

Social life of students at MIT; racial segregation at MIT

Erica James: How is it that particular ideas of the body were created through institutional practices? To what extent is there conscious design? Does the representation occur before segregation? Are they prior to or after the interventions on people's bodies? At the policy level are they intended for/or the result of psychological tools? Practices → representations or Representations → practices? Chicken-egg.

-- Foucault—public health, clinical world, institution of hospital as site of power. Lock and Scheper-Hughes piece theorized the body in 3 ways, body on the symbolic level vs. body on the institutional level. Idea of fetish, relevant, and the idea that particular object is imbued with power and magic—became to represent the black mind, b/c of fixation, incapable of generalization, self-governance—and how that is elaborated over time.

-- Fabian—intervention of explorers into central Africa, holding onto ideas of hygiene and occurring at point of colonial expansion/race for Africa. Reminiscent of Foucault: The designation of particular populations of in need of guidance, control, domination that was rationalized by looking at Africans as lesser, separate species, lower on the hierarchy or civilization, development, sexuality, the body as aberrant (recall the Hottentot Venus and her reproductive anatomy) -- these GAZES (Foucault) are being employed to rationalize or justify particular interventions imperialistic and bodily interventions.

-- Butchart starts with Renaissance period, stereotypes of otherness, how they reinforce practices of African body as site of disease. Role of medicine as a part of the “Mission”, as part of a political mission, and the difference is substantiated in spatial segregation. Take a look at conclusion as well. How Apartheid segregation was justified. We're at the end of the European perspective on the African body. We're tracing how production of different forms of knowledge and the project of science in establishing difference and pathology. Ethnographies told from African side saw strategies to understand different cultural experiences. Question scientific method and methodologies. When a group/nation is in position of power to subjugate others, they are also creating knowledge, or engaging in knowledge production about the Other.

-- Anthropologists—tools of “ethnography” were rooted originally in colonialist endeavors and early ideas of natural science.

—Medicine: note also how it constructs its objects. There was no ‘African body’ before biomedical intervention into the body: medical missionaries focused particularly upon the body in this colonial area. Want to emphasize and review Foucault. Also, Frantz Fanon—interesting but will take us in a different direction. African body and mentality, - - activists writing in the postcolonial genre emphasize how colonialism also colonized the minds of Africans as well.

Background: Butchart. Sociology of power, African medicine. WHO. Violence prevention team. Former professor in psychology in South Africa.

Chapter 1: The African Body in History and Histories of the African Body

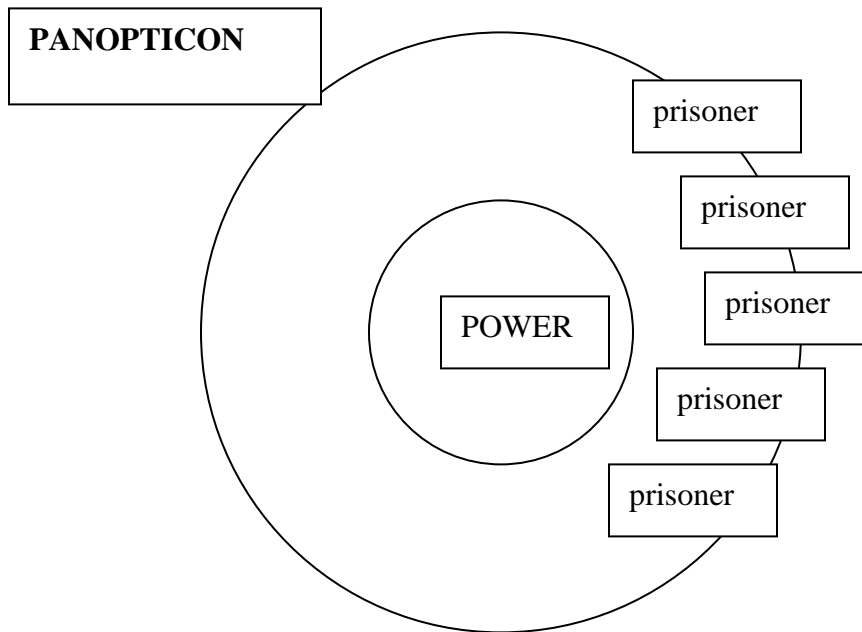
Looking at body itself and how other people have written histories of colonial Africa and how these histories have focused on the body as a passive receiver. Butchart wants to see it as more active—and subject. Generalizes 3 views of history of medicine in Africa.

- medicine as achievement, the oldest view of doctors to “civilize and bringing light”
- Medicine as functional response, histories
- Medicine as repression: focus on Africans. (quote on page 5). Not only as its effect but with doctors as directly involved in this repression, seeing themselves as instruments of power
- Historical context: colonial persuasion
- Personal approach to history—genealogical method. History is complicated where not all things related to each other in a cause-and-effect. Dissent.
- *Geneological—kinship focus of anthropology. Tracing power through time through generations. Foucault’s method is “archaeology”, “genealogy.” Looking at events, not as natural progression that came before but tries to unpack certain events. Figure of leper, asylum, the institution of the clinic, the prison—not exactly “okay this year, but okay this year”. A tracing of power, networks – Butchart’s text is Foucauldian in that sense. Not giving history of South Africa, but giving a trajectory through time, looking at kinship—genealogy—prime founders or leaders, the inheritance of power. Rather than a chronological series of events, unpacking some more than others*

Board: FOUCAULT

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| Sovereign Ruler with power over life and death Visible spectacles with functionaries, at a fundamental level. All these forms of power can exist simultaneously. | Leper Mad Plague | Discipline Quarantine Power applied on local, diffuse way Type of knowledge production=power Schools, army, family, prison, religion – institutions, applications of power, order, shaping the subjectivity—the consciousness of individuals (not identity/individuality)— regimentation, hierarchy of power, definite means of punishment. |
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- In applying power, one is creating it. Butchart’s example: the act of giving a test, examining their body, these interventions that the doctors make, public health management—create particular forms of knowledge about that
- Butchart: there was no African body until medicine created identified addressed it as an object of knowledge, intervention, POWER.
- Prison—the diagram of power, there were various philosophers, the most optimal way to survey a population of prisoners with least number of officers but greatest effect.



- shift of external power, visible to internalized power, diffuse—governmentality, panopticon and don't know where big brother is (not like martial law in countries)
- These practices of state, functionaries, to tabulating information about population, politics of health in 18th century, the development of medicine as a public endeavor, the ideas of the threats of poor, spread of disease, the statistical practices and intervention were made in order to gather information about a 'population' to preserve the security of state. Creating 'population' as an object.
- Butchart—these tests are creating idea of African body as an object, by doing these exams, etc. (Chapter 4).

Chapter 5: Missionary Medicine, Moral Sanitation and Fabrication of the Heathen Heart.

- How Medicine was being used in Africa. How changing views of body. Implicit in this idea that creation of Africans, Africans making choices.
- Medicine as instrument of power—and also more conversions.
- Moral medicine = barbaric behavior
- Doctors made it a visible spectacle, to create perception of powerful, authoritative, feared.
- Butchart is using Foucauldian schema of the “sovereign”—not a form of punishment, but the figure of doctor and spectacles of healing were garnering power for physician and the institutions of colonizers, their forms of knowledge. Which supposedly was more successful to bring more Christian baptisms. Comparison to public executions
- Theatres of missionary healing. Page 80-81. Are we missing the African voice in this subjugation? Small discrete objects are tools of discipline that shape and

- create the body as a type of consciousness—subjectivity—of that presence of that power and not only the receiver but all the observers.
- Sovereign—disciplinary forms of power. Trying to convert the minds of watching and the patient. ALSO created view of the body that was previous there, the African Body.
 - When hospitals developed, there wasn't as much public watching but missionary clinics became this place for “religious” revelations—an instrument of power to spread the European belief system
 - The anatomy of power—missionary description of African suffering
 - Attacking the specter of witchcraft, the attempts to convert the natives and disabuse them of their superstitions, the fetishisms, and that as a target of intervention—it grants it as a reality, and also an attempt to control, eradicate, or shape it. The two fold way that power is reckoned. Recognizing others' practices but also trying to dismantle them.
 - *Travelers were trying to manipulate local beliefs for their own ends but this is a much more a systematic attempt to apply medical science or techniques to convert those were most powerful—much more systematized. A later phase, where medicine is linked to instrument of the state. (Aside: the idea of saving the natives is still very much a part of public health and foreign policy that underlies much of the work and the US/Iraq), but this book is saying that for the first time, there is a concerted attempt or strategy to disabuse people of their notions. FABIAN: debates on to what extent that Africans had the capacity to govern themselves. On the one hand condemning them, but then there's this. There was still a point during the explorers who were trying to map out central Africa when it was not a full-blown strategy. Only toward end of 19th century applied in a systematic way and how medicine was part of the civilizing mission with the focus on the body and the attempts to address the mind.*
 - The implementation of medicine and history. Student: why aren't Africans still convinced of western medicine? Not all illnesses can be healed by medicine. Western medical practices may not address what the illness is. Medical anthropologist (Scheper-Hughes and Lock, Kleinman) have shown that “illness” and “disease” are different. Disease is physiological entity. Different care seeking practices. Some say that dichotomy is a false one and may have done more harm than good. But the western biomedical materialist approach has its limitations. Why is there so much disease in Africa? Where we have to be careful is to note when scientist or public health specialists place the focus on the individual, the individual belief system and behavior, rather than critique power inequalities, the effects of colonial domination, etc., that predispose some groups more than others to getting ill.

Chapter 7: Discipline and Danger: Psychological Science and the African Personality

- *From talking about medicine as public spectacle to... the mind, the disciplinary practices, the internal subjectivity of the person, not even the body, the thoughts and beliefs. Butchart is trying to show the shift from attention to the physical body to the creation of minute psychological tests/ exams in order to assess the African "interior." This is a less visible form of power and all justifying the policy changes in the social arena.*
- Doctors started to study psychology, clearly racist, developed theories about Caucasian and African minds.
- White fear that blacks were somehow unpredictable and dangerous and that they could seem sane and find --- like the myths that circulate – display impulsive violence/insanity. Enabled physicians to label blacks as “normally abnormal” -- to view any bad behavior as a mental illness that was also contagious. It was feared that whites could acquire the same characteristics.
- Doctors and psychiatrists were trying to find ways to demonstrate that blacks were less intelligent so that they could prove they were mentally inferior in every respect
- A better native, the cultivation of culture. The production of science and use of “insanity”. When psychoanalysis developed, gave blacks more personalities. *Example: even though tests are being applied, to justify segregation but the very fact of applying these tests was recognizing that Africans have a mind—another object of mind. Can map these shifts within Europe. This attempt to assess the 'African mentality'. This idea of a particular kind of African mentality, the need to regulate it because it could result in harmful behaviors against whites.*
- Sociology development: looking at how blacks were affected by surroundings and how urban/rural. 50s: personality tests, also racist.
- Black consciousness and alienated African. Black people began to reverse all of these ideas and taking control and examining how a negative body image could result from white society's views.
- “Liberatory psychology” and diffusion of danger. Some rejected notion of individual personality.
- Reaction against idea that black consciousness only a result of colonial practices. A rejection of focus on the individual to the exclusion of the socialized being.
- The pervasive threat, individual—to white society on some level and with apartheid laws in 1960s when racism was codified. Knowledge of individuals justified spatial segregation to justify or dominate.
- Creating the theater, the drama of medicine, the body of medicine to the point of medicine, the identification of a certain body type.
- The medicalization of resistance to power. Foucault where there is power there is resistance. To what extent are forms of resistance arising in relation to the types of power or domination that exists? Is it possible to have a form of resistance that are not responding to domination? People are looking at the extent to which racism in South Africa has been internalized— question of whether the black consciousness movement is only a reaction to colonial oppressive projects.

21A.460J – Medicine, Religion, and Politics in Africa and the African Diaspora

Lecture 9

3 March, 2005

- Example: Suppose there was a dress code that MIT students need to wear “love your beaver shirts” but someone says that this is ridiculous and always wears a Harvard shirt instead and others will think: that person will adopt heretical Harvard-ness. Trying to resist the ideology of MIT dress—reinforced the power of Harvard as an oppositional thing but also that this Harvard shirt you must acknowledge—simply a reaction, not opposing it. Still caught up in the same order by resisting. Still using the same rules and symbols that are imposed.
- Gender: Harvard President Larry Summers. Can there be anything that truly revolutionizes—will talk about Fanon on Monday. (Question: can’t change the rules of the game or are you reinforcing the rules of the game.)
- By making something that is invisible visible, that is one way to dismantle it. Compare Foucault’s view of power being dispersed throughout a network vs. the idea that the master’s tools can never dismantle the master’s house? Is true revolution possible or revolution from within?
- (trying to get through Butchart’s theoretical and Foucauldian arguments)
- This book takes Foucault out of the west.
- Gilman—play of symbols. Butchart—level of practices, policies, local realm. Two trajectories. The interaction of these two.