est pas la peine de continuer à taper” (DT 193).

37 “En fait, il faut être intelligent pour réussir dans ce travail” (DT 193).
having killed one of their European playmates.\textsuperscript{38} Just as the French torturer saw his job as a crucial component of France’s war against Algeria, the two Algerian boys understand their crime as the best contribution they can make to the revolution. The younger boy seems to fear that the French will kill him (and all the other “Arabs”), unless the “Arabs” kill the French first. Estimating a low chance of successfully killing a French adult, the boy chooses a French child as an equivalent target:

One day we decided to kill him because the Europeans want to kill all the Arabs.

We can’t kill the “grown-ups,” but we can kill someone like him because he’s our own age. (WE 199)\textsuperscript{39}

Further testimony suggests that the boy fears that his victim would eventually grow into a copy of his racist father, who is in the French militia and who believes that Arabs “ought to have [their] throats slit \textit{[il faut (les) égorger]}” (WE 200; DT 195). Implying that the murder was an act of retributive justice, the older boy’s testimony fully exposes the way in which the logic of ethnic nationalism creates a false equivalence of human lives and actions. He explains to Fanon that two of his family members were killed during the Rivet Massacre in 1956, when, as Fanon explains in a footnote, “French militia dragged forty men from their beds and murdered them” (WE 201).\textsuperscript{40} First, the older boy expresses his disappointment in the colonial legal system, which would hold no one responsible for the massacre. Then he tells Fanon that he wanted to avenge his family by fighting for the

\textsuperscript{38} That the three boys used to play together – in fact, the younger Algerian boy says the European was “our best friend” – illuminates the mechanics of Manichean nationalist ideology (WE 199). Until the children are made to realize their racial heritage and national allegiance, they treat each other indiscriminately.

\textsuperscript{39} “Un jour on a décidé de le tuer, parce que les Européens ils veulent tuer tous les Arabes. Nous, on ne peut pas tuer ‘les grands.’ Mais comme lui, il a notre âge, on peut” (DT 195).

\textsuperscript{40} “Rivet est un village qui, depuis certain jour de l’année 1956, est devenu célèbre dans la région de l’Algérois. Un soir en effet, le village fut envahi par des miliciens français qui, après avoir arraché de leurs lits quarante hommes les assassinèrent” (DT 196).
revolution, only to be turned away for his age. Finally, it seems, he decides to make justice by killing a close friend, one who happened to be born to a racist militiaman. Following a racist logic of phylogenetic inheritance, the boys satisfy their fear and hatred of the French militia by killing a French adolescent who in fact had nothing to do with inflicting pain and terror on the Algerian people.

In his 1994 essay, “DissemiNation: Time, narrative and the margins of the modern nation,” Homi Bhabha shapes Fanon’s concerns about ethnic nationalism into a theory of the post-colonial nation as locus of plurality and difference. Bhabha identifies “On National Culture,” the fourth chapter of The Wretched of the Earth, as one of the first attempts to conceptualize the nation as “a dialectic of various temporalities – modern, colonial, postcolonial, ‘native’ – that cannot be stabilized in its enunciation.” By refusing to accord political primacy to ethnic North Africans, Muslims, or European and European-trained intellectuals, Fanon produces what Bhabha describes as a “[counter-narrative] of the nation that continually [evokes] and [erases] its totalizing boundaries – both actual and conceptual – [that] disturb those ideological manoeuvres through which ‘imagined communities’ are given essentialist identities.” In The Wretched of the Earth, writes Bhabha:

We are confronted with the nation split within itself, articulating the heterogeneity of the population. The barred nation It/Self, alienated from its eternal self-generation, becomes a liminal signifying space that is internally marked by the

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41 By foregrounding the historical and political context of the boys’ crime, Fanon provides an alternative explanation for Algerian criminality than the racist psychiatry of the Algiers School that, as detailed in Chapter Two, reinforced the legal and disciplinary apparatus of French colonialism.

42 Homi Bhabha, The Location of Culture (London: Routledge, 1994), 152.

43 Ibid., 149.
discourses of minorities, the heterogeneous histories of contending peoples, antagonistic authorities and tense locations of cultural difference.\textsuperscript{44}

In short, Bhabha suggests that Fanon was among the first thinkers to conceptualize the postcolonial nation as an inherently multicultural and variegated polity.

By transforming the monologic Freudian case study into a dialogic testimony of historical experience, Fanon gives voice to a diverse cross-section of the Algerian (and French) population exposed in one way or another to the physical and structural violence of anticolonial war. Informed by his own psychiatric practice, Fanon understands dominant notions of French and Algerian nationalism as a fundamental cause of this brutal violence and, therefore, the mental illnesses endemic to the war and its aftermath. The personal narratives collected in “Colonial War and Mental Disorders” serve not only to demonstrate to psychiatrists the clinical importance of the patient’s historical and cultural context but also to prove to politicians and intellectuals that “Hegelian” or “Manichean” models of history and revolution only perpetuate conflict and psychosis. Fanon’s practice of psychiatry allows him to imagine a new schema of social relations that today forms the basis of the postcolonial perspective.

\textsuperscript{44} Ibid., 148.
Conclusion

In “Clinician and Revolutionary: Frantz Fanon, Biography, and the History of Colonial Medicine,” Richard C. Keller wonders aloud: “Who is to say what might have become of Fanon in the atmosphere of the 1960s?“\(^1\) The question points to the ways in which the forces of decolonization fundamentally altered the structure and practices of the research university, another institution like the medical hospital, whose ostensible objectivity had rarely been challenged. Beginning in the 1960s, public intellectuals like Michel Foucault started to investigate – from the inside – the cultural, historical, and political implications of certain forms of knowledge production. Although Fanon was never a university professor, it is likely that his study of material culture and medical practice would only have been emboldened by the explicit politicization of academic work.

Alice Cherki imagines that if Fanon had not died in 1961, he almost certainly would have continued to practice psychiatry and to write about his experiences and beliefs.\(^2\) Biographical evidence suggests that many of Fanon’s friends believed in the possibility of a last-minute cure, one so much so that he paid for Fanon’s round-trip airfare to pursue treatment at the American National Institute of Health (NIH) in Bethesda, Maryland.\(^3\) For Fanon – whose remarks in *Black Skin, White Masks* about the representation of blacks in American folk tales were far from positive – putting his life in American hands was a difficult choice to make (BS 108, 151-154). If the oncologists had

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\(^1\) Keller, “Clinician and Revolutionary: Frantz Fanon, Biography, and the History of Colonial Medicine,” 837.
\(^3\) Ibid., 164.
– miraculously – been able to save Fanon’s life, it is likely that Fanon’s account of his
time in an American hospital would have been nothing less than enthralling.

It is fascinating to consider what Fanon would have thought about the
organization that sprung out of the May 1968 revolts in Paris called Doctors Without
Borders [Médecins Sans Frontières], which, like Fanon, seems to understand a particular
form of practicing medicine and providing for the public health as a valuable means of
ensuring peace and political stability in what Fanon would have known as the Third
World. Would Fanon’s faith in the political power of the activist-physician have
withstood Foucault’s anti-humanist critiques of medicine’s inevitable interpellation into
the disciplinary politics of normalization? Would Fanon have found an ally or an enemy
in anti-psychiatrists like Félix Guattari? These questions are purely speculative, of
course, but they highlight the degree to which the problems Fanon identified during his
brief career still haunt our present.

Despite the recent development of the Medical Humanities in the American
university, the medical sciences still enjoy an unmatched degree of discursive authority
and putative objectivity in the United States. Biopolitical concerns like abortion rights
and physician-assisted suicide have brought the relationship between medicine and
politics to the attention of many American scholars and journalists, but, in general, the
doctor’s imbrication in history and politics remains obscured by his or her scientific
jargon and the perceived timelessness of institutions like the clinic and the hospital. I
hope this thesis inspires future scholars to turn to the work not only of Michel Foucault
but also of Frantz Fanon in their efforts to reveal the political and cultural ramifications
of medical practice. Like any of us, Fanon was a product of his times, but his
unprecedented and perhaps unsurpassed analysis of medicine’s interrelationship with culture and politics provides key insights into some of today’s most important questions.
Bibliography


