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The **London Journal of Critical Thought** is an open access and peer reviewed academic journal that publishes 'collections' of short pieces that emerge in conversation from participation in the London Conference of Critical Thought (LCCT). The LJCT is distinct from a traditional proceedings journal in that the pieces are not framed as stand-alone work, but rather a part of its particular collection.

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The Quality of Therapeutic Space: An Introduction

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Questions of Quality

While contemporary political debates concerning the provision of mental healthcare are consistently posed in spatial terms, there is a tendency for the nature of space itself to be taken for granted in these discussions. Perhaps the most common points of dispute are over the number of beds provided in psychiatric wards, and the amount of working space available for the provision of therapeutic activities.[1] Another recurring trope within the political debates concerning mental illness is the question of whether psychiatric patients should be treated in specialist hospital wards, or whether they should be provided with 'care in the community'.[2] Unfortunately, as these arguments rage, there is an implicit theory of space at play, in which space is assumed to be an inert, apolitical, and abstract framework within which our social and political actions are lived. It is considered as something quantifiable, divisible, and ultimately fungible that can be parcelled out in measured portions to play the role of the passive scaffolding within which any number of tasks can be performed. When these assumptions remain unchallenged, the only kinds of spatial questions that can viably be raised within the discourse of mental healthcare provision concern the *quantity* of space available and the *location* of this space. In contrast to this, the three papers included

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[1] See, for example, Emese Csipke, Constantina Papoulias, Silia Vitoratou, Paul Williams, Diana Rose & Til Wykes "Design in mind: eliciting service user and frontline staff perspectives on psychiatric ward design through participatory methods", *Journal of Mental Health* (2016).

[2] For the history of this debate, see N. Sartorius, *Psychiatry in Society*, (London: Wiley, 2002); and Martin Knapp, *Care in the community: challenge and demonstration* (Farnham: Ashgate, 1992).

in this collection aim to explore the *quality* of therapeutic space. They treat space not as a passive medium, but as something embodied and intensive, which is actively constructed, and which plays a functional role in experience.

The papers included in this collection began life as three voices in a conversation at the London Conference in Critical Thought 2016, where a series of panel discussions had been organised in an attempt to find connections between the diverse range of radical forms of psychotherapy that emerged in the middle of the 20th century, such as the Anti-Psychiatry movement in the UK and the Institutional Psychotherapy movement in France. These panels aimed to bring the various theoretical tools developed in these discourses together with a contemporary analysis of the clinic to see what lessons could be drawn for the provision of psychotherapy today. As part of this discussion, a range of spatial questions emerged that challenged the aforementioned conception of space as an inert, geometric and extended medium. Concurrently, a new set of spatial questions materialised concerning not only the *quantity,* but also the *quality* of therapeutic space: What kinds of spaces are suitable for therapy? How do spaces play an active role in treatment? How do the spatial dynamics of the hospital interact with the dynamics of mental illness?

Following the close of the LCCT, Susana Caló and Laura Palmer, who were panel members at the conference, and Anthony Faramelli, who attended, continued this discussion further. Working with a common appreciation of the need for a reassessment of the role played by space in therapeutic discourse, they each shared their academic and practical experiences in an attempt to map out new understandings of therapeutic space. The papers published below chart their respective investigations into the ways in which space itself is an intrinsic factor in the clinical process. Before introducing each of these three papers in turn, this introduction will attempt to provide a sketch of the historical debates that tacitly inform their discussion. This introductory work will show that far from making entirely isolated claims, the three papers included in this collection are embedded in, and respond to, a history of Western philosophical and scientific thought that has continually returned to the problematic nature of space. By connecting this discussion to the history of

psychoanalysis and the development of alternative psychiatric treatments in 20th century Europe, I also hope to uncover some of the ways in which the development of psychotherapy has relied on a critical reappraisal of the nature of space. While this introduction will inevitably fall short of providing a comprehensive overview of the full intellectual backdrop of contemporary discussions concerning the quality of therapeutic space, it is provided here as a tool for aiding further discussion in this area.

Space and the History of Psychotherapy

The history of Western thought is littered with arguments concerning the nature of space, with special attention given to those debates that concern the absolute or relative nature of space, and those that concern the subjective and the objective determinations of space.[3] Developments in both traditional and more radical theories of mind, and the forms of psychotherapy that they accompany, regularly return to these questions in order to find productive ways of thinking about mental phenomena. While the constant cross-pollination between theories of mind and theories of space is too large a topic to cover in depth here, there are two distinct connections that it will be useful to highlight in this introduction: first the various ways in which the mind itself has been described in spatial terms, and second the different ways in which the practice of therapy has been spatially modelled. Starting with the former, we should note that Freud continually relied on spatial models and metaphors for describing the mind. Most

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[3] Questions concerning the absolute nature of space were articulated particularly clearly at the end of the 17th Century in the disagreement between Newton and Leibniz: Sir Isaac Newton, *The Mathematical Principles of Natural Philosophy, Volume 1, (Book 1, Scholium)*, trans. Andrew Motte, (London: Knight & Compton, 1803), 6; and Gottfried Wilhelm Leibniz 'Letters to Clarke', published in *Leibniz: Philosophical Essays*, trans. Roger Ariew & Daniel Garber, (Indianapolis: Hackett, 1989), 324. These questions returned in a different form during the 20th Century turn towards relativity: Einstein, A., Lorentz, H. A., Minkowski, H. and Weyl, H., *The Principle of Relativity: A Collection of Original Papers on the Special and General Theories of Relativity*, trans. W. Perrett and G.B. Jeffery, (New York: Dover Books, 1952). The question concerning the subjective nature of space was presented most pressingly by Kant: Immanuel Kant, *Critique of Pure Reason*, trans. Norman Kemp Smith, (London: Macmillan, 1929), (A46/B64), 85.

obvious in this regard is Freud's topological model of the psyche, which splits the mind into the conscious, unconscious, and preconscious and relates them to one another according to a spatial configuration.[4] However, both Freud's earlier economic model, which uses a broadly thermodynamic metaphor for the mind, and his later structural model, which introduces the relationship between the id, ego, and super-ego, also rely on spatial language to explain the organisation of the psyche.[5] Apart from his use of these spatial metaphors, Freud also engaged with philosophical debates concerning the subjective nature of space to ground his own distinction between the conscious and the unconscious aspects of mental activity. Simply put, following the Kantian distinction between our perception of the *phenomenal* world on the one hand, and the *noumenal* world as it exists in itself on the other, Freud claims that conscious thought is contained within the spatial categories of human sensibility, while the functioning of the unconscious mind remains resolutely unspatialised. Freud makes this link explicitly in *The Unconscious (1915),* when he writes:

> The psycho-analytic assumption of unconscious mental activity appears to us… as an extension of the corrections undertaken by Kant of our views on external perception. Just as Kant warned us not to overlook the fact that our perceptions are subjectively conditioned and must not be regarded as identical with what is perceived though unknowable, so psycho-analysis warns us not to equate

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[4] For Freud's most extensive discussion of the topological model, before the introduction of his structural model, see Sigmund Freud, *The Interpretation of Dreams* (London: G. Allen & Unwin, 1955).

[5] For the former see "Inhibitions, Symptoms and Anxiety" (1926), in *Complete Psychological Works of Sigmund Freud, Volume 20,* (London: Vintage Classics, 2001), and for the latter see "The Ego and the Id" (1923), in *Complete Psychological Works Of Sigmund Freud, Volume 19* (London: Vintage Classics, 2001).

perceptions by means of consciousness with the unconscious mental processes which are their object.[6]

Freud refers to Kant's theories of space again in *Beyond the Pleasure Principle (1920)* when he argues for an understanding of the unconscious that is not conditioned by any spatio-temporal logic.[7] The point to emphasise here is simply that Freud's distinction between the unconscious and the conscious aspects of mental activity relies in part on a prior Kantian distinction between the non-spatialised world as it exists in itself and the spatialised world of human perception.[8]

Post-Freudian developments in psychoanalysis retain Freud's tendency for presenting psychic phenomena in spatial terms. Theories of child psychology have been particularly prone to analysing the spatial configuration of mental development, significant examples of which include Klein's use of object-relations-theory,[9] and Winnicott's analysis of play as an activity that occurs in a psychic space that is neither 'inner psychic reality' nor 'external reality'. [10] The child psychologist Jean Piaget also argued that in the early stages of development children lack any sense of a spatial Cartesian grid in their mental worlds and rely instead on an idea of emotional proximity.[11] In

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[6] Sigmund Freud, "The Unconscious" (1915), in *Complete Psychological Works of Sigmund Freud, Volume 14,* trans. James Strachey, (London: Vintage/Random House, 2001), 171.

[7] See Sigmund Freud, "Beyond the Pleasure Principle" (1920), published in *The Penguin Freud Reader,* ed. Adam Phillips, (London: Penguin, 2006), 155.

[8] While Freud read Kant directly, he also absorbed many Kantian forms of thought from both Schopenhauer and Nietzsche. For more on the influence of Kant on Freud, see Andrew Brook's chapter "Kant and Freud" in *Psychoanalytic Knowledge,* ed. Man Cheung Chung and Colin Feltham, (London: Palgrave Macmillan, 2003), 20-39.

[9] Mélanie Klein, "Notes on some schizoid mechanisms" (1946), in *Envy and Gratitude and Other Works 1946-1963* (London : Hogarth Press and the Institute of Psycho-Analysis, 1975).

[10] Donald Winnicott, "Transitional Objects and Transitional Phenomena", and "The Location of Cultural Experience", both in *Playing and Reality* (Harmondsworth: Penguin, 1967/1971).

[11] Jean Piaget, *The Child's Conception of Time* (New York: Ballantine Books, 1969).

the second half of the 20th Century, the influence of Einstein's theory of relativity can be seen in the development of psychoanalytic theory. The psychoanalytic work of Jacques Lacan is particularly interesting for us here as he not only uses spatial diagrams in his work, such as the L-Schema and the 'graph of desire', but he also tends to favour spatial metaphors drawn from 20th Century developments in mathematics that rely on an understanding of non-Euclidean geometry, such as the 'Borromean knot' and the 'Mobius strip'.[12] Other psychoanalysts, such as Henri Rey also made the case for using Einsteinian language, and especially the concept of the space-time continuum, to explain the experience of psychoses. [13] These developments show us not only that psychoanalysis regularly relies on spatial models for an understanding of the constitution of the psyche, but that developments in mathematical and scientific conceptions of space have played a role in the evolution of psychoanalysis.

Besides these examples of spatial theories of mind, it is also the case that the practice of psychotherapy has often been described in distinctly spatial terms. For Freud, the practice of psychoanalysis required a particular spatial organisation of the room: the analysand had to be lying on a couch and the analyst had to sit in a chair behind, and out view of, the patient. This spatial configuration was seen as integral to the activity of free association and to the development of the correct kind of analyst-analysand relationship. Without it the patient would not achieve the right state of mind and many psychoanalytic processes, most notably transference, could not occur.[14] This spatial relation between the analyst and their patient was not, however, unanimously accepted. Melanie Klein did not advocate the use of the couch for children and there has been much disagreement on whether the couch is suitable for the treatment of

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[12] For Lacan's explanation of the Borromean knot see, *On Feminine Sexuality: The Limits of Love and Knowledge (Seminar XX),* trans. Bruce Fink, (London: Norton, 1998); for more on his other uses of topological figures see Dany Nobus, "Lacan's science of the subject: Between linguistics and topology", in *The Cambridge Companion to Lacan,* (Cambridge: Cambridge University Press, 2003).

[13] Henri Rey, *Universals of Psychoanalysis in the Treatment of Psychotic and Borderline States: Factors of Space-time and Language,* (London: Free Association Books, 1994).

[14] Harold Stern, *The Couch, Its Use and Meaning in Psychotherapy,* (Human Sciences Press, 1978), 171.

psychosis.[15] During the proliferation of alternative psychotherapeutic practices in the 1950s and 1960s, the political implications of Freud's spatial relationship with his patients was directly challenged. This was in part an attempt to rehabilitate Freudian theory for use in psychiatric hospitals, where therapy was not delivered in the therapist's office. The sentiment of many of these approaches is summed up in Deleuze and Guattari's famous proclamation: 'A schizophrenic out for a walk is a better model than a neurotic lying on the analyst's couch'.[16] In fact, the founding acts of the Anti-Psychiatry movements in Italy and in the UK, as well as the Institutional Psychotherapy movement in France, all relied on a removal of the spatial restrictions that were traditionally imposed on psychiatric patients. Locks were removed from doors, and bars from the windows, in recognition of the fact that spatial confinement was not conducive to psychotherapy. These alternative psychotherapeutic practices were also closely connected to their particular locations. The Asylum at Gorizia in Italy, the clinics at Villa 21 and Kingsley Hall in London, and the clinics at Saint-Alban and La Borde in France, were all first and foremost *spaces* of asylum. In certain cases, the therapists working in these conditions began to use a continual reconfiguration of the spatial dynamics of the asylum in their practice. Perhaps the most obvious example of this is Fernand Deligny's work with autistic children, in which he attempted to draw maps of the children's movements around the asylum and to use the resulting spatial diagrams to find ways of sharing the children's space that would have therapeutic effects.[17] It will not be possible to give a full overview here of the many ways in which developments in the practice of psychotherapy have relied on alterations in the spatial relationship between patients and their environment. However, by pointing to these few examples we can see that it is not only the case that the mind has been described in spatial terms, but that the interaction between the mind of the individual and its environment, including the analyst, has been continually discussed as a spatial relation. This recognition has led to a number of different

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[15] Ibid., 199.
[16] Gilles Deleuze and Félix Guattari, *Anti-Oedipus,* trans. Mark Seem (London: Continuum, 2004), 2.
[17] Fernand Deligny, *The Arachnean and Other Texts*, trans. Drew Burk (Minneapolis: Univocal Publishing, 2015).

investigations into how the quality of the individual's psychic space can be treated by altering the quality of the surrounding social and therapeutic space.

Introducing this Collection

The 'Micro-Politics of Desire' stream at the London Conference in Critical Thought was organised in an attempt to explore the theoretical and practical interactions that exist between a diverse range of radical forms of psychotherapy that emerged in the middle of the 20th Century. As such, the theoretical backdrop to our discussions was drawn mainly from political and philosophical debates of the time. The intellectual climate of this period saw the convergence of philosophy, politics, and psychotherapy as a number of prominent thinkers critically reassessed all three of these disciplines in the wake of decades of political unrest in Europe. There were those, such as Félix Guattari, who were using psychoanalytic techniques to further a communist agenda, and those, such as Franz Fanon, who were putting their psychoanalytic training to use in post-colonial struggles. However, one thinker who was particularly influential in this regard, who has not yet been explored in this introduction, is Michel Foucault. Foucault's *Madness and Civilization: A History of Insanity in the Age of Reason*, first published in French in 1961, was a ground-breaking structural and historical analysis of the meaning of the concept of madness in European politics, philosophy, law, and medicine throughout the modern era.[18] In the book, Foucault investigates the many ways in which the mad have been defined as 'other' by the structures of State power and the resulting effects this has had on their confinement and treatment. Each of the three papers included in this collection takes Foucault's work on madness, and his categorisation of the psychiatric asylum as a 'heterotopia', as the implicit starting point for a re-evaluation of psychotherapy today. For Foucault, a heterotopia is a space that opens up within a society, and

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[18] Michel Foucault, *Madness and Civilization,* trans. Richard Howard (London: Routledge, 2005)

which establishes non-hegemonic conditions for action.[19] In a lecture given to architecture students in 1967, Foucault gives the following six criteria for the classification of heterotopia: they are established in all cultures but in a range of diverse forms; they can transform and have different functions at different points in history; they juxtapose within a single space a number of incompatible spatial elements; they include spatio-temporal discontinuities or intensities; they presuppose a system of opening and closing that both isolates them and makes them penetrable; and finally, they have a specific operation in relation to other, non-heterotopic spaces.[20] Each of the three papers presented in this collection takes note of, but aims to go beyond, Foucault's classification of the asylum as a heterotopia in order to explore the specific spatial dynamics that define the clinic's therapeutic capabilities and its interactions with the larger political field.

The first paper in this collection, written by Susana Caló and Godofredo Pereira, considers two central case studies in the history of Institutional Psychotherapy, namely the work of Tosquelles and Bonnafé at Saint-Alban and that of Oury and Guattari at La Borde. This paper raises the question of urbanism and explores the relation of the asylum to the city. Drawing on the work of the CERFI research group (Centre d'Études, de Recherches et de Formation Institutionnelles), Caló and Pereira argue for a clinical process that foregrounds spatial relations, and considers them in their social and political context. Laura Palmer's paper takes a slightly different tack, transporting us to the context of contemporary mental healthcare in the UK. Here Palmer explores the modern inpatient psychiatric facility as a heterotopia and a fractal variant in the mind of the inpatient. The paper investigates the many ways in which the processes of psychosis can interact with the spatial organisation of the long-stay secure unit to produce a feeling of the uncanny, and ultimately reproduce the conditions for dissociation that serve to restrict the possibility of therapy. Drawing together some of the threads in the first two papers, Anthony Faramelli's contribution

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[19] Michel Foucault, *The Order of Things: An Archeology of the Human Sciences* (London: Routledge, 2005), xix.
[20] Michel Foucault, "Of Other Spaces, Heterotopias", in *Architecture, Motion, Continuity* 5 (1984), 46-49.

considers the question of therapeutic space by contrasting Foucault's work on madness with Frantz Fanon's clinical writings. Paying close attention to the relationship between Fanon's psychotherapeutic work and his political activism, Faramelli considers the use of Institutional Analysis at the Bilda hospital in Algeria and ultimately presents Fanon's work as an integrated project for transforming enclosed spaces of deviation into revolutionary heterotopic spaces of possibility.

Despite the wide variety of clinical contexts considered here – ranging from France, to the UK, and Algeria, and taking in developments from 1940 until the present day – what connects each of these three papers is a shared analysis of the functional role played by space in psychotherapy. More specifically, each of the three papers turns a clinical and political eye to the question of subjectivity, analysing the way in which the spatial organisation of the therapeutic encounter affects the mode of subjectivity constructed within and across a group of individuals living in close proximity. By paying close attention to the active, constructed, and embodied nature of therapeutic spaces, these three papers each draw on insights from the fields of philosophy and critical theory to initiate a much needed conversation about the quality, and not only the quantity, of therapeutic space.

CERFI: From the Hospital to the City

Susana Caló and Godofredo Pereira

Assessment of the role that space plays in therapeutic processes and mental health tends to be reduced to the architecture of the hospital or clinical facilities. We believe that such analysis is, however, insufficient: the design of hospitals or clinical centers has always been part of broader projects, concerning not only the types of health care provision, but also their relation with the wider territory. The location of asylums outside the city, for instance, evidences a principle of segregation that is both therapeutic and architectural. In other words, conceptions of psychiatric care always carry an implicit thinking of space, which should be understood not only in terms of architecture, but also in terms of its urban and territorial context.

The institutional analysis movement in France provides a unique counter-example to this general trend, as space was considered key to the practice of psychiatric treatment. This became particularly evident with the emergence of CERFI (Centre d'Études, de Recherches et de Formation Institutionnelles). Bringing together urbanists, psychotherapists, educators and sociologists, the research produced by CERFI under the aegis of Félix Guattari carried an understanding of health care that was inseparable from thinking about the urban and the city, in medical, architectural, and (more broadly) social and political terms.

This paper will discuss the research on architecture, urbanism and psychiatry developed by CERFI, with a particular focus on Issue 6 of the journal *Recherches*, entitled 'Programming, architecture and psychiatry', which featured a collective reflection on the sectorisation of psychiatry by key figures in the theory of the sector and institutional psychotherapy. The paper begins by locating the sector proposal in line with the focus on space developed at Saint-Alban hospital and then at the La Borde clinic. In both cases the

understanding of space as an *active* therapeutic factor was vital, in the sense of providing heterogeneity of lived experiences and increased freedom of circulation. Finally, we will suggest how this renewed understanding of the relations between mental health and space grounded a paradigm shift from isolated hospitals to distributed activities of care, integrated within the city.

Saint-Alban and Geopsychiatry

The institutional psychotherapy movement emerged at the end of World War II amid growing awareness among psychiatrists of the need to think about the hospital in relation to the community at large. At the center of this development was François Tosquelles. A psychiatrist, psychoanalyst, and left-wing militant, Tosquelles found himself in France after fleeing Franco's military rebellion and the outbreak of the Spanish Civil. In January 1940, he was invited by Paul Balvet to join the hospital of Saint-Alban in Lozère. Under his direction, Saint-Alban became at once a site of resistance and militancy in both political and medical terms. Wartime conditions accelerated what Tosquelles already suspected: that mental and social alienation were linked. Isolated in the mountains, the hospital's condition was extremely precarious, due not only to the scarcity of resources during the war, but also to its geographic and climatic surroundings.

In this context, Tosquelles began turning the hospital into a therapeutic and social community. Several procedures were put in place to break down fixed social relations emanating from medical power, and to empower patients through more active therapy and control over their environment. At the heart of this project was the idea that the hospital could no longer be dealt with as a passive instrument or as a stable geographical site. Rather, it was important to grasp its institutional and social dynamics as part of the context of treatment. Examples of these procedures were the elimination of uniforms for doctors and nurses and setting up collective activities and opportunities for social exchange, such as the intra-hospital therapeutic club (*Club Thérapeutique*), composed of caregivers, patients and personnel (or even patients alone). The club allowed the patients

to be in charge of their daily life and to participate in their own care, thus limiting dependence on caregivers and personnel and providing a sense of mutual accountability.[1] Other procedures were the creation of a journal published and edited by members of the patients' club, entitled *Trait-d'union Journal de Saint-Alban,* and theatrical activities, which typically took place in the bar. As Camille Robcis notes, 'Tosquelles repeated throughout his work [that] the hospital – its architecture, its activities, its staff – constituted a *collectif soignant*, a "healing collective"'.[2] However, this modification of the hospital's spatial organisation, the amendment of the laws governing it, or the creation of a mechanism of empowerment were all part of a more significant and fundamental reassessment of psychiatric care seeking to move away from the idea of the hospital as a socially secluded environment, as it had been conceived up until that point.

This leads us to a key effect of Tosquelles' presence in Saint-Alban: 'One day, we tore down the walls of the compound. There was no longer a border between the hospital and the village of Saint-Alban. … After the war, the liberation of the territory was also the liberation of the asylum'.[3] There can be few cases of the often-repeated claim of tearing down the walls of an institution being so literally realised. There were, however, several reasons for this tearing down of walls, some of them essentially pragmatic. The hospital of Saint-Alban was isolated in the mountains with about 600 patients;

[1] The Therapeutic Club was a fundamental tool developed by Tosquelles. It was an associative structure, composed of caregivers and patients, that could take charge of activities in the institution. The therapeutic club was made possible by the circular of February 4, 1958, written by Tosquelles, which permitted (through a hospital committee) an association managed jointly by the patients and their caregivers to take charge of the daily life of a psychiatric sector. The Club did not simply manage the result of its work, like the revenues of the cafeteria; it also took charge of the occupational therapy registers, outings, solidarity funds, etc. See Marie-Odile Suppligieau, "Clubs thérapeutiques et « groupes d'entraide mutuelle » : héritage ou rupture?", *VST - Vie sociale et traitements* 95 (2007): 54-63.
[2] Camille Robcis, "François Tosquelles and the Psychiatric Revolution in Postwar France", *Constellations* 23(2) (2016), 218.
[3] Tosquelles, quoted in Robcis, Robcis, "François Tosquelles and the Psychiatric Revolution in Postwar France", *Constellations* 23(2) (2016), 218. Original quote from Bruno Coince, "Malades, médecins, infirmiers ... 'Qui guérissait qui?'" *Midi Libre*, December 3, 1991. Archives Lucien Bonnafé, IMEC, LBF 70 St Alban 95.

however, it was also close to a small village. For that reason, opening the walls to allow contact and trade with the village, and access to the mountains for the food and supplies, was of crucial importance for the fight against famine. Because of this, Saint-Alban was one of the few hospitals in which there were no deaths by starvation during the war. To put this in perspective, approximately 40,000 patients were thought to have died during the German occupation of France because of the reduction of supplies to psychiatric hospitals, as well as a policy of 'soft extermination' of the mentally ill endorsed by the Nazi State and seemingly approved by the Vichy Regime.[4]

The decision to tear down the walls of the hospital was more than a response to the contingencies of the war. The 'breaking of the walls' at Saint-Alban also occurred with regard to many of the internal partitions in the hospital, with the view to promoting a more flexible and less enclosed series of spaces. This can be seen in part as the fruit of Tosquelles' early experiences with psychiatric reform in Spain, particularly the influence on him of the system of *comarcas* in Catalonia. Implemented by the regional government of Catalonia from 1911 to 1924 as part of a broad process of territorial reorganisation, the subdivision of the territory into different *comarcas* (districts) resulted in a series of initiatives to promote the decentralisation of psychiatric care away from the main cities, allowing patients to remain within the proximity of their families. In the words of one of the leading figures of this process, Vives I Casajoana, it was important to establish

> a support network that is not centralized, one that is dispersed throughout the length and breadth of Catalonia with the intention of not removing patients from their families and their environment while at the same time satisfying the need for intermediate devices between hospital and social life, as well as the need to organize and form an effective service of nurses and social workers that would make possible that link and could follow the sick

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[4] Max Lafont, *L'extermination douce. La mort de 40 000 malades mentaux dans les hôpitaux psychiatriques en France, sous le régime de Vichy* (Paris: Editions de l'AREFPPI, 1987).

outside the hospital, to try to prevent the disease and its relapse.[5]

Allowing patients to live close to their natural environments would prevent further trauma and make reintegration easier. This approach had a lasting influence on Tosquelles, and preceded what came to be known later in France as sector psychiatry.[6] For Tosquelles and his colleagues, it was vital to oppose isolation and confinement with a more nuanced and integrated approach to mental health care, for example a diversification of strategies of care that included non-medical services and home visits (this was a frequent occurrence given the deep integration of the hospital in the village's daily life). To this broad range of activities and spatial understanding of care, the *Société du Gévaudan* – a professional group created by Bonnafé and Tosquelles and based in Saint-Alban – gave the name 'Geopsychiatry'.[7] Space did not merely refer to the site of therapy. In the sense of the hospital's architecture and (more importantly) of its relations with its surroundings, space became the object, and increasingly the means, of therapy.

La Borde Clinic

Among those who trained at Saint-Alban was Jean Oury, who went on to be responsible for establishing the Cour-Cheverny Clinic (La Borde), another important case in which space was central to institutional psychiatric experimentation.[8] In 1952, Jean Oury invited Félix Guattari to help organise the clinic's activities. From Oury and

[5] Salvador Vives I Casajoana, in Josep Ma Comelles, *La razon y la sinrazon,* (Barcelona: P.P.U., 1988), 110.

[6] See Robcis "François Tosquelles and the Psychiatric Revolution", 212-222.

[7] The *Société du Gévaudan* included both permanent and visiting doctors, nurses, members of the resistance and their families. See Françoise Dosse, *Gilles Deleuze and Félix Guattari: Intersecting Lives* (New York and Chichester: Columbia University Press, 2011), 41-42.

[8] Others who trained at (or sought refuge at) Saint-Alban were intellectual figures such as Frantz Fanon, Lucien Bonnafé, Georges Canguilhem, Georges Daumézon, Marius Bonnet, Paul Éluard and Jean Oury.

Guattari's perspective, institutions were ill and it was necessary to heal them. Oury coined the term 'pathoplastie' (pathoplastic) to name the particular illness affecting the institution and their pathological effect on patients.[9] Oury uses this term to distinguish the signs of individual pathology from the signs related to the hospital context. He developed the idea that a part of a patient's symptoms were directly linked to the atmosphere. Pathoplasty thus referred to the way in which disorders were constructed in correlation with the environment. For example, an environment in which patients were not accountable for their actions and had no autonomy or control over their daily lives had the pathological effect of a patient's lack of investment in their life. Intervention into these types of symptoms required intervening in the environment itself. For Oury and Guattari, therefore, an analysis of the institution was fundamental. As Oury put it: 'To treat the ill without treating the hospital is madness!' To this effect, Guattari developed the patient's club, an intra-hospital committee similar to the one in Saint-Alban. He also set up a series of organisational protocols with the primary goal of stimulating the autonomy of the patient, allowing them to regain a sense of responsibility and to 're-appropriate the meaning of their existence in an ethical and no longer technocratic perspective'.[10] These included workshops, drawing sessions, gardening and organising a newspaper.

For Oury and Guattari, the fabric and dynamics of La Borde's daily life were thought to offer analytical opportunities of diverse kinds. The scope of analysis was no longer limited to the privacy of the consulting room, but was extended to the whole of the institution. Specifically, this implied looking at the organisational and spatial dynamics of the institution to prevent the reinforcement of power structures, as well as to identify opportunities of treatment. Because of this, as in Saint-Alban, the spaces of the hospital were not seen as mere containers for different functions, but rather as active agents. The main guiding principles informing their thinking of space were the importance of guaranteeing that patients inhabited a heterogeneity

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[9] See, for example, Oury's seminars *L'aliénation* and *Séminaire de la Borde 1996/1997*. Jean Oury, *L'aliénation*, *Séminaire de Sainte-Anne* (Paris: Galilée, 2012); Jean Oury, *Séminaire de la Borde 1996/1997* (Nîmes: Champ social éditions Nîmes, 1998).
[10] Félix Guattari, "La Borde: a Clinic Unlike Any Other", *Chaosophy,* ed. Sylnère Lotringer, (Los Angeles: Semiotext(e) 1995 [orig. 1977]), 191.

of spaces, and as much as possible benefitted from freedom of circulation.

Heterogeneity of Spaces

In a classic hospital, medication was given in specific places (for instance the patient's room). In contrast, at La Borde, medication was administered in different spaces and by different people. The reasons for this were twofold. Firstly, this allowed breaking the hierarchical differences between nurses and doctors that were inscribed in the specific functions performed by each and the specific spaces they each inhabited. Secondly, this use of different spaces made it possible to extend the therapeutic space to the entirety of the institution, as all its spaces were considered to be meaningful locations for analysis. Guattari, for instance, recounts the importance of administering medication in a multiplicity of spaces rather than in the same room or with the same people so as to avoid a rigid association between a place and an experience of being subject to (or subjected to) a passive role, in this case the act of being given medication. In this sense, the series of events and workshops that Guattari organised were key in providing a multiplicity of practices that allowed patients to discover new spaces and new ways to inhabit the clinic. As Oury explains:

> It is a matter of working in a random field in which there can be unexpected, multireferential investments – as Tosquelles said – in a polyphonic dimension that cannot be programmed but which can indirectly manifest itself, if there are no structures that prevent this manifestation. The equipment cannot obtain this dialectical dimension. Our question is how to create a collective machine, a club – which is a part of it – that holds everyone accountable at all levels allowing for unexpected effects, interpretation effects.[11]

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[11] See interview with Jean Oury by Andréa Carvalho Mendes de Almeida, Danielle Melanie Breyton, Deborah Joan de Cardoso, Silvio Hotimsky and Susan Markusszower, "O Bom e o Mal Estar", *Percurso* 44 (2010). Available at

In this context, as Oury's remarks make clear, architecture was a non-negligible therapeutic vector: 'The hospital as a set of reference spaces! What does it mean that a patient goes every day, for months, to a dark space in an unfrequented service staircase? […] And the window, a place of opening to the beyond, a jump to death, a traditional phobic object!'[12] Treating the patients thus required curing the institution itself, including its spaces, its programs, its organisational structure, its practices and modes of communication. All offered analytical possibilities and constituted the therapeutic impact of the institution seen as a whole.

It was in pursuit of this objective that Guattari and Oury set up a system called the grid.[13] The grid was a rotating schedule of *tasks* and *activities*, which ensured that people tried out a series of different things instead of just sticking to a repetitive routine. A sample grid from the 1960s included the *tasks* of dishwashing, housecleaning, kitchen and night shift duties, and waiting at table. *Activities* were things such as clubs, running the journal, or doing the laundry. The tasks were associated with 'disagreeability' and the activities with 'agreeability'. Tasks assured the minimal daily functioning of the clinic and therefore ought to be shared by everyone. The definition of tasks and activities worked as an indicator of what the majority of people inhabiting the institution deemed to be more or less pleasant. An example of this was the laundry, which several texts referred to as being a popular task. From the perspective of institutional analysis, this apparently unimportant aspect could open a window into something else that would otherwise go unnoticed. Unsurprisingly, the kitchen was key: 'The kitchen then becomes a little opera scene: in it people talk, dance and play with all kinds of instruments, with water

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http://revistapercurso.uol.com.br/index.php?apg=artigo_view&ida=111&ori=ent rev. [accessed November 1 2016].

[12] Jean Oury, "Architecture et Psychiatrie", *Recherches. 06 Programmation, architecture et psychiatrie* (1967), 272. [Our translation.]

[13] For a detailed explanation of the grid see Susana Caló, "The Grid", Axiomatic Earth, Tecnosphere Issue, Anthropocene Curriculum & Campus, House of World Cultures (HKW). Available at

http://www.anthropocene-curriculum.org/pages/root/campus-2016/axiomatic-earth/the-grid/ [accessed November 1 2016].

and fire, dough and dustbins, relations of prestige and submission. As a place for the preparation of food, it is the center of exchange of material and indicative fluxes and provisions of every kind'.[14] Because of the grid, the previously unrecognised role played by certain spaces was now manifested at the level of the institution and were given weight in the process of analysis for the first time.

Freedom of Circulation

For this heterogeneity of spaces to work therapeutically, the ways in which patients and staff circulated through hospitals had to change as well. The daily activities of the clinic had to allow patients to meet with caregivers, other patients, and even the outsiders who were occasionally invited to take part in hospital activities. This concern was central to the institutional analysis movement. As Delion remarks,

> The heterogeneity of spaces, groups, therapeutic activities, and interstitial times ... is of great importance in the multiplication of possibilities of the palette. But if the patient cannot move freely so as to be able to take part in all of these 'transfers' – even partial, fragile, multiple – that heterogeneity is useless. And this is not only physical movement – rather a freedom of movement as encompassing the 'psychic'. This is why it is essential to put in place a system in which patients can easily choose their own path.[15]

If for Oury and Guattari the hospital environment should include a wide variety of spaces (both in terms of their 'atmosphere' and their function), this was also because in that way the wanderings of the

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[14] Félix Guattari, *Chaosmosis: An Ethico-Aesthetic Paradigm*, trans. Paul Bains and Julian Pefanis (Bloomington: Indiana University Press [Orig. 1992]), 69.
[15] Pierre Delion, "Thérapeutiques institutionnelles", *EM-Consulte, EMC-Psychiatrie,* 37-930-G-10 (2001). Available at:
 http://www.revue-institutions.com/articles/therapeutiquesinstitution.pdf
[accessed November 1 2016].

patients throughout the institution could act as a basis for therapeutic opportunities. As Oury contended, 'A real encounter cannot be programmed. The path is made through walking, but if the path is already traced we always stay in the same place […]. It is by chance that there may be an encounter, but it is not imposed'.[16] The purpose was one of 'programming randomness', to use Oury's expression. This required facilitating the conditions for meetings and encounters without attempting to determine their content. Such freedom of circulation became a method of promoting unpredictable encounters among patients, doctors, nurses, support staff and visitors. In that way it also became a diagram of how the daily life of the hospital was organised, and how its relationship with the broader social sphere was imagined.

CERFI

While working at La Borde, Guattari was also instrumental in creating the conditions for extending institutional analysis beyond psychiatric institutions by the foundation in 1965 of the FGERI (the Fédération des Groupes d'Études et de Recherches Institutionnelles). The FGERI was a network of psychiatrists, psychologists, educators, town planners, architects, economists, academics and others, dedicated to the analysis of the collective equipment of governance and institutional forms of oppression. Derived from the FGERI, the CERFI (Centre d'Études, de Recherches et de Formation Institutionnelles) took form in 1967 as a study center on institutional research that transposed the lines of enquiry raised in institutional analysis to urbanism and to the city.[17] Specifically, CERFI was created to receive research contracts from private organisations or the State, such as the research on the genealogy of public facilities (*équipement*

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[16] See interview to Jean Oury, *Percurso* 22 (2010).

[17] CERFI was originally founded in March 1967 with the aim of enabling FGERI to enter into research contracts with public or private bodies. For more on CERFI, read Stéphane Nadaud, "*Recherches* (1966-1982): histoire(s) d'une revue", *La Revue des revues* 34 (2003): 47-76; François Fourquet, "Presentation. Histoire du CERFI", *Recherches 46 L'accumulation du pouvoir* (1982): 47-72; Anne Querrien, "La Borde, Guattari and Left Movements in France, 1965–81", *Deleuze Studies* 10(3) (2016): 395-416.

collectif) developed with Foucault and commissioned by the Ministry of Equipment.[18]

One particular issue of the interdisciplinary journal *Recherches* merits our attention: Issue no. 6, 'Architecture–Programmation–Psychiatrie'. Compiled in 1967, it included contributions from members of FGERI and CERFI and leading figures of the institutional psychiatry movement, discussing psychiatric hospitals and their relations with the city and society. The issue presented a discussion about 'programs and norms' for psychiatric hospitals from the point of view of institutional psychotherapy and sector psychiatry, bringing together psychiatrists and city planners. Sector psychiatry in France refers to the organisation of public mental health in sectors defined as geographical areas. The idea of the sector emerged in the late 1950s in opposition to the nineteenth century asylum typologies, as well as to the modernist model of the hospital-village.[19] In essence, the sector followed the principle that treatment for mental illness ought to provide continuity of care, particularly between hospital and community treatment, and be as close as possible to the natural environment of the patient. It implied extra-hospital psychiatric services, such as day hospitals, ambulatory treatment, community and home consultations. The pragmatic reasons for this were clear, as Guattari stated in the introduction to the issue:

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[18] The CERFI research group on collective equipment included Michel Foucault, François Fourquet, Lion Murard, Françoise Paul-Lévy, Anne Querrien and Marie-Thérèse Vernet Stragiotti. Their work is documented in "Les équipements du pouvoir – villes, territoires et équipements collectifs", *Recherches* 13, edited by François Fourquet and Lion Murard (December 1976); and "Généalogie du capital 2: L'idéal historique", *Recherches* 14 (January 1974). On the collaboration between Michel Foucault and CERFI see Liane Mozère, "Foucault et le CERFI : instantanés et actualité", *Le Portique* [on-line] (2004), 13-14. Available at: http://leportique.revues.org/642 [accessed 1 November 2016].

[19] The promulgation of the circular on the sectorisation of psychiatry, in 15 March 1960, was the work of what became known as the 'Groupe de Sèvres'. It operated for two years between 1957-1958, gathering together psychiatrists working in hospitals, psychoanalysts, and private psychiatrists such as Georges Daumézon and Lucien Bonnafé. The debates of the group mainly focused on sectorisation and the participation of nurses in psychotherapy.

It makes it possible to consider, in very different terms, the problems of prevention, the comprehensive support of patients – not limited to the hospitalization process – the relationships with families, social reintegration. [...] Merely establishing a relative proximity between the institutions of treatment and the habitat of the patients offers much more flexible possibilities. It thus makes it possible to contemplate, which is often necessary, stays of short duration, in varying frequencies, and trial releases, home visits, etc.[20]

The Urban Hospital

One of the key texts in this special issue was a technical report entitled 'Programme d'un hôpital psychiatric urbain de moins de cent lits' (Program for an urban psychiatric hospital with fewer than 100 beds) by Drs Guy Ferrand and Jean-Paul Roubier, members of CERFI.[21] This report developed a critique of the isolated hospital along nineteenth century lines, but also criticised the 'hospital villages' influenced by principles of modern urban planning and the Athens Charter.[22] Consisting of large-scale structures for 300–600 people, hospital villages were typically situated outside a main town, not unlike traditional asylums. However, as Guattari remarked in his introduction to the issue, despite being better equipped than traditional hospitals and offering better material conditions of hospitalisation and care, hospital villages still had the disadvantage of 'being distant from the

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[20] Félix Guattari, "Presentation", *Recherches 6 Programmation, architecture et psychiatrie* (1967), 5. [Our translation.]

[21] This results from the first commission ever received by the CERFI, from the Ministry of Social Affairs (Directorate of Sanitary and Social Equipment). The request was to develop a draft on 'building standards applicable to psychiatric hospitals' (See Guattari, "Presentation", *Recherches* 6, *Programmation, architecture et psychiatrie* (1967), 3.

[22] Organised according to decentralised plans, with fluid circulations, they were subdivided into pavilions, each corresponding to a different function. In accordance to modern planning principles, they allowed for collective areas, vast green spaces, sunlight and natural ventilation.

usual *milieus* of social life'.[23] As an alternative to such institutions, Ferrand and Roubier proposed that psychiatric hospitals should consist of units with fewer than 100 beds and should be located within city areas. Like the *comarcas* that had been so influential for Tosquelles, they argued that these small-scale hospital units should be integrated with other care activities in each specific urban 'sector' (borough). This would prevent psychiatric care from being excluded from health at large. Seen in these terms, these units would be part of broader networks of part-time institutions, therapeutic workshops, day hospitals, home consultation systems, ambulatory treatment, drug rehabilitation programs, foster care units, visits to people's homes, etc. – and of course connected with the local neighborhoods, parks, squares and other public facilities of the city.

The principles of Ferrand and Roubier's proposal are tested in Nicole Sonolet's project 'Un centre de santé mentale urbain: proposition d'une expérience', also featured in Issue no. 6.[24] This project was the result of reflections following the construction of a psychiatric hospital by Sonolet in the 13th *arrondissement* in Paris and, as Sonolet wrote, following 'discussions with different doctors, social assistants, staff, patients and family members of patients'.[25] The proposal consisted of a basic model for an urban hospital, identifying the key technical, architectural and urban issues to be addressed. Of key relevance is how the project was designed to be one among many other medico-social facilities in the city. Two main design aspects are important to note. Firstly, the scheme promoted a strong relationship with the city by setting up a series of services on the external perimeter of the site, encouraging encounters between those inside and outside. The reason for this was to help the integration of patients and also to eliminate preconceived ideas about the psychiatric hospital among the local population. Such a configuration was in line with Ferrand and Roubier's idea of promoting stronger links between psychiatric care and the social life represented by the city:

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[23] Félix Guattari, "Presentation", *Recherches 6 Programmation, architecture et psychiatrie* (1967), 5. [Our translation.]
[24] Nicole Sonolet, "Un centre de santé mentale urbain: proposition d'une expérience", *Recherches 6 Programmation, architecture et psychiatrie* (1967): 137-155.
[25] Ibid., 137.

> In a psychiatric hospital, and mainly in an urban psychiatric hospital, the definition of the hospital structure should fit the idea of the participation of the realm of the hospital in the social equipment of the city. From the moment an urban institution is established, a real osmosis between its own equipment and that of the city should be implemented. The first therapeutic result is the permanent possibility of each hospitalized patient resuming contact with the real, outside of the artificial and unreal collectivity of the hospital.[26]

In accordance with this, the complex was designed to be accessible from all sides and the units could be independently accessed from the street level. The use of a courtyard typology makes it possible for us to imagine how such a speculative project could provide a model to negotiate very different urban settings. Here, too, the proposal for mixing distinct functions and programs – in particular the promotion of a close proximity between residential and institutional areas – was not only a critique of modern architecture, but more importantly a stand against the exclusion of madness from the collective life of the city.

Secondly, according to the author, the layout of the premises should maintain maximum flexibility in the use of spaces and the possibility of subsequent amendments, according to the needs that might emerge in the future. With this in mind, Sonolet suggested that some areas (interior or exterior) could be left empty to allow for the creation of new services or the expansion of local or existing ones. Not surprisingly, the design refers very closely to projects under development at the time, in the later stages of the modern movement, where the idea of a functional division of the city was being replaced

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[26] Guy Ferrand and Jean-Paul Roubier, "L'hôpital psychiatrique dans la cité : programme d'un hôpital psychiatrique urbain de moins de cent lits", *Recherches 6 Programmation, architecture et psychiatrie* (1967), 84. [Our translation.]

by the design of large multifunctional complexes integrating a diversity of services and a variety of programs.[27]

On closer reading, what is significant is how the design does not so much involve a dispersion of healthcare facilities throughout the sector, but rather concentrates them into one single, programmatically diversified complex – albeit one smaller than the hospital village. It is less health care as part of the city, and more a hospital that mimics the heterogeneity of urban scenarios. More importantly, the design is indicative of a problematic reduction of sector psychiatry into spatial and quantitative formulas – such as the reduction in size and the calculation of hospitals in terms of bed units per capita – that, by themselves, are unable to address mental health issues. Such a simplification of the problem of 'madness' is part of the reason why the principles of sector psychiatry as implemented by the government were received as reactionary by several groups in the medical community, and in particular by the members of the CERFI.[28]

Indeed, there were several important differences between the original proposals that had found a space of problematisation in *Recherches* 6 and the sector policies officially promulgated in March 1960 by the State, resulting from a hasty and bureaucratised appropriation. Firstly, the State's project was closer to a territorial distribution of 'mental police stations' oriented more towards control

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[27] Important references are the project for "The Free University of Berlin", 1963, by Candilis, Josic and Woods; the project for the 'reconstruction of Frankfurt Römerberg', 1963, by the same authors; or even Le Corbusier's "New Venice hospital" of 1964. It would be interesting to discuss the implications of presenting this unit as a single system of management, and considering whether small or more distributed units avoiding the mega-complex would not be more adequate for implementing the ideals of sector psychiatry.

[28] For instance, the rule of three beds per 1,000 inhabitants proposed by Ferrand and Roubier quickly became out of date in several areas with fast population growth, such as in Paris's suburbs and satellite cities. Furthermore, many forms of psychiatric control and repression continue to exist regardless, or independently, of hospitals. See Issue 17 of *Recherches* edited by the CERFI: "Histoire de la de la psychiatire de secteur, ou le secteur impossible?" *Recherches* 17.

than the actual improvement of mental health.[29] In administrative terms, the sector was implemented in a systematic way, something that was opposed by its proponents: it was geographically fixed to the point of creating immense bureaucratic difficulties.[30] In addition to this, for Daumézon, whereas the sector was implemented as a single psychiatrist that was assigned to a geographic location, the idea of the sector as proposed implied larger teams and collective work. Only by working collectively would the sector to be able to incorporate its negotiations with different institutions into their programming of necessary interventions. For Daumézon this raised another problem: the lack of teams that could move from the setting of a hospital to a very different setting where they had to negotiate with local authorities, students or planners alike. In other words, the sector required a radical change in perspective, for which neither the State nor traditional psychiatrists were ready. As noted by Guattari: 'Let us say that technocratic programming proposes a fixed plan once and for all, whereas continuous local programming, which is the very idea of an institutional programming, insists on an always possible and necessary intervention of collective interlocutors'.[31] Yet this never happened. The sector as implemented was not the sector as its proponents had imagined.

The City as Mental Health

Leaving aside the detailed discussion of the shortcomings of the sector's implementation by the State, we would like to highlight how the proposal for sector psychiatry (in its original intentions) reconfigured psychiatric care as an urban problem. The crucial reasons for this include the following. In economic terms, there are clear advantages in being close to home and other extra-hospital institutions (such as part-time institutions, therapeutic workshops, day hospitals, home-visits, ambulatory treatments or family placements),

[29] Georges Daumézon, "Le Secteur Impossible?", *Recherches* 17, 'Histoire de la psychiatrie de secteur ou le secteur impossible ?' (1975), 463. [Our translation.]
[30] Jean Oury, "Le Secteur Impossible?", *Recherches* 17, 'Histoire de la psychiatrie de secteur ou le secteur impossible ?' (1975), 466. [Our translation.]
[31] Félix Guattari, "Le Secteur Impossible?", *Recherches* 17, 'Histoire de la psychiatrie de secteur ou le secteur impossible ?' 1975), .431. [Our translation.]

as travel times and costs for both patients and medical staff are reduced. In recovery terms, this proximity facilitates the later stages of treatment, making home visits and hospital visits much easier. It also promotes autonomy and assists in the reintegration of patients into the community. Even more significantly, in thinking about psychiatric care at the scale of the borough, the proposal replaces a diagram in which madness implies social exclusion with one in which madness becomes a key element in the making of the city.

As we have shown, such a proposal follows on from the work on institutional psychotherapy and institutional analysis developed at Saint-Alban and La Borde and taken up by the CERFI. In this trajectory, space has become increasingly central to a collective effort that seeks to fight against social alienation without losing track of the therapeutic needs and specificities of mental health care. CERFI's approach to mental health and institutional analysis was, however, manifestly different from original proponents of sector psychiatry, such as Daumézon and Bonnafé. CERFI believed that psychiatry could not limit itself to the psychiatrist, nor was institutional analysis a domain of psychiatry only.

Regarding sector psychiatry in particular, Guattari argued that the teams managing each sector could not be based on psychiatric care only, and had to incorporate architects, planners or social scientists. What further distinguished CERFI was the idea that analysis could not be confined to a focus on the mental health institutions: it had to address social processes in their complexity (and therefore address other types of institutions). In articulating a vision of the hospital with a wide range of extra-hospital activities, therefore, the proposal of a psychiatry of sector opened the way for the removal of mental health care from the exclusive control of expert institutions, and located it at the intersection of a broader thinking of social services and public facilities, or more precisely, of *collective equipment*.[32]

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[32] We prefer the direct translation of *équipement collectif* as 'collective equipment' instead of the more common translation as public facilities, insofar as it maintains the focus on the relations between the equipment and a collective assemblage. Furthermore, the term 'public' necessarily limits the discussion of equipment to the State.

This shift from a unique focus on health facilities to a focus on the city at large is, in our view, the natural corollary to this trajectory, in which space became increasingly more central to psychiatric care. In Guattari's view, this trajectory culminated in the proposal of collective, interdisciplinary and self-managed teams of 'institutional programmers'.[33] Such a radical shift in the approach required to realise such a project is probably the best explanation for why its implementation by the State ultimately failed. Today, however, it is our task to analyse the conditions under which such an approach to the design of cities might be recovered.

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[33] Félix Guattari, "Le programmiste institutionnel comme analyseur de la libido sociale", *Recherches* 17, 'Histoire de la psychiatrie de secteur ou le secteur impossible?' (1975). [Our translation.]

Fractal Heterotopia and the Affective Space of Psychosis

Laura Palmer

The Modern Asylum

Foucault regarded the asylum as a quintessential *heterotopia of deviation,* a counter-space with the distinctive spatial logic to house the socially deviant.[1] The project of the early asylum to morally eliminate and quarantine madness[2] is resonant with the medical objectives of modern psychiatric hospitals seeking to contain the risk of mental illness and eradicate the symptoms most destructive to social functioning. With its discourse of acuity and emergency, the modern inpatient psychiatric hospital may be more appropriately classified as a *crisis heterotopia* – namely an inaccessible space reserved for those undergoing transitional crises. In facilitating the rite of recovery, the acute psychiatric inpatient hospital orientates upon the rehabilitation of individuals into wider society. However, tracing the historical arc of the asylum's death in the mid-twentieth century to the radical reforms of the 1990s,[3] the UK's geography of psychiatric care is no longer

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[1] Michel Foucault, *"*Des Espaces Autres*"*, *Architecture, Mouvement Continuité* 5 (1984), 46– 49, trans. Jay Miskowiec "Of Other Spaces" in *Diacritics* 16(1) (1986).
Available at http://web.mit.edu/allanmc/www/foucault1.pdf [accessed June 19 2017].
[2] Michel Foucault, *Madness and Civilisation: A History of Insanity in the Age of Reason* (New York: Pantheon Books, 1965).
[3] Gerald. N. Grob, *From Asylum to Community: Mental Health Policy in Modern America* (Princeton: Princeton University Press, 1991).
Service failures which led to the death of Jonathan Zito, murdered by Christopher Clunis, a schizophrenic patient, catalysed a series of reforms to the risk–assessment practices and dialogue between hospital and community care. For further information about the development of community care, see Helen Gilburt, Edward Peck, Becky Ashton, Nigel Edwards and Chris Naylor, *Service transformation – Lessons from mental health* (London: The King's Fund, 2014).

bound to the bricks and mortar of the central asylum.[4] Rather, the locus of psychiatry has been dispersed across a network of professionals, legal frameworks, policies and service providers[5] and diversified into a range of specialised National Health Service and independent residential provisions.[6] More ambiguities arise when recognising the bidirectional permeability of the modern hospital, where the hosting of both inpatient and outpatient services and voluntary admissions further perforate the bounded asylum's partitions.[7] Neoliberal terms like the *service user,* gradually replacing the traditional *patient,* also insinuate this migration from the paternalistic methodologies previously characterising psychiatric care.[8]

The modern psychiatric situation is not, however, entirely fluid. In accordance with Foucault's fifth heterotopic principle, heterotopias are penetrable yet their opening and closing is regulated by specific 'disciplinary technologies'.[9] In this regard, increases in the number of involuntary detentions under the Mental Health Act (MHA) 1983[10], the continuing use of physical restraint[11] and seclusion render secure

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[4] Erving Goffman, *Asylums: Essays on the Social Situation of Mental Patients and Other Inmates* (New York: Doubleday Anchor, 1961).

[5] Winnie S. Chow and Stefan Priebe, "Understanding psychiatric institutionalisation: a conceptual review", *BioMed Central Psychiatry* 13(169) (2013): 169–182.

[6] Graham Thornicroft and Michele Tansella "Balancing community-based and hospital-based mental health care", *World Psychiatry* 1(2) (2002): 84–90.

[7] Alan Quirk, Paul Lelliott and Clive Seale, "The permeable institution: an ethnographic study of three acute psychiatric wards in London", *Social Science and Medicine* 63(8) (2006): 2105-17.

[8] See Rebecca McGuire– Snieckys, Rosemarie McCabe and Stefan Priebe, "Patient, client or service user? A survey of patient preferences of dress and address of six mental health professions", *Psychiatric Bulletin* 27 (2003): 305–308. This study cited that 98% of an East London mental health sample reported preference for the term 'patient' over 'client' or 'service user'.

[9] Edward Soja, *Third Space: Journeys to Los Angeles and other Real and Imagined Places* (Oxford: Blackwell, 1996), 2.

[10] Health and Social Care Information Centre, *Inpatients Formally Detained in Hospitals Under the Mental Health Act 1983 and Patients Subject to Supervised Community Treatment, England – 2014-2015, Annual figures* (Leeds: HSICS, 2015).

[11] Revisions to the Code of Practice (2015) for the Mental Health Act, 1983 (MHA) elaborated upon stipulations of the 2008 Code of Practice's instruction that the use of restraint must be proportionate to risk. The document states that

units (at least) as eligible zones of closure and this is particularly accurate of the long-stay unit. Length of Stay (LoS) has most commonly been studied in acute settings to unravel the problem of prolonged admissions and delayed discharge within emergency mental health services.[12] Conventionally separate from acute services, long-stay (or complex care) units support a minority of inpatients with severe mental health needs, including neurodegenerative diseases, brain injuries or 'treatment-resistant' psychiatric disorders[13] which, due to patients' enduring risk or vulnerabilit[14], cannot be managed appropriately in the community.[15] Information about the duration of long-term admissions for this group is notably absent from the literature, particularly within the UK. With the possibility of Section 3 of the Mental Health Act being reinstated every six months to a year, patients within this category can be hospitalised for years, or even decades.

Drawing upon an understanding of space, not as a 'void… inside of which we could place individuals and things', but as 'a set of

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restraint is to be used only when it is the least restrictive option. Restraint should avoid any techniques restricting breathing or circulation and seclusion can only be used for those detained under the MHA.

[12] Rosa E. Jiménez, Rosa M. Lam, Milagros Marot & Ariel Delgado, "Observed-predicted length of stay for an acute psychiatric department, as an indicator of inpatient care inefficiencies. Retrospective case-series study", *BMC Health Service Research* 4 (2004): 4.

[13] Treatment-resistant schizophrenia (TRS) is sometimes less fatalistically referred to as 'incomplete recovery'. A proportion of long-stay inpatients, suffering from 'treatment-resistant' psychiatric disorders conditions have lived on wards for decades under renewing Section 3's of the Mental Health Act 1983. See Department of Health, *Mental Health Act* (London: HMSO, 2007 [orig. 1983]). For further information about treatment resistant conditions, see Charles Nemeroff, ed. *Management of Treatment-Resistant Major Psychiatric Disorders* (Oxford: Oxford University Press, 2012).

[14] For further information about the characteristics of long-stay inpatients, see Marc Afilalo, "Characteristics and Needs of Psychiatric Patients with Prolonged Hospital Stay", *Canadian Journal of Psychiatry* 60(4)(2015): 181-188.

[15] The Care Quality Commission, *Monitoring the Mental Health Act in 2014-15* (London: Williams Lea Group, 2015). Available at: https://www.cqc.org.uk/sites/default/files/20151207_mhareport2014-15_full.pdf [assessed June 19 2017].

relations that delineates sites',[16] this article reflects upon an abstraction of the long-stay psychiatric unit to explore the quality of space emerging from the long-term hospitalisation of chronic schizophrenia. Using Bachelard's evocative topoanalysis of the home as a starting point, I propose that the daydream of the institutional home creates a *fractal heterotopia.* Following a brief exploration of the phenomenology of psychosis, I suggest that the unit's independent inclination toward the uncanny elicits, or intensifies, the fractal's dystopian elements. A final thread engages with Deleuzian-Spinozan concepts of affect to explore the interaction between the institutional praxis of the hospital and its psychotic fractal. Here, focus is placed upon its most intimate encounter - that between the body and the antipsychotic injection. This analysis uses the modern heterotopia of the long-stay unit, and its affective condition of stasis and destabilisation, to highlight the propensity for therapeutic spaces to become *other* and opens a conversation about how space, materially and relationally, may better integrate the individual during the ruptures of psychosis.

The Fractal Heterotopia

Bachelard's *The Poetics of Space*[17] was seminal in its presentation of the life-worlds of our homes and the human persistence to carve out intimate space. In this, Bachelard posited that all inhabited space is imbued with memory and imagination, meaning the individual 'experiences the house in its reality and its virtuality'.[18] If, however, 'the house shelters day-dreaming, the house protects the dreamer, the house allows one to dream in peace',[19] what then when the house is a psychiatric hospital and the day-dream is psychotic?

At its most basic level, the home belonging to the imagination could qualify as a heterotopic counter-space unto itself. Indeed, the psychic projection of the home onto our dwellings connects with Foucault's third heterotopic principle of spaces, otherwise unrelated,

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[16] Foucault, "Of Other Spaces*"*, 3.
[17] Gaston Bachelard, *The Poetics of Space,* trans. Maria Jolas (Massachusetts: Beacon Press, 1994 [orig. 1958]).
[18] Ibid., 5.
[19] Bachelard, *The Poetics of Space,* 6.

juxtaposing, or layering upon, each another. But, more pertinently, when the long-stay unit is lived in, the heterotopia of the psychiatric hospital becomes a new interpretive site for the unfolding of the imagined home. It is from here that, I propose, the *fractal heterotopia* emerges. Fractals are, by definition, geometrically self-similar; therefore, in a literal sense, the heterotopia's fractal would be an exact cognitive replica of the space encountered. The fractal's self-similarity, or symmetry, is not however in its character, but is realised through the notion that the hospital and its imagined form inhabit the same physical dimensions and coordinates. In accordance with the third principle, the hospital and its fractal are tessellated upon a *place* which is one and the same. As Bachelard conveyed, the imagined home can be a radical permutation from the shelter it is based on. This challenge to self-symmetry is arguably no more pronounced than when the fractal heterotopia is refracted through the lens of psychosis.

Clinically, psychosis is a prevalent symptom of schizophrenic disorders and is defined by an impaired relationship with external reality, manifesting in disorganised thought, delusions and hallucination. [20] On a phenomenological level, psychosis is underpinned by anomalous self-experiences and disturbances of subjectivity which destabilise the integrity of the minimal self - the pre-reflective core of selfhood.[21] These distortions can be *hyperreflexive*, referring to an objectification or alienation of the processes normally experienced as part of the self, or *diminished*, where one does not perceive oneself as a separate agent or 'an experiencing entity'. [22] Delusional assessments of the outer world often accompany these

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[20] For more information about the diagnosis of schizophrenia and the removal of paranoid schizophrenia as a distinct clinical subtype of the disorder, see Rajuv Tandon, Wolfgang Gaebel, Deanna M. Barch, Juan Bustillo, Raquel E. Gur, Stephan Heckers, Dolores Malaspina, Michael J. Owen, Susan Schultz, Ming Tsuang, Jim Van Os and William Carpenter, "Definition and description of schizophrenia in the DSM-5", *Schizophrenia Research* 150(1) (2013).

[21] Barnaby Nelson, Josef Parnas and Louis A. Sass, "Disturbance of Minimal Self (Ipseity) in Schizophrenia: Clarification and Current Status", *Schizophrenia Bulletin* 40(3) (2014): 479-482.

[22] Louis Sass, Elizabeth Pienkos, Barnaby Nelson and Nick Medford, "Anomalous self-experience in depersonalisation and schizophrenia: A comparative investigation", *Consciousness and Cognition* 22(203), 431.

self-disturbances and are commonly expressed through themes of paranoia, persecution and imminent threat. [23] In light of these disturbances, what kinds of psychic projections are placed upon the institutional home? Funnelled through *delusions of reference* (the tendency to attribute significant meaning upon relatively neutral stimuli) and the schema of paranoia, it is conceivable that the fractal heterotopia produced by the psychotic mind veers toward the dystopian. Here, benign hospital design intending to create humane spaces and ameliorate the anxiety of being detained[24] is interpreted by the patient as a clandestine attempt to conceal the true nature of the hospital. By aping ideals of domesticity, as will be explored further, the hospital may be interpreted as a 'wolf in sheep's clothing' and, as a result, imaginatively reconstituted into a terrain of spiritual war, a derivative of the Soviet Union, an alien experiment, a virtual reality show, an extermination camp, or a conspiracy of the like.

Under the warped spatial logic of the fractal heterotopia, food and medication are transformed into poison. Amiable nurses and care assistants are attributed with ulterior, often malevolent, intentions. Misplaced objects are stolen, confiscated or destroyed. The fuzz of staff walkie–talkies are proof that nurses are robots. The laughter of friendship becomes evidence of patient collusion and the alarms of panic buttons confirm this as a place of danger. The mechanisms of opening and closing are governed by the holding power of the psychiatrist, an agent of spiritual warfare or a leader of the KGB. Even the intangible spacetime between the psychiatrist's weekly visits to the unit is susceptible with their absence corroborating their status

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[23] Ion Papava, M. Lazarescu, C. Bredicean, M. Ienciu, L. Dehelean, V. R. Enatescu and R. Romosan "Delusional themes in paranoid schizophrenia and persistent delusional disorder", *European Psychiatry* 28, no. 1 (2013), S1. See also Shitij Kapur, "Psychosis as a State of Aberrant Salience: A Framework Linking Biology, Phenomenology, and Pharmacology in Schizophrenia", *The American Journal of Psychiatry* 160(1) (2003): 13-23.

[24] For best-practice guidelines for the construction of new psychiatric healthcare buildings, see Department of Health, *Health Building Note 03– 01: Adult acute mental health units 2013* (London: The Stationery Office, 2013). Available at https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/147864/HBN_03– 01_Final.pdf [accessed June 19 2017].

as a behind-the-scenes puppeteer of the system and a dehumanised emblem of power.

The Uncanny

The dystopian quality of the unit can be unpacked further through Freud's characterisation of the uncanny. [25] Freud referred to the *unheimlich* (directly translated as the unhomely) as that which is familiar and at once estranged. The dissonance between the shelter and its daydream already works upon the vectors of being the same but disconcertingly different, yet I argue this is sharpened by the *unheimlich* potential of the long-stay unit in its own right.

Extracted from the broader structure of the house, the inpatient's room can be viewed as the home in miniature. The hyperpersonal assembly of the individual's possessions – their books, toys, ornaments and photographs of loved ones – is challenged by its immediate annexation to institutional corridors threading together the rooms of strangers. Punctured by the surveillance of staff performing clinical observations, this home is prone to slippage between the private and institutional, thus lacking the impervious and intimate shelter Bachelard described. Reminiscent composites of the domestic – the unit's TV room, kitchen worktops and bounded garden patios – are familiar but also alienating as family characters are substituted with strangers, rooms are tellingly devoid of opportunistically risky implements and the patient is unable to leave on their own accord. This disorientation may be compounded by the proliferation of unknown and unseen spaces within the hospital. Jentsch simply defined the uncanny as 'something one does not know one's way about in',[26] therefore the unchartered architecture of neighbouring wards and prohibited, locked spaces, from the nurses' station to medication stores, may unexpectedly emulate the surreptitious and

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[25] Freud, *The Uncanny,* 240.

[26] Ernst Jentsch's comment in "On the Psychology of the Uncanny" is cited in Sigmund Freud, "The Uncanny", *The Standard Edition of the Complete Psychological Works of Sigmund Freud, Volume XVII (1917– 1919): An Infantile Neurosis and Other Works, 217–256* (1919), 220. Available at http://layoftheland.net/archive/ART6933–   2012/weeks6–12/Freud_TheUncanny.pdf [accessed June 19 2017].

foreboding entity of Bachelard's cellar and further animate the patient's belief in the subterfuge of the hospital.[27]

Time, in the long-stay unit, can undergo a similar distortion. By operating outside the traditional regimes of time, Foucault proposed that heterotopias host their own heterochrony. As with the museum or library, the slow acquisition of artefacts in the patient's room comes to resemble a 'heterotopia of indefinitely accumulating time'.[28] This archival quality, where 'time never stops building up and topping its own summit',[29] combined with the monotony of life on the ward, can produce a sense of stasis, invariably at odds with the wider cross-rhythm of the institutional routine. Here, the unit's time-reckoning practices are repetitive and cyclical, tied to the socio-ecological activities of eating, washing, medicating, sleeping, and the cycles of bi-annual/annual meetings to review detentions under the MHA.[30] Another layer of disorientation is introduced when considering the unknown duration of the patient's hospitalisation which fluctuates with their psychiatric progress and the funding of their placement. At once fixed and circular, it seems the heterochrony of the unit lends itself to an institutional inertia which, when arbitrated by the characteristic disruptions of schizophrenic memory, may only intensify the temporal discontinuity at the centre of psychosis.[31]

The Encounter of the Two Heterotopias

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[27] Bachelard, *The Poetics of Space,* 18.

[28] Foucault, "Of Other Spaces", 7.

[29] Ibid.

[30] For more on the construction of time through ecological activities (albeit a different cultural context), see Edward E. Evans–Pritchard, "Nuer Time-reckoning", *Africa: Journal of the International African Institute* 12(2) (1939): 189-216.

[31] Disturbances in time-perception and detachment from the self in schizophrenia are excellently explored in Brice Martin, Marc Wittmann, Nicolas Franck, Michel Cermolace, Fabrice Berna and Anne Giersch "Temporal Structure of consciousness and minimal self in schizophrenia", *Frontiers in Psychology* 5(1175) (2014): 1-12.

Deleuzian-Spinozan concepts of affect[32] are particularly helpful for a study about psychotic elision, where the self/world boundary is fragile, where one's contents are not necessarily experienced as separate from others and where psychosis reaches to reterritorialise its environment. Affect theory thus refers to the 'composition of harmonious or disharmonious relations amongst diverse collectivities of humans and nonhumans',[33] the intensities and passages which are 'never self-contained, or fully self-present in an individual body existing "in" space or "in" time'.[34] Neither pivoting upon a subject or object-centred framework, affects are trans-subjective; 'they are becomings that go beyond those who live through them (they become other)'.[35] Remarkable parallels can be drawn between the trans-subjective parameters of affect and the subject/object disruptions central to schizophrenia. Equally, while affect theory makes it possible to speak about the minute exchanges of all matter, the schizophrenic appraisal similarly latches onto all things and empowers the seemingly negligible. The fragility of the internal/external binary in both affect theory and schizophrenia contests the exclusively interior and 'fantasmatic'[36] character of the fractal heterotopia. In this regard, the hospital heterotopia and its dystopian fractal interact via the patient's retaliation. This response can result in the patient boycotting medication, refusing to eat, neglecting self-care, becoming agitated towards staff and aggressive towards other patients. These presentations often lead to the clinical decisions to increase the dosage of antipsychotic medication, apply physical restraint and/or remove privileges. In an ironic misfortune, the firmness of the institutional response can be consistent with the patient's reading of adversarial care, seemingly confirming the credibility of the fractal heterotopia.

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[32] Gilles Deleuze, "Spinoza and the three ethics", in *Essays Critical and Clinical,* trans. Daniel W. Smith and Michael A. Greco (London and New York, Verso, 1997).

[33] Ibid., 139.

[34] Ben Anderson "Becoming and being hopeful: towards a theory of affect" *Environment and Planning D: Society and Space* 24(5) (2006), 737.

[35] Deleuze cited in Daniel Smith *Essays on Deleuze* (Edinburgh: Edinburgh University Press, 2012), 204.

[36] Foucault, "Of Other Spaces*",* 2.

Perhaps there is no more intimate encounter between the hospital and the patient than the chemical 'depot' injection meeting the body. These injections contain prescribed antipsychotic medication targeting delusional and hallucinatory symptoms and are administered on a weekly/monthly basis. While psychotic, the patient may view their medication as a potion of black magic, as an implant to control them from within or a deadly poison. However, when administered, a new schedule is at work. A biochemical clock, initiated by the chemical intervention, subjects the body to a new rhythm dictated by the medication's decay and subsequent renewal. Like Deleuze's analogy of arsenic, the ingested antipsychotic not only enters new relations with the body, but its entry marks a radical re-composition of the body's relations to itself.[37] This is especially pertinent when recognising the well-documented side effects of both typical and atypical antipsychotic medications, which extensively affect the body's motor, gastrointestinal, metabolic, cardiac and autonomic systems.[38] In the vein of affect theory, which recognises the affects discharged by objects, an intriguing situation arises when the object's raison d'être is to discharge and induce new energies. Modulations in neurochemistry inevitably re-orientate the sensory processing of sights and sounds on the unit and may contribute to an entirely new reading of space. The fractal heterotopia is then profoundly altered by the drug's application: dissolving altogether, persisting faintly or sporadically in shards, only to become more persistent when the medication wanes. This new source of destabilisation means the integrity of the fractal heterotopia now hinges upon an interplay between fluctuating psychosis and a timed chemical intervention.

Reflecting upon these multiple disturbances – the dystopian daydreams of psychosis, the unit's propensity toward uncanny, the

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[37] Gilles Deleuze, "Spinoza: Cours Vincennes" (1978). Available at http://www.webdeleuze.com/php/texte.php?cle=14&groupe=Spinoza&langue=2 [accessed June 19 2017].

[38] Anne– Marie Bagnall Lisa Jones, L. Ginelly, R. Lewis, Julie Glanville, S. Gilbody, Linda Davies, David Torgerson and J. Kleinen, "A systematic review of atypical antipsychotic drugs in schizophrenia", *Health Technology Assessment* 7(13) (2003): 1–502. Available at

https://www.ncbi.nlm.nih.gov/pubmedhealth/PMH0015112/pdf/PubMedHealth _PMH0015112.pdf [accessed June 19 2017].

fragility of the private/institutional, time distortions, objectifications of the body and the chemical fluctuations of the antipsychotic – this analysis indicates that the long-term hospitalisation of schizophrenia may be susceptible to recreating 'the dominance of multi-layered disconnectedness'[39] at the core of psychotic experience. What emerges is an affective zone of both stasis and destabilisation, inadvertently stalling the individual's reconnection with external reality and, most importantly, their minimal self. Using an abstraction of the long-stay unit, I argue that an affective reading of modern psychiatric heterotopias is crucial for understanding how dystopian spaces might proliferate in therapeutic institutions and thus impede patient recovery.

Concluding Thoughts

In *Of Other Spaces*, Foucault distinguished between the 'external space… in which we live' and the 'internal space'[40] of the daydream. Drawing upon the trans-subjective properties of both affect theory and schizophrenia itself, this article proposes that psychosis does not exist in one universe and the institution in another. Rather, this analysis critically engages with the vital exchange between the heterotopia and its fractal to explore the spaces emerging from the context of long-term hospitalisation.

This is not a renouncement of the psychiatric hospital; to borrow Guattari and Rolnik's caveat, 'there is not the slightest doubt that it is absolutely necessary that asylums and refuges should exist'.[41]. In praxis, the spatial relations of a psychiatric unit and the individuals inhabiting them will undoubtedly be diverse. Moreover, many have survived serious psychiatric crises and succeeded in independent living after life on the secure unit. Rather, my proposals agree with Jentsch that 'the better orientated in his environment a person is, the less readily will he get the impression of something uncanny in regard to

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[39] Brice Martin, "Temporal Structure of consciousness and minimal self in schizophrenia*",* 2.

[40] Foucault, "Of Other Spaces*",* 3.

[41] Felix Guattari and Suely Rolnik, *Molecular Revolution in Brazil,* trans. Karel Clapshow and Brain Holmes (New York: Semiotext(e), 2008), 376.

the objects and events in it'.[42] One might presuppose that the derived fractal heterotopias of schizophrenic patients will be equally dystopian in any setting. This analysis puts forward the possibility that spaces exist, materially and relationally, that are simply *better* at re-orientating people during their experiences of fundamental alienation.

Accordingly, by acknowledging the phenomenology of the porous self/world boundary of schizophrenic experience[43] and using affective analysis to highlight the granularity of the *in-between* and the 'passage between contexts', [44] critical conversations can be had about how psychiatric protocols responding to psychosis inhibit the integration of the person. Can the mistrust emanating from professional risk-managing practices be internalised as an essential mistrust of the self? Does the objectification of the body via the unit's constraints recreate the hyperreflexive objectifications of the subjective elements? Do the priorities of eliminating psychotic symptoms only reify basic rejections of parts of the self? Alternative therapeutic designs, such as La Borde, Kingsley Hall and the Soteria paradigm,[45] have had variable success in remodelling the treatment of mental illness. Their common approach, however, was to rearrange the hierarchical anatomy of psychiatric care and, adopting the parlance of Soteria, re-characterise treatment as a process of *being with*, rather than *doing to*. The collaborative core[46] of *being with,* in the case of psychosis, may model, initiate and sustain a more harmonious way of

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[42] Freud, *The Uncanny,* 220.

[43] Josef Parnas and Peter Handest, "Phenomenology of anomalous self experience in early schizophrenia", *Comprehensive Psychiatry* 44(2) (2003): 121-134.

[44] Anderson, "Becoming and being hopeful: towards a theory of affect*",* 736.

[45] Mosher was an associate of R.D. Laing and was exposed to Laing's work at the radical Kingsley Hall. For further information on the Soteria model, see Loren R Mosher, Voyce Hendrix and Deborah C. Fort, *Soteria: Through madness to deliverance* (Indiana: Xlibris, 2004). To see results about the effectiveness of the Soteria paradigm, see Tim Calton, Michael Ferriter, Nick Huband and Helen Spandler, "A Systematic Review of the Soteria Paradigm for the Treatment of People Diagnosed With Schizophrenia", *Schizophrenia Bulletin* 34 (2008): 181–192. The results suggest equal, or better, outcomes in people with first or second episode schizophrenia spectrum disorders when compared to medication-led approaches.

[46] Larry Davidson and John S. Strauss, "Sense of self in recovery from severe mental illness", *British Journal of Medical Psychology* 65(2) (1992): 131-45.

being. Consequently, I suggest that by diverging from the *doing* strategies of elimination and objectification, the individual can be more productively re-orientated and re-territorialised back into the body and back into human connection.

The Decolonised Clinic: Fanon with Foucault

Anthony Faramelli

As noted in this collection's introduction, both political and therapeutic debates concerning the provision of mental healthcare are consistently posed in spatial terms.[1] And, as Laura Palmer noted,[2] the generally accepted thinking in this regard is centred on confinement.[3] That is to say that the focus is on confining people deemed to be disruptive or threatening to society (deemed to be deviant) to hospital wards. Palmer goes on to note that the locus of modern psychiatry, 'is dispersed across a network of professionals, legal frameworks, policies and service providers' which responds to a neoliberal set of disciplinary technologies.[4]

This analysis is – rightly – building on the remarkable work of Michel Foucault. Foucault locates the synthesis of technologies of control, such as surveillance and confinement, in both medical and judicial practices. Simply put, medicine offered knowledge insofar as it had the ability to diagnose people who were considered to be non-productive and/or disruptive members of a community, but it lacked the power of confinement; conversely the judiciary had the power to confine people, but it lacked knowledge. As such, the psychiatric hospital and the asylum arose from the networked relationship of the judiciary and the medical establishment and it was this relationship,

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[1] Edward Thornton, "The Quality of Therapeutic Space: An Introduction", this collection.

[2] Laura Palmer, "Fractal Heretopia and the Affective Space of Psychosis", this collection.

[3] While Palmer is specifically examining Britain's National Health Service, this analysis can be expanded to include the hegemonic thinking throughout most of the world, especially Europe and North America.

[4] Ibid.

played out in psychiatric discourse, that gave rise to a new subject to be controlled.[5] Elaborating on the relationships, Foucault wrote that psychiatry formed as a network of spaces of internment, judicial spaces, disciplining conditions and procedures of social exclusion, and the norms of industrial labour and bourgeois morality; a whole network of relations between discursive spaces.[6] Reading Foucault from this vantage point allows us to see that in a way his entire oeuvre is primarily concerned with demystifying, and thereby disempowering, heterotopic spaces of confinement. Indeed, Foucault began his book *The Birth of the Clinic* with the claim that it is a 'book about space'.[7]

Foucault's omnipresent preoccupation with space moved to the forefront of his work in 1967 when he gave a keynote address at an architectural conference in Paris entitled "Des Espace Autres" or "Of Other Spaces".[8] However, 1967 also marked another important point in Foucault's life and career. In late September 1966 he took a position as Professor of Philosophy at the University of Tunis[9] and in 1967, the Arab–Israeli Six Day War led to riots in the streets. While the outbreak of anti-Semitic violence that followed deeply upset Foucault, this event also served to politicise Foucault's students, paving the way for their uprisings against the government in 1968, which Foucault supported in the face of severe government repression.[10] Foucault's experience of the events of 1968 in Tunisia focused his political need to think through the 'necessity of myth, of a spirituality, the unbearable quality of certain situations produced by capitalism, colonialism, and neocolonialism'.[11] But what is markedly absent in Foucault's oeuvre – which, given his thinking at the time on colonialism and neo-colonialism – is an engagement with another

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[5] Michel Foucault, *The Archaeology of Knowledge* (London and New York: Routledge, 2002), 48-49.

[6] Ibid., 197-198.

[7] Michel Foucault, *The Birth of the Clinic* (London and New York: Routledge, 2003), ix.

[8] For an elaboration of the content of this paper and Foucault's concept of 'heterotopias' see Edward Thornton's and Laura Palmer's contributions in the collection.

[9] David Macey, *Michel Foucault* (London: Reaktion, 2004), 76.

[10] Ibid., 81-83.

[11] Michel Foucault, *Power: Essential Works of Foucault 1954-1984* ed. James D. Faubion trans. Robert Hurley (London: Penguin, 2003), 280.

intellectual and political radical who had left Tunis just a few years before Foucault's arrival and whose influence – specifically in the areas of mental health and de-colonial politics – is still felt today, Frantz Fanon. While there is no direct evidence that Foucault was actively reading Fanon, [12] in many ways Fanon's clinical work foreshadowed Foucault's spatial approach to thought.

What follows will be a spatial analysis of Fanon's clinical practice demonstrating how Fanon shared Foucault's critique of psychiatry. However, this paper will show how Fanon took his critique much further, encompassing the entirety of colonialism's domination of space. This analysis will also demonstrate how Fanon's therapeutic work resisted French colonialism's enclosure of space and opened up heterotopic sites of creativity and liberation, and in doing so, how Fanon's oeuvre continues to be operative as a focal point of resistance and creation.

Most contemporary readings of Fanon tend to focus on his work as a militant intellectual of anti-colonial and black liberation[13] or else they attempt to 'Lacanize' his work in order to make it a better fit within the cannon of postcolonial theory.[14] However, in order to have a more rich understanding of Fanon's work and his contemporary relevance, it is important to holistically read his political commitments and his work as a psychotherapist together. When this is done, it becomes clear that Fanon needs to be situated as a thinker of space. In fact François Tosquelles, the psychiatrist who supervised him during his residency at Saint-Alban Hospital, wrote that Fanon was first and foremost concerned with analysing space and how subjects occupy the space of a clinic.[15] Tosquelles poetically wrote that Fanon embodied (*incarnait*) therapeutic space.[16] This is an important note

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[12] Indeed, it would be surprising to learn that Foucault was actively reading Fanon since his work was not well distributed in France at the time beyond his associations with Simone de Beauvoir and Sartre, both of whom were far more interested in his political writing than his clinical work. That Foucault probably was not actively engaging with Fanon is also reflected by the fact that their biographer, David Macey, did not note any connection or engagement between the two.

[13] An illustrative example would be the Lewis Gordon's work on Fanon.

[14] Here, and illustrative example is Homi Bhabha's engagement with Fanon.

[15] François Tosquelles, "Frantz Fanon à Saint-Alban", *Sud/Nord* 22 (2007): 9-14.

[16] Ibid., 9.

because, while most people tend to emphasise Fanon's engagement with native cultures, his therapeutic practice first and foremost needs to be seen as creating open and de-colonial spaces. The primacy of the spatial in Fanon's clinical work allowed him to move his practice of social therapy (derived from the institutional psychotherapy movement in post-War France) beyond the confinement of clinics and hospitals and into broader society.

Fanon had his first clinical experience of colonial psychiatry while studying in Lyon, where he was called on to treat North African – principally Algerian – patients complaining of crippling physical pain, but who had no significant physiological problems. The pain was largely felt in the abdominal area, but it could not be localised to any one organ and as such it seemed to defy traditional medical wisdom. The patients who manifested these symptoms lived in the poor slums of rue Moncey and were subject to omnipresent forms of racism and repression that cast North Africans as subaltern. In fact, the doctors treating them addressed their North African patients in the casual *tu* verb form, as you would address a child, and would speak to them in *petit nègre*.[17] Fanon concluded that although their symptoms seemed unclassifiable, nevertheless their suffering was real. Fanon termed this the 'North African Syndrome', a psychosomatic disorder affecting the North African population in France fostered by the lived experience of racism in poor slums.[18]

It was Fanon's experience with the North African Syndrome and his exposure to psychosomatic disorders[19] that opened him up to institutional psychotherapy and his work at Saint-Alban hospital under François Tosquelles.[20] Tosquelles was a radical psychiatrist and

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[17] David Macey, *Frantz Fanon: A Biography* (London and New York: Verso, 2012), 141. *Petit nègre* was a form of pigeon-French that was used by the French in their colonies in Africa and the French Antilles. The use of this vernacular created a power-dynamic that situated people from the colonies as linguistically and intellectually inferior. Throughout his work, Fanon paid close attention to *petit nègre* as in integral aspect of colonial racism. Indeed, its very name (which can be loosely translated as 'little negro') carries a striking semiotic violence.

[18] Ibid., 141-142.

[19] In his article "North-African Syndrome", Fanon credits his understanding of psychosomatic disorders to a paper written by Dr Stern in the journal *Psyché*.

[20] Ibid., 142.

Marxist from Catalonia. During the Spanish Civil War Tosquelles was an active member of the *Partido Obrero de Unifación Marxista* (Worker's Party of Marxist Unification) and served as the head of the Republican Army's psychiatric services until he was forced to flee Spain for France in 1939.[21] Tosquelles had already developed a reputation as the 'Red psychiatrist'[22] and in 1940 Paul Balvet recruited him to join the team at Saint-Alban Hospital,[23] where the hospital was also active in aiding the Resistance.[24]

It was at Saint-Alban that Tosquelles developed what came to be known as 'institutional psychotherapy', a therapeutic system which states that for an institution to work in a therapeutic manner it must first have a critique of itself as an institution. The founding notion of institutional psychotherapy stated that:

> the hospital itself was a Gestalt, or a set of elements and '*articulated spaces*' with a life of its own, and [...] it was impossible to separate the individuals who inhabit those spaces and acted on one another within them.[25]

This formed the basis of what the *Société du Gévaudan* (Gévaudan Society: a working group at Saint-Alban hospital formed by Paul Balvet, Lucien Bonnafé, André Chaurand and François Tosquelles) termed 'geopsychiatry' the interaction of therapeutic groups with one another, with their social and physical environments and with external communities.[26]

In forming networks of relationship between multiple heterogeneous spaces, geopsychiatry is the concrete praxis of what Foucault would later term heterotopias. Geopsychiatry established spaces of counter-sites, where the members of the subject-groups

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[21] Ibid., 144-145.

[22] Francois Dosse, *Gilles Deleuze and Félix Guattari: Intersecting Lives* (New York: Columbia University Press, 2010), 41.

[23] Macey, *Frantz Fanon: A Biography*, 145.

[24] Ibid., 146-147.

[25] Ibid., 144. My emphasis

[26] Dosse, *Gilles Deleuze and Félix Guattari: Intersecting Lives*, 42.

were able to encounter one another and fluidly flow between the 'real' spaces beyond the hospital or clinics and the 'heterotopic' therapeutic spaces. The movement means that, 'all the other real sites that can be found within the culture, are simultaneously represented, contested, and inverted. Places of this kind are outside of all places, even though it may be possible to indicate their location in reality'.[27]

Institutional psychotherapy was very much a form of resistance to the enclosed and alienating spaces created by the asylum system, the origins of which were analysed by Foucault. *Madness and Civilization* charts the establishment of the *Hôspital Général* in seventeenth-century France and the resulting 'great confinement' of those deemed to be mentally ill, fulfilling its role as an instrument of social order, rather than a medical facility.[28] These spaces of confinement persisted until the nineteenth-century when the maverick philanthropist Pinel 'liberated the insane' at Bicêtre, with the mythology surrounding this event stating that he personally removed the patients' chains.[29] However, Foucault also notes that far from 'liberating' the patients, asylums functioned to segregate them from society and punished their non-productivity by inducing a (pseudo-religious) sense of moral guilt for not being able to work.[30] The asylum's spatial organisation also

> [organized the patient's] guilt; it organized it for the madman as a consciousness of himself, and as a non-reciprocal relation to the keeper; it organized it for the man of reason as an awareness of the Other, a therapeutic intervention in the madman's existence. In other words, by this guilt the madman became an object of punishment always vulnerable to himself and to the Other; and [...] the madman was returned to his awareness of himself as a free and responsible subject, and consequently to reason.[31]

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[27] Foucault, Michel, "Of Other Spaces", *Diacritics* 16 (Spring 1986): 23-24.
[28] Michel Foucault, *Madness and Civilization* (London and New York: Routledge, 2008), 36-37.
[29] Ibid., 230.
[30] Ibid., 230-234.
[31] Ibid., 234-235.

This double movement of seeing themselves through the lens of guilt and reason disciplines patients in the asylum to view their subjectivities as inherently inferior to both their keepers and to the general public, creating what Félix Guattari would later term a 'subjected-group', a group disciplined and controlled by heterogeneous social forces.[32]

Institutional psychotherapy approaches therapeutic work with a critical reading of asylums that is congruent with Foucault's writing on the subject, and seeks to openly resist the reproduction of subjected-groups. The open and fluid spaces that institutional psychotherapy and geopsychiatry creates radically resist hegemonic psychiatric practices and the asylum's ordering of space. This focus on the reordering and opening up of space constitutes institutional psychotherapy's creative practice, the creation of therapeutic heterotopias where the hierarchical divisions between doctors, nurses and patients is collapsed in the practical day-to-day operation of the clinic. This creative re-organisation radically challenges Foucault's totalising reading of clinical spaces as enclosed zones of discipline. Claude Claverie further elaborated on institutional psychotherapy's emphasis on spatiality, writing that Saint-Alban's resistance to Nazi occupation and confinement is what transformed the hospital into a therapeutic community:

> During the Occupation the French underwent the individual and collective experience of a 'great confinement'. The word 'liberation' therefore had a very profound resonance, and its echoes shook the walls of the asylum (to use a heroic metaphor, the liberation of the asylum was an extension of the liberation of the country).[33]

[32] See Félix Guattari, *Psychoanalysis and Transversality* (New York: Semiotext(e)/Foreign Agents and MIT Press, 2015), 64-68.
[33] Claverie in Macey, *Frantz Fanon: A Biography*, 147.

In this way institutional psychotherapy was formed as a heterotopic inversion, a counter-space, of the Nazi concentration-camp world and this spatial action was further applied as a counter-space in resistance to traditional forms of psychotherapy that seek to isolate and confine the patient, by opening up space in order to disalienate and de-depersonalise patients.[34]

Shortly after his training at Saint-Alban, Fanon took a post in Algeria at the Blida-Joinville Psychiatric Hospital in 1953. We know from an article detailing institutional psychotherapy in practice co-authored with Tosquelles that Fanon was eagerly putting into practice this radical approach to mental health at his new appointment. The perversity of the confined spaces of French colonialism following their 'liberation' from Nazi occupation was a critique that Fanon implicitly brought with him to Algeria, writing that

> Under the German occupation the French remained men; under the French occupation, the Germans remained men. In Algeria there is not simply the domination but the decision to the letter not to occupy anything more than the sum total of the land. The Algerians, the veiled women, the palm trees and the camels make up the landscape, the *natural* background to the human presence of the French.[35]

While Foucault argued that psychiatry is a punitive judicial-medical system designed to confine and isolate individuals who threaten the public order, for Fanon the entirety of colonialism was in essence a meta-system encompassing medical, governmental, legal and cultural apparatuses that were all designed to enclose space for the purpose of created disciplined colonial subjects. This distinction is drawn into sharp focus by looking at who can be confined. Foucault notes that madness represents a minority status, or in other words, madness is considered to be a form of childhood.[36] As such, the 'madman' is alienated from his or her civil status and given a judicial status of

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[34] Tosquelles, François, "Frantz Fanon à Saint-Alban", *Sud/Nord* 22 (2007): 12.

[35] Frantz Fanon, *The Wretched of the Earth* (London: Penguin Classics, 2003), 250.

[36] Foucault, *Madness and Civilization*, 239.

minor so that they could be confined and 'educated'.[37] Conversely, psychiatric medicine, specifically the Algiers School, psychopathologised the entire Algerian population, claiming that they have a child-like pre-logical and primitive psyche.[38] The entire population then are deemed to be minors. Indeed, while lacking a spatial element, the chapter "The So-Called Dependency Complex of Colonised Peoples" from *Black Skin, White Masks* explicitly engages with the claim that colonised peoples are inherently child-like and dependant, arguing that the formation of inferiority complexes in colonised peoples exists only because they live in a society that makes feeling inferior due to their racialised identity.[39]

The Algiers School provided the doctrinal basis for the psychiatric work being done at Blida-Joinville.[40] The hospital was an old religious establishment that, under the conditions of the 1838 law, was contracted to the colonial Algerian government for treatment of the mentally ill.[41] The 1838 law consecrated psychiatry as a specialised medical discipline and gave it the power of compulsory hospitalisation, the forced confinement, of the 'insane', those whose 'mental derangement' was deemed likely to jeopardise public order and safety.[42] Like most hospitals at the time, Blida-Joinville was surrounded by a high perimeter wall and visitors to the hospital had to pass through a supervised front gate, however once inside the grounds the hospital had a, 'pleasant environment of a large park with sports facilities and gardens where tree-lined avenues and paths linked two-story buildings'.[43] The hospital had a patient capacity of 700-971, but possibly housed as many as 2000 patients when Fanon arrived in 1953, and the wards were separated along ethnic lines.[44] Before 1953 the doctors who ran the hospital maintained limited contact with the patients. So little that any doctor contact with the patients post-

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[37] Ibid., 239-240.

[38] Macey, *Frantz Fanon: A Biography*, 222-223.

[39] Frantz Fanon, *Black Skin, White Masks* (Sidmouth: Pluto Press, 2008), 74.

[40] Macey, *Frantz Fanon: A Biography*, 224.

[41] Ibid., 205.

[42] Michel Foucault, *Abnormal* (London and New York: Verso, 2003), 140-141.

[43] Macey, *Frantz Fanon: A Biography*, 213.

[44] Hussein Abdilahi Bulhan, *Fratnz Fanon and the Psychology of Oppression* (New York: Plenum Press, 1985), 214; Macey, *Frantz Fanon: A Biography*, 213 and 225.

admission was only, 'a matter of surveillance rather than therapy', leaving the patients, 'largely to their own devices'.[45] Beyond that, accounts of the way in which patients were treated vary widely. Hussein Abdilahi Bulhan writes that the patients were kept in chains and that Fanon quite literally unchained them.[46] Conversely, David Macey writes that accounts of Fanon unchaining inmates are the stuff of myth. Macey cites Jacques Azoulay– a psychiatrist who worked closely with and was a friend of Fanon – who denied that anyone was ever held by chains, and Fanon himself never mentions chains in his writings.[47]

In many ways the space of Blida-Joinville, with its racial and ethnic segregation, inequalities and indifference to the Muslim patients, represented a microcosm of Algerian society at the time.[48] Like all colonial towns, Blida had a 'dual identity': a well-designed European zone that resembled the south of France; and a chaotic Arab area that was often referred to as 'nigger town'.[49] This was a Manichaean world that was literally divided into two distinct spaces that are separated by an insurmountable distance.[50] Working within this Manichaean space, Fanon and Azoulay immediately began to institute institutional psychotherapy techniques at Blida. They began on the ward for European women patients, organising social activities and occupational therapies like knitting and dressmaking in order to re-order the social architecture to involve isolated patients in collective activities.[51] Fanon's experience with institutional psychotherapy with the European women was widely successful precisely because they managed to transform the space into fully European space: the female patients began producing a newspaper which dealt with themes common in French culture; the film and musical events organised were all based on French culture; and the occupational therapies offered all reinforced French gender-types. The most telling act which transformed the hospital into a European space occurred during

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[45] Macey, *Frantz Fanon: A Biography*, 224.
[46] Bulhan, *Fratnz Fanon and the Psychology of Oppression*, 215.
[47] Macey, *Frantz Fanon: A Biography*, 225.
[48] Bulhan, *Fratnz Fanon and the Psychology of Oppression*, 218.
[49] Macey, *Frantz Fanon: A Biography*, 211.
[50] Fanon, *The Wretched of the Earth*, 39.
[51] Macey, *Frantz Fanon: A Biography*, 226-227.

Christmas 1953 when a Christmas tree was brought into the ward for the celebrations, had a decorated nativity crib and people gathered together to sing carols.[52] This effectively re-organised the space into a communal French society, fully inverting the sterile, cold, and isolating space of the hospital.

Fanon and Azoulay's attempt to use institutional psychotherapy with the Arab men was an initial failure. Beyond the language barrier (Fanon did not speak Arabic when he was given the post at Blida-Joinville and had to speak through an interpreter), their attempts to organise meetings, celebrations, and occupational therapy all fell flat. Fanon assessed that the reason for their failure was because they were 'attempting to create certain institutions, but we forgot that any attempt to do so has to be preceded by a tenacious, concrete and real investigation into the organic bases of the native society'.[53] In other words, they were trying to enclose the Arab patients into a space that they did not culturally understand. This affectively created a double alienation: the Arab patients were alienated from their civil status as adults and then alienated from their cultural spaces. Treating the Arab patients required a radical ethnocentric reversion of their practice. 'Fanon henceforth "humbled himself" to the native culture and, rather than be arrogant or indifferent, became "timid and attentive". This Antillean who from birth was a hostage to European culture, history and conceit had to make a remarkable "leap" in *time*, *geography*, and *values* for a homecoming to the shores and cultures of Africa'.[54] This 'leap in time, geography and values' established cultural spaces such as a Moorish café and occupational therapy was moved outside in the space traditionally occupied by men in Algerian society.[55]

Writing in clear phenomenological terms, Fanon stated that it is necessary to engage with the world as it is constructed through culture and tradition because

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[52] Ibid., 226.

[53] Frantz Fanon in Macey, *Frantz Fanon: A Biography*, 229.

[54] Bulhan, *Frantz Fanon and the Psychology of Oppression*, 217. Emphasis in original.

[55] Macey, *Frantz Fanon: A Biography*, 230-231.

> The imaginary life cannot be isolated from the real life; the concrete and the objective world constantly feed, permit, legitimate and found the imaginary. The imaginary consciousness is obviously unreal, but it feeds on the concrete world. The imagination and the imaginary are possible only to the extent that the real world belongs to us.[56]

What Fanon was beginning to articulate was the relationship between the real world with its limitations and prejudices and its inverse image, a heterotopic world of possibility. For Fanon, the way in which these worlds bleed into each other forms the basis for his radical anti-colonial form of psychotherapy, adjusting the society to fit the individual.

Fanon's clinical reforms constituted a direct challenge to the prevailing colonial framework, the Algiers School, and the larger French psychiatric establishment.[57] Blida-Joinville's space as a counter-site became radically more political through the hospital's role aiding the FLN during the war. The transformation of the hospital to a refuge for the FLN fighters and Fanon's treatment of both the FLN and the French troops during the war are well documented, as such elaborating on that aspect of Fanon's practice is beyond the scope of this paper. However, the role that Blida-Joinville played during the war brings it uncannily close to the space of Saint-Alban. This is not to merely compare the histories of the two hospitals, but to assert that in the same way that Tosquelles transformed the space of Saint-Alban into a liberated space, or a space of liberation, so too did Blida-Joinville become a heterotopic space in its resistance to the confinement of colonialism.

Fanon's work at Blida-Joinville took institutional psychotherapy's basic program and displaced its inherent Eurocentrism by introducing a more nuanced and critical reading of race and culture. However it was in Tunisia that Fanon fully developed his therapeutic method. This new turn in Fanon's work

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[56] Frantz Fanon in Macey, *Frantz Fanon: A Biography*, 233.
[57] Bulhan, *Fratnz Fanon and the Psychology of Oppression*, 218.

occurred in 1959 when he began to work at the Hôpital Charles-Nicolle, a general hospital in Tunis with a neuropsychiatric ward attached. Drawing on the lessons learned from Saint-Alban and Blida, Fanon began to transform Charles-Nicolle into Africa's first psychiatric day clinic.[58] First and foremost, the physical space of the day centre needed to be changed in order to literally open up the therapeutic practice:

> The first task was to transform the building itself. Handles were fitted to the doors so that they could be opened from the inside. The bars were removed from the windows and the straightjackets and other physical restraints were taken away. Patients were employed to knock down the walls of the old isolation units, which resembled punishment cells rather than hospital rooms. The entire building was repainted to make it look less forbidding.[59]

In an article published at this time (although written while he was still at Blida) Fanon adopted a position that was openly critical of Tosquelles, having arrived at the conclusion that aggression, like most other forms of psychopathology, is formed out of reciprocal relations, meaning that much of the aggression exhibited by patients in hospitals was often provoked by their confinement. As such the confinement and social isolation of hospitals and clinics, even Saint-Alban, provoked more psychopathology in the patients.[60] Fanon's solution to this was an open form of psychiatric management that would: (1) eliminate the punitive aspect of incarceration in hospitals, and (2) provide a more efficient form of psychiatric treatment by (3) keeping the patients in close contact with their community.[61]

This turn represented a radical modification of institutional psychotherapy, which created 'neo-societies' within the clinic. These neo-societies were an important advance insofar as they counteracted

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[58] Macey, *Frantz Fanon: A Biography*, 315.

[59] Ibid., 318.

[60] Bulhan, *Fratnz Fanon and the Psychology of Oppression*, 241-242.

[61] Ibid., 242-243.

the regressive tendencies of patients and established new social contracts.[62] However, Fanon observed that:

> It must always be remembered that with institutional therapy we create frozen institutions, strict and rigid rules, schemes which rapidly become stereotypical. In the neo-society, there is no innovation, no creative dynamism, no newness. [...] That is why we believe today that the true milieu of sociotherapy is concrete society itself.[63]

This is because, they argued, mental illness arises out of a form of alienation from the world and a loss of existential freedom; in other words mental illness is a pathology of liberty.[64] The innovation of the day centre then was to provide the maximum amount of freedom, of space and movement, to the patient in order to aid them in being more conscious (*conscienciser*) of their conflicts and establish a new relationship with the world.[65]

Fanon's revolutionary contributions to psychotherapy and post-colonial political practices dramatically re-oriented our engagement with space. When considering his therapeutic practice alongside his cultural politics, which sought to de-colonise society and cultural spaces as well as de-centre and open up political structures,[66] what begins to emerge is a coherent spatial approach to de-colonisation that functions at the level of the individual and of the collective psyche. This approach can be conceptualised as geo-social therapy, a therapeutic practice that encompasses social, cultural and physical spaces. Fanon's work radically de-centres psychotherapy's Eurocentrism through encounters with minoritarian subjects, making it an inherently de-colonial therapeutic practice. While Bulhan argues

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[62] Ibid., 247.

[63] Fanon and Geronimi in Bulhan, *Fratnz Fanon and the Psychology of Oppression*, 248.

[64] Bulhan, *Fratnz Fanon and the Psychology of Oppression*, 247; Macey, *Frantz Fanon: A Biography*, 320.

[65] Macey, *Frantz Fanon: A Biography*, 320.

[66] See "The Pitfalls of National Consciousness" and "On National Culture" in Frantz Fanon, *The Wretched of the Earth*.

that this represented a definitive break with Tosquelles and institutional psychotherapy more generally,[67] geo-social therapy is better viewed as institutional psychotherapy's de-colonisation and its liberation from confined clinics and hospitals. Fanon's legacy is perhaps most acutely felt as an *analyseur*, a critical object through which analysis can take place. In other words, his most important contribution to contemporary therapeutic and political practices is to give us the tools to continually resist enclosed spaces of discipline and to create new and open spaces of liberation.

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[67] Bulhan, *Fratnz Fanon and the Psychology of Oppression*, 241.

Rethinking Political Violence, Memory and Law: Introduction

Ozan Kamiloglu and Federica Rossi

The liberal humanitarian tradition constructs the concept of the human and his or her right to be protected against any form of violence. Western democracies build their justice on the principle of enlightened universal rationality that is supposed to distinguish their source of the rule of law from that of the 'barbarian Other' whose law is considered to be entangled with violence. As physical violence is rejected as the hallmark of the Other – the irrational, pre-modern, ideologised or indoctrinated, anti-democratic enemy – the Western liberal discourse flaunts the imperative of its moral and legal condemnation for the sake of the preservation of those *universal* values of individual freedom and human rights. The consensus upon these values draws upon the claim of the rationality of the law, thus justifying the violence inscribed in its own very foundation, or 'spirit', in the mechanics of its social, economic and political structure and in its strategies to prevent and control illegitimate violence. Consequently, any form of violence perceived as challenging the dominant neoliberal *doxa*,[1] questioning the need for individual (physical) 'freedom' and its protection as the self-evident, only possible basis for a prosperous and ordered society, is considered illegitimate.

It is this understanding of violence – allegedly universal – and its practical implications in different contexts that are discussed,

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[1] The term *doxa* is here used in Pierre Bourdieu's acceptation: a society's taken-for-granted, what appears to be self-evident and "goes without saying, because it comes without saying", unquestioned and unquestionable truths that conceal domination. Pierre Bourdieu, *Outline of a Theory of Practice* (Cambridge: Cambridge University Press, 1972), 167.

questioned and analysed by the articles presented in this collection. These texts challenge the common assumptions about political violence, unveil the processes, practices and discourses through which the Sovereign's violence is legitimised and the *demos'* violence is delegitimised, and let the dynamic links between violence and law emerge. Therefore, the intent of the collection is less to unmask the violence lying at the heart of Western capitalist societies than to rethink, through the study of specific cases, how the sense of 'violence' is constructed, reconstructed, and deconstructed here, and to shape the ways in which societies read their own memory, history and politics.

The legitimisation of the violence executed by the holders of power inevitably passes through the construction of the Other as the perpetrator and repository of illegitimate violence. This process takes places in the dominant discourse and entails a double and concomitant movement of denunciation (of the violence of the Other) and denial (of the violence of the capitalist system). The denunciation of the Other's violence thus presupposes that groups, cultures, religions or states included in this category come to be designated as perpetrators of a violence that lacks the principle of rationality that, on the contrary, allows Western powers to call it justice or law. Thus, the use of violence by the *demos* is not only considered unlawful, but also unethical. The humanitarian discourse developed over the last thirty years delegitimises the use of physical force in any form that stems from the *demos*. In the logic of the Sovereign, the *demos'* violence is irrational: it cannot be legitimised because it represents the product of evil, the uncompromising promise of a radical change in the order of power. Alain Badiou refers to this 'ethical ideology' as the endemic tendency of the Western world to conceive of humanity as powerless and in need of protection from the evil of the barbarian that only the Sovereign can guarantee. The contemporary form of this 'monopoly of violence' is shaped through the denunciation of any attempt at emancipation as evil. The human gets trapped within a static status quo, while the State and power are preserved in the never-ending process of defence rather

than liberation.[2]

If the history of the people's courts in Hungary in the transitional period between 1945 and 1947, as explored by Máté Zombory in his contribution to this collection, is considered (or silenced) in today's regime of historicity as a 'shameful' history, it is exactly because it challenges the contemporary normative order of 'democratic justice'. Denouncing and judging the violence of the previous regime, these courts were designed to make the people the new sovereign subject of political justice. They effectively addressed the question of legitimate political violence: a foundational violence, the retaliation against those who led the country to the 'national catastrophe', was seen as necessary to build the new society on a more just and egalitarian basis and to create its new moral values.

The question of legitimate violence in class struggle in the context of capitalist exploitation is also central to the reflection that Brendan Hogan develops through the analysis of Gramscian thought and the concept of 'economic violence'. Violence, as intrinsically embedded in the capitalist economic system and its political infrastructure, is highlighted by his text: particularly, he points at the general denial of economic violence, as for example in the devastating effects on the populations of countries where neoliberal policies are imposed and enforced.

The denial of the violence of economic and political systems is also raised by Joy's article, where she underlines the contradiction between Australian democracy and the systemic violence exerted on its Aboriginal population. The denial of this systemic violence is here strictly connected to the denial of the colonial foundation of the Australian state and of any Australian responsibility. She explains how the violence of the occupation and dispossession of Aboriginal lands

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[2] Alain Badiou, *Ethics. An essay on the understanding of evil* (London: Verso, 2002), 13. '[I]f the ethical "consensus" is founded on the recognition of Evil, it follows that every effort to unite people around a positive idea of the Good, let alone to identify Man with projects of this kind, becomes in fact the real source of evil itself. Such is the accusation so often repeated over the last fifteen years: every revolutionary project stigmatized as 'utopian' turns, we are told, into totalitarian nightmare. Every will to inscribe an idea of justice of equality turns bad. Every collective will to the Good creates Evil.'

is then denied – or 'forgotten' – while Indigenous people are refused any claim to sovereignty. The complex relation between past and present, collective social memory and history, is often at the heart of nation building processes, national liberation movements, and transitional periods: the search for and transmission of truth was one of the main functions of the Hungarian people's courts, but it can also become a strategy for Australian artists to support the recognition of Indigenous peoples' sovereignty and challenge the dominant narrative of the national identity.

The three articles of this collection offer us a common ground to rethink political violence in its articulation in law and memory; each of them individually, as well as together through the discussion they generate, show that the question of what constitutes legitimate political violence is still actual and able to foster engaging debates and critical thoughts.

All forms of violence that are not controlled or controllable by the Sovereign or the holders of power are doomed to be physically repressed and symbolically disqualified, and more importantly rejected outside the limits of the *thinkable*. Since the thinkable – the construction of acceptable hierarchies, of who is audible, of whose words count, and of what makes sense[3] – has to be rational, it is always controlled by the Sovereign through different ways of creating acceptable narrations.[4] Joy underlines that the 'Australian community refuses to see such acts [the systemic violence against Aboriginal communities] as symptomatic of a contemporary program of occupation because it views itself as a tolerant multicultural sovereign democracy to which such systemic violence is supposedly antithetical'. What she underlines as systemic violence is invisible, and this invisibility is secured by very rational constructions such as the myth of *terra nullius*. If we take on the challenge of extending Weber's definition of the modern State by its monopoly on the legitimate use

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[3] Jacques **Rancière**, *Disagreement: Politics and Philosophy* (Minneapolis: University of Minnesota Press, 2004).

[4] For a detailed analysis of the relation between the Enlightenment and the rational mind see Theodor Adorno and Max Horkheimer, *Dialectic of Enlightenment* (London: Verso, 1986).

of physical force, we can claim that the use of legitimate violence characterises the very nature of all dominant groups and their discourses. The hegemonic logic of liberal speech first reduces the definition of violence to mere harm, then identifies the only way of preventing that violence as unbounded counter-violence, which is, in Walter Benjamin`s words, the law-preserving violence.[5] What is at stake both in state violence and in some forms of revolutionary violence is the famous discussion over justification through means (positive law) or justification through ends (natural law). Benjamin warns us in his essay *The Critique of Violence* that this opposition between two different ways of legitimising violence, in the end, is simply not a critique of violence any more, but the application of violence.[6] If there is a presupposition regarding the legitimisation of violence as a means for a just end, or lawful means as ends in themselves, it is only possible to talk about how the application does not bring what it promises. This is why Joy's article calls for the occupiers' subject position to be dismantled through a constant renegotiation of the self. Her call for asking ourselves 'how we can unsettle our Occupier subjectivity' is a way of breaking the Benjaminian cycle of violence.

Overcoming this problem is also possible when the focus is put on how the legitimisation of violence changes over time, not only together with the economic and political structures of a society, but also in relation to the ethics of a specific period that these structures generate and preserve. All three articles in this collection do this. Consequently, the articulation between ethics and law with respect to violence leads us to interrogate three main areas where the two get entangled: the law of the Sovereign, the law of the rebel, and the law of the past.

The Law of the Sovereign

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[5] Walter Benjamin, "Critique of violence" in Walter Benjamin, *Selected writings, Vol. 1* (Cambridge: Harvard University Press, 2002).
[6] Ibid.

Jacques Rancière theorised the idea of an 'ethical turn' occurring in the last thirty years. He conceptualises this as the loss of the distinction between '*what is* and *what ought to be*' or the distinction between fact and law.[7] This results in the inclusion of 'all forms of discourse and practice beneath the same indistinct point of view'. In Rancière's terminology this amounts to seeing the world through the perspective of *the distribution of the sensible*.[8] After the ethical turn, coinciding with the fall of the Soviet Union, law and ethics become inseparable: the enemy becomes evil, the victims become the absolute Good. With the end of the Cold War era and what has been called the 'loss of the utopias',[9] it became more and more arduous to condemn state violence when it claimed to be used to prevent other forms of violence and to protect individual security[10]. Any critical attempt wasrelegated to the sphere of radicalism, rejected as 'antidemocratic' or labelled as 'terrorist'. Thus, this brings about the depoliticisation or *ethicisation* of society. From this perspective, Zombory's article highlights exactly this turn: the People's Courts, as institutions of legal and political retribution, were seen, in the period following World War II, as necessary and politically legitimate in order to condemn fascism and to transition to a new society. However, the justice they wanted to embody – associated with political emancipation and people's sovereignty – is judged today as 'summary' and illegitimate; the democratic project of revolutionary social change they aimed to inaugurate deemed antidemocratic. The extreme atomisation of

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[7] Jacques Rancière, "The Ethical Turn of Aesthetics and Politics," *Critical Horizons* 7 (2006), 1- 20.

[8] The original expression is *partage du sensible*. The French word *partage* has two meanings 'to share' or 'to divide'.

[9] Rancière uses this term in "The Ethical Turn of Aesthetics and Politics." The idea of the loss of the utopias can be tracked to the book of Francis Fukuyama where he declared the end of history. *The End of History and the Last Man* (London: Penguin, 1992).

[10] Alain Brossat underlines how contemporary Western democracy promotes an 'immunitarian condition' in which laws and freedoms are more and more defined in terms of individual protection from exposure to violence and rights to individual security. Immunitarian democracies are consequently characterised by an increasing atomisation of their citizens and their passive disengagement and depoliticized approach to forms of violence occurring elsewhere. Alain Brossat, *La démocratie immunitaire* (Paris: La Dispute, 2003). Also see Wendy Brown, "Human Rights as the Politics of Fatalism", *South Atlantic Quarterly* 2(3) (2004), 451-463.

individuals and management of societies raised a whole new set of questions over the sense of democracy, but also over the significance of new social movements over the past thirty years. As žižek states, we are now living in a world of ultra-politics in which competition 'for power is replaced by a collaboration of enlightened technocrats (economists, public opinion specialists etc.)'[11] Therefore, the law of the Sovereign is more and more entangled with ethics and inseparable from it, while politics is reduced to a matter of administration of people (migration), capital (austerity) and violence (terrorism). It is this ethics which allows Australians to live peacefully in silence. As Joy states, 'occupier Australia keeps the public secret that we all know but refuse to speak; there has been a failure to witness occupation, a silencing'.

The Law of the Rebel

As a result of power relations, often criticisms addressed to the Western hegemony over the definition of violence, or even the critique of Western critical thought, use the very Western language of late capitalism that is humanitarianism. An example of this might be the evolution and transformation of some important sectors of 1970s political activism in Europe into human rights movements and institutions in the following decade.[12] The constant urgency that social movements like Occupy feel to define themselves as 'peaceful' or 'non=violent' might be another example of this search for legitimisation in the neoliberal logic of 'democracy' even by those who question it. Consequently, and inexorably, those who reject this logic are marginalised and stigmatised even by those to whom they are the closest. The violent outbursts of some protests, as they are staged in dominant media, crystallise the grotesque line of distinction between the 'good protesters' and the 'troublemakers', between those who accept the monopoly of legitimate violence and those who challenge

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[11] Jacques Rancière, *Disagreement: Politics and Philosophy* (Minneapolis: University of Minnesota Press), 103.

[12] For a detailed account of this transformation in France, see Michael Scott Chirstofferson, *French intellectuals against the left* (Oxford: Berghan, 2004). Also see Julian Bourg, *From Revolution to Ethics* (Montreal: McGill-Queen's University Press, 2007).

it. Broken windows, burnt cars or stolen TVs prompt screams of moral indignation and scandal, while police brutality against protesters creates indifference or even a sense of 'justice' and protection. So in which social and historical conditions can political violence be legitimised and the violence of the capitalist system exposed? Hogan's text invites us to re-read Gramsci to find in his concept of 'war' the basis for a discussion of legitimate class struggle and counter-hegemonic action, as well as to consider the necessary role of the periphery.

If today even radical thinkers or activists discourage the use of violence, it is also because the *demos* becomes totally bound by the ethicisation of life and the new ethics that focuses on the detection and avoidance of 'evil' - physical violence or approval of it. A society that is bound by the teleological understanding of *humanity*, whose absolute rights are even codified, gets blinded in front of class, social, gender and ethnic inequalities and considers any violence from the *demos* to be directed at society as a whole. In this sense, the example of the Hungarian people's courts reminds us of the existence of another ethics, of a humanity that exists *through* and *in* its political being, which also means conflict, violence and conflicting ideologies.

Further, in her analysis of the role of art, Joy invites us 'to create an ethical space [which] is a new sort of action, a kind of thinking without place, a creation that can be transnational and nomadic in the Deleuzean sense. This needs to exist beyond place, in a way it should be inexistent, deterritorialised'. And art can give us this because, she states, 'affective non-representational art resists linear narrative structures of storytelling', the stories of good against evil, saviours and barbarians.

The Law of the Past

Not only current attempts to subvert the order of power but also the interpretation of past struggles and their memory become a field of struggle which reflects the tensions between the politics of emancipation of the oppressed on one side and the liberal right to individual security on the other. Benjamin argues that 'ends that in one situation are just, universally acceptable, and valid are so in no

other situation, no matter how similar the situations may be in other respects'.[13] So how do we look back and consider past violence from today's perspective? How can alternative memories emerge and what role can they play today?

Máté Zombory's study of the people's courts aims precisely at uncovering the social conditions that made these institutions possible in order to offer a critical understanding of that historical period without falling into today's normative and moral order.

Parallel to the hegemonic narrative built upon the dominant ethico-political discourse that delegitimises emancipatory claims and their significance (through a double and circular process of depoliticisation and criminalisation), the memory of past revolutionary, anti-colonial separatist movements is shaped. Different struggles for equality and justice are reduced to their violent means and their critique of the social and political order is neutralised by the ideology of liberal democracy, with its freedom of speech and civil liberties presented as the least worst system in a dichotomy that opposes it to 'totalitarianism' or 'authoritarianism'. Therefore, their use of violence can only be condemned: legally, because it infringes upon the law; politically, because it attempts to subvert the *natural* neoliberal order; and finally morally, because it touches individual bodies and properties. The increasing emphasis on victims, their pains and suffering, and the evilness of the perpetrator reflects the predominance of the humanitarian discourse and is used to disqualify emancipatory projects on the basis of their relation to physical violence. The Sovereign law creates an economy of narrations that confronts and opposes the good victims to the bad perpetrators on the ground of the memory of the effects of violence and censors its reasons and historical conditions. Thus, memories that defy the myths of the current 'rational' democratic world are condemned to silence; they are not sayable, but they are also hardly audible.

For Joy, it is the medium of visual arts that can 'make space for a social memory that refuses to historicise or memorialise events out of existence but rather draws the viewer into a relationship of witnessing'. For her, the witnessing demanded by the art work (an

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[13] Walter Benjamin, "Critique of violence".

active witnessing indeed) can spare us from the myths of history, and narrations of the Sovereign. Her own art work slows the viewer in order to get involved, to be moved, to 'give something of themselves to it', as 'this is witnessing, it is acknowledging someone else's pain'. So the art work can tear the horizontal structure of the Sovereign's narrations and invite the spectator to experience what used to be invisible to them before.

It is probably because the Other's memories still contain the germ of a radical critique of the neoliberal order that they are so strongly and continuously delegitimised. They still represent a form of resistance to domination and hegemony, particularly on the discursive and narrative level, which can scrape the legitimacy of present Sovereign violence. Memories, then, can become a tool as far as they are able to offer new meanings or frames to current claims for equality. On the first layer, examples from the past can offer the perception of the possibility of another world, and other ways of seeing and doing become possible. If other ways of doing and living, or distribution of the sensible, were possible and legitimate in the past, new ones are also possible in the future. The stillness of the status quos, preserved by the hegemonic emphasis of ethics, can and will change. The memories of individuals, but also of state bodies and institutions, open a view on the possible. And the first result of these memories is to show that, at other times, there were different laws, different *natural*s and different morals. The very existence of a world with different sayables and thinkables breaks the claim of the universality of the one we live in.

On the second layer, memory allows individual stories and experiences to confront the dominant ethos of the world, which lets us question again the validity of the claim over the universality of that ethos. Encountering individual memories, and the fact that these memories have been experienced in a real body during the life of an individual, threatens the sharpness and power of hegemonic universal myths. However, Sovereign power keeps the doors of what is audible and sayable by letting certain narrations express and gain recognition: it tames the history of individuals by using myths and assigning truth values to experiences. Individual memories gain truth value and enter the economy of meaning as far as they are able to adapt to the

hegemonic language of the Sovereign. Therefore, individuals also start to reshape their memory according to audible myths (like guilt, shame, redemption, good and evil, etc.), reinforcing hegemony.

The three articles presented in this collection all represent an attempt to break these chains, starting with critically rethinking our history, politics and law.

Unsettling Occupied Australia

Rachel Joy

Invasion is not an event relegated to the past but a structure.[1] If we accept this to be true, that invasion is a set of ideas, ways of thinking and acting, then it becomes apparent that it is a system, and one involving both overt or objective and perhaps more subtle or systemic violence. When we acknowledge that what we are dealing with in an Australian context is the systemic violence of invasion and its contemporary face we can unmask the silence of so many Australians about our occupation of this land we call our own. We can concede the lack of recognition of Aboriginal sovereignty with all its attendant problems. With systemic violence comes more subtle forms of violence; relationships of coercion, dominance and exploitation or simply the threat of violence,[2] from which the beneficiaries of the system can more easily distance themselves claiming they do/did nothing wrong. Such systemic violence both creates and relies on the 'othering' of Indigenous Australians for two clear purposes: the legitimising of Occupier claims to land and sovereignty, and the construction of Indigenous Australians as a problem, to be ignored or paternalistically solved.

Many Occupier Australians reject the notion of guilt and responsibility for past wrongs, claiming *they* didn't commit any crime. It is this focus on invasion as an event or series of events cryo-vacced in the colonial past, carried out by individuals whom we can now see to be flawed, that allows contemporary Occupier Australians a way to distance ourselves from our role in the current socio-political landscape. Thus individual agents who perpetrate obvious or *subjective*

[1] Patrick Wolfe, "Settler Colonialism and the elimination of the native," *Journal of Genocide Research* 8(4) (2006), 388.
[2] Slavoj Žižek, *Violence: Six Sideways Reflections* (Picador: New York, 2008), 10.

violence,[3] matter less than the violent economic and political systems
themselves. The invasion and occupation of Australia, the largest
single land grab in history, was perpetrated by political and economic
systems rather than the actions of a few rogue individuals. However,
those individuals were the progenitors of many of today's Occupier
Australians, the beneficiaries of those events. It is this disconnect
between past and present that allows present day Australians to ignore
the fact that the same systemic violence that enabled the dispossession
and attempted genocide of Indigenous populations in the past still
exists today. The results are clear to see in almost any current
statistical analysis of living conditions, health, wellbeing, employment
or education of Indigenous peoples in Australia. The
compartmentalising of colonialism allows us to distance ourselves
from the distasteful acts of our anonymous ancestors and claim that
they were misguided but that we are somehow different.

But are we any different? The Stolen Generations have been
relegated to history and our Prime Minister said sorry for what was
done in an act designed to achieve closure and absolution for the non-
Indigenous population and to shut down avenues for fiduciary
compensation. Indeed in our capitalist society one of the most
common measures of value, loss and harm is certainly that it can be
calculated in dollar terms. Yet the issue of financial reparations to
Australia's Stolen Generation has been squarely removed from the
table, and in fact the crime itself continues today with the removal of
Aboriginal children from their families actually increasing since the
Apology in 2008.[4] Again, historicising invasion and occupation allows
us to omit any analysis of the systemic violence embodied by threats
such as those made as recently as 2015 by both state and federal
governments to close remote Indigenous communities by removing
essential services and relocating people from their traditional lands to
larger population centres.[5] The broader Australian community refuses
to see such acts as symptomatic of a contemporary program of

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[3] Žižek, *Violence,* 2–3.
[4] Overcoming Indigenous Disadvantage Report 23 (2014) Available at
http://www.pc.gov.au/research/ongoing/overcoming-indigenous-
disadvantage/key-indicators-2014 [accessed 12 May 2015]. Available at
[5] http://antar.org.au/campaigns/wa-community-closures [accessed 15 May 2015].

occupation because it views itself as a tolerant multicultural sovereign democracy to which such systemic violence is supposedly antithetical. Non-Aboriginal Australian identity is built on a perception of innocence fostered by willed amnesia and any position that calls this innocence into question by asking Settlers to take responsibility for the violence of dispossession is quickly shut down by mainstream commentators as being un-Australian.[6] A national identity built on avoiding responsibility so as to maintain Settler innocence has created the conditions for perpetuating the myth of *terra nullius*. Thus, our conservative historians have rendered the battle for Australia a sweaty, dusty battle against nature (not a native in sight!) and as such our founding fathers (and mothers) can be rendered '*essentially* settlers and only *accidentally* occupiers'.[7]

Australian democracy faces a conundrum, in that it was illegally constituted through land theft and denial of Indigenous sovereignty. When Indigenous peoples assert their sovereignty it makes these truths uncomfortably apparent.[8] What is at issue in the political conflict between the Australian Settler state and Indigenous peoples is exactly that: sovereignty. By their very existence, let alone resistance, Aboriginal Australians prove to be a 'problem' for the Australian nation state,[9] and one that cannot be solved without acknowledgement of their sovereignty. The Occupier state has tried to occlude Indigenous sovereignty through various means from outright murder to assimilation, but more recently liberal democrats have resorted to occlusion through inclusion of a political kind. Although the 1967 referendum to include Aboriginal people as citizens of Australia was passed by 90 per cent of Australians, no Aborigines

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[6] Anne Curthoys, "Constructing National Histories" in eds. Bain Atwood and S.G. Foster, *Frontier Conflict: The Australian Experience* (Canberra: National Museum of Australia, 2003), 187.

[7] Toula Nicolacopoulos and George Vassilacopoulos, *Indigenous Sovereignty and the Being of the Occupier: Manifesto for a white Australian Philosophy of Origins* (Melbourne: Re-Press, 2014), 19.

[8] Gary Foley, "The Australian Labor Party and the Native Title Act" in ed. Aileen Moreton-Robinson, *Sovereign Subjects: Indigenous Sovereignty Matters* (NSW Australia: Allen and Unwin 2007), 121.

[9] Nicolacopoulos and Vassilacopoulos, *Indigenous Sovereignty and the Being of the Occupier,* 21–22.

voted. As Indigenous activist Kevin Gilbert explains, Indigenous peoples '…never voted to be incorporated with non-Aboriginals. Australian citizenship was imposed on us unilaterally.'[10] Today's 'Recognise' campaign to acknowledge Indigenous Australians in the nation's constitution follows the same pattern of eliding Indigenous sovereignty by attempting to incorporate it into non-Indigenous democratic frameworks. When Aboriginal peoples refuse to be assimilated they inflict what Paul Muldoon describes as a 'narcissistic injury' on the national 'ego-ideal' of the coloniser.[11] A narcissistic white Australia finds it incomprehensible that 'others' might reject the opportunity to become 'honorary whites' but rather insist on their own subjectivity. Thus Aboriginal peoples must be re-colonised through a process of reconciliation that avoids a treaty and absorbs them into the national polity. In Australia the moral redemption of the colonial state has been given priority over justice for Aboriginal people. The movement for reconciliation is grounded in the belief that the process of colonisation contains nothing so heinous as to unsettle 'the nation's ideal image of itself as worthy of love and reconciliation'.[12] Any 'mistakes' can surely be apologised away, safe in the knowledge that Aboriginal Australians won't actually be given the option to refuse the apology. Once again colonial violence is concealed: to paraphrase one Aboriginal Elder, colonisers 'coverem up'…with a…'big swag.'[13] What kind of nation might we be if our Occupier selves could find a way to be incorporated into an Indigenous framework of sovereignty?

Our Occupier mind-set precludes us from asking the right questions: indeed some would say it prevents us from asking any questions at all. In re-thinking a way to be non-Indigenous in Australia that has integrity and rejects an Occupier subject position unconditionally, many questions must be addressed: among them we

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[10] Kevin Gilbert, *Aboriginal Sovereignty: Justice, the Law and the Land* (Canberra: Burrambinga Books, 1993), 41.

[11] Paul Muldoon, "A Reconciliation Most Desirable: Shame, Narcissism, Justice and Apology," *International Political Science Review* 1 (2016), In publication.

[12] Elizabeth Povinelli, "The State of Shame: Australian Multiculturalism and the Crisis of Indigenous Citizenship," *Critical Inquiry* 24(2) (1998): 575–610, 580.

[13] Deborah Bird Rose, *Reports from a Wild Country: Ethics for Decolonisation* (Sydney: UNSW Press, 2004), 11.

must ask ourselves how we can unsettle our Occupier subjectivity. What processes might we use to enable a new becoming? Here I want to emphasise the importance of processes and conceptualising unsettlement as an on-going journey and not a destination. We should not be looking for an event that provides a closed solution; rather our becoming will only have integrity if it is constantly renegotiated. This is because subjectivity is about relationships, about the space between people; and it is because our identities and motives are always changing and are relative also to the place where encounters occur. Thus naming and situating ourselves become not only actions, but actions perpetually in flux. However, as the ancient Greeks stated, first 'know thyself': if we are to change we first need to understand that there is a problem and that the problem is us, in our present ontological configuration. In Australia, self-reflexivity on the issue of invasion does not appear to be our strong point.

That all but a few white Australians are happily ignoring our Occupier subjectivity is clearly reflected in the cultural products of our country; the grand narratives certainly contain very few troubling thoughts to tweak our consciences. There have perhaps been minor incursions into the vast pallid sago pudding of white settler culture in Australia with an errant novel, film or artwork here and there, and most often any challenge to this cultural void has come from Indigenous artists themselves. When it comes to memorials to acknowledge particular events from our traumatic past, again they are few and far between.[14] The National War Memorial in Canberra refuses to include any form of recognition for the warriors who fought and died defending their country and families against the British invaders.[15] Pointedly, there is no national monument to recognise Indigenous resistance to invasion, suffering or survival. Perhaps the closest thing we have to a national memorial is provided by the world of visual art in the form of a sculpture in the National Gallery in Canberra titled *The Aboriginal Memorial*. This is an artwork consisting of 200 hollow log coffins made by artists from central

[14] Some examples might include Fiona Foley's *Edge of the Trees*, *Witnessing to Silence* or *Black Opium*.

[15] Henry Reynolds, *The Forgotten War* (Sydney, New South Wales: New South Publishing, 2013), 3.

Arnhem Land that commemorates those Indigenous peoples who died fighting for their country.

If Occupier Australians are to re-imagine ourselves there must be a linking of past and present: we need to acknowledge the past and understand its impact in today's world. There is an ongoing debate about the usefulness of memorials of the statuary or monumental kind because they may be seen to aid in the enablement of forgetting, in that once we build the monument we can forget about what happened.[16] Monuments are erected to provide closure, thus while traditional monuments may have a role in marking what is considered important in the collective cultural memory and thus the identity of a nation, they also close down opportunities for more reflexive participatory processes to take place.[17] Monuments themselves *take* place, they are sited in a place and as such displace other possible uses of that location because monuments do not share; they are by their nature definitive, and simultaneously inclusory and exclusory. Audrey Walen reminds us that 'space cannot be neutral, because it is the site where life occurs.'[18] Space is culturally inscribed and, especially in occupied territory like Australia, monuments become contested ground, geo-psychic hotspots for competing narratives. As such they fall a long way short of the healing processes required by a nation with as much psychic trauma to address as Australia.

Memorials present the best hope for healing where they attempt to be processes or events rather than closed objects. When speaking of memorials architect Julian Bonder reminds us that 'remembering is in the present, that it's an action. It's not an object. The purpose is not to physically manifest memory as an object, but actually to invite people to think, which is an action'.[19] Memorials should bear witness to testimony. As Dori Laub states, testimony is a process of discovery that should not be foreclosed on by the witness; it is more than facts to be reproduced and should be understood as

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[16] Andreas Huyssen, *Present Pasts: Urban Palimpsests and the Politics of Memory* (Stanford, California: Stanford University Press, 2003), 32.
[17] Julian Bonder and Krzysztof Wodiczko, "Memory is a Verb" *Architecture Boston* 15(3) (2012), 49.
[18] Audrey Walen, "Doris Salcedo" in *Sculpture*, May 2001, 70.
[19] Bonder in Bonder and Wodiczko, "Memory is a Verb", 47.

'an event in its own right'.[20] When artists, architects and designers make spaces for memory work, we are inviting people to participate in the works as witnesses, and viewers become instruments of witnessing by participating in the process of the work. It is not possible to represent the suffering of others, but as Cathy Caruth says, 'to bear witness to the truth of suffering over a traumatic event is to bear witness to that event's incomprehensibility'.[21] As artists we will never speak *that which cannot be spoken* but we might make a space to listen to and reflect on its silence. This is our gift; this is what art can do.

This new space needs to be outside of coloniser concepts of vertical space (typified by an understanding of land as a commodity to be bought and sold) and outside of linear time if it is to accommodate ethical interactions between indigenous and settler peoples. New World colonists build our nations on hope and faith in progress (economic growth and technology) so we are always future focused.[22] Our linear conception of temporality feeds a notion that positive change is something that happens tomorrow, meaning our creative energies never focus on solving the issues at hand and making a world we can all live in today. I would argue that if instead we use a concept of 'everywhen'[23] to think of time we will attend to what is needed now and the future will take care of itself. In short, Occupier nations need a new spatio-temporal register. For sculptors, *space* allows an object to come into being, whereas *place* is culturally inscribed by class, race, nation, gender, concepts of minority, foreigner, insider and outsider. What is needed for us to create an ethical space is a new sort of action, a kind of thinking without place, a creation that can be transnational and nomadic in the Deleuzean sense. This needs to exist beyond place, in a way it should be inexistent, deterritorialised. It is a space that can be brought into being through art.

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[20] Dori Laub, "Truth and Testimony: The Process and the Struggle" in ed. Cathy Caruth, *Explorations in Memory* (Baltimore: Johns Hopkins University Press, 1995), 62.

[21] Cathy Caruth, *Trauma: Explorations in Memory* (Baltimore: Johns Hopkins University Press, 1995), 156.

[22] Rose, *Reports From A Wild Country: Ethics For Decolonisation*, 5.

[23] W.E.H. Stanner, *The Dreaming and Other Essays* (Collingwood: Black Inc. 2009), 9.

In asking how art can address violence it is perhaps most successful to cast a sideways glance that allows us an indirect though no less truthful articulation of the traumatic impact of violence.[24] Politically engaged art can enable such witnessing. Affective non-representational art resists linear narrative structures of storytelling and as such is more accommodating of the testimonial style of trauma survivors' remembrances. Visual art does not need to 'make sense' of an encounter; it resists the desire to place structures of artificial order on people's experiences and in such unsettled spaces it can open a site for both testimony and witnessing. Whether the memory work takes the form of a memorial or an installation, print, painting, or other work, its essential quality must be that it provides space to think. The memory work involved in works of visual art offers methodologies that are more open and inclusive of the fragmentary nature of trauma memory. It is this openness to the halting, hesitating and at times overwhelming and conflicting testimonies produced in a continued process of remembering that is perhaps more akin to what is needed for witnessing to occur. Visual artists can create spaces for thinking and interactions or processes that are more response-able and effective at making us reflect on terrible events in a meaningful way.

History and the way it is re-presented is largely about who controls the systems of public record and memory.[25] Collective social amnesia allows the unthinkable to happen, but visual art can make space for a social memory that refuses to historicise or memorialise events out of existence but rather draws the viewer into a relationship of witnessing. It is this slowing down, suspension of time, speaking without words, making space to listen and use of affective means to communicate the unspeakable that visual art can offer to healing. The field of sculpture is especially well versed in the relations of time, space and bodily perception, elements which are all required to evoke an invitation for reflection and conversation. However, this conversation does not have to be quiet, controlled or passive but will likely involve disagreements and conflict as memory is slippery at best and one can be certain that unified memory is unlikely to be anything

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[24] Žižek, *Violence*, 3.
[25] Walen, "Doris Salcedo", 69.

but constructed and lacking in truth. Rather, it should be allowed to be agonistic and open.

An example from my own practice that attempts to engage with these ideas is a work that concerns the 1828 massacre of Indigenous families by shepherds at what is now called Cape Grim in northern Tasmania. I don't profess to *tell* this story through my work but rather to reflect on it, to express through materials an affective response to this horrific event. A materially driven work allows the viewer to fill in the gaps and come to their own conclusions, but in doing so it draws the viewer in, making them part of the work. Thus it is inclusive rather than exclusive, suggestive rather than didactic. To this end, the cliff, over which the people were driven, is represented in the piece by layers of lead sheet (a material with strong connections to death and the afterlife in the principles of Alchemy). A text describing the event is embedded in the work but is partially obscured with paint and bees wax as it falls down the length of the canvas. Sand is mixed in with the paint and wax at the bottom of the panel and delicate grey/black mutton bird feathers have been crushed and drift among the text in reference both to the birds the families were hunting when they were ambushed and the falling people themselves.

Rachel Joy, Cape Grim 1828 (2017)

Once we have the attention of our audience, we need to keep it for long enough that they invest something of themselves in the experience and are reminded that the past is not cut off from the present. We need to slow down their encounter and involve them in the work. Techniques for this may involve using massive scale combined with tiny detail (as in my work *Your World is my Oyster*), layering, partially obscuring or obfuscating elements of the work (as

illustrated by my use of bees wax to blur the text in the work about Cape Grim) or revealing aspects of a work over time. These choices mean the viewer must make an effort to look in a different way. We also need to open a space for the viewer to engage with the work so that they can be active participants in the art, not merely passive receivers of a message that is already decided for them. In slowing the viewer down the work obliges them to give something of themselves, to allow themselves to be moved, to ponder the title and perhaps to feel something. This is witnessing, it is acknowledging someone else's pain. The theorist Mieke Bal states: 'The past is always out of our grasp. We always arrive too late. What can art do? It can *know*. To know is important'.[26]

Rachel Joy, Your World is My Oyster (Cove) [detail], 2017.

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[26] Meike Bal, *Of What One Cannot Speak: Doris Salcedo's Political Art* (Chicago: University of Chicago Press, 2010), 225.

Rachel Joy, Your World is My Oyster (Cove) [detail], 2017.

But can one ever really know? To speak of searching for truth can mean a demand for an immutable representation of the state of things as they really are or as they were; truth then becomes the provision of something that is missing and must be established. However, if we consider truths to be already extant but latent and only in need of revelation,[27] then art, with all its disruptive creative force, holds great promise. If one conceives of art not as an object fixed in time or place or meaning but as itself an active, emerging thinking, more verb than noun, something interesting happens. The ability of a work of art to reveal truth is a matter of its capacity to transfer to the viewer something of the significance or meaning held by an event. The truth-value of art lies in its ability to evoke, through non-mimetic sensory experiences that produce different affects in the viewer. Making art is a process, a risky one, and one can never predict its outcomes at the beginning; that is the point, art-making is less about the creation of an object and more about the process through which it, or the experience of it, emerges. In opening oneself up to the possibilities of feeling and thinking that art offers, one runs the risk of experiencing truth and truths can be unsettling. This is what is at stake when we recognise the relationship between art and truth.

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[27] Gilles Deleuze, *Nietzsche and Philosophy* (New York: Colombia University Press, 2006), 94–97.

Rachel Joy, Oceans Apart [detail], (2016-7).

    When art reveals disturbing truths it wrestles with silence. The
Great Australian Silence[28] around the dispossession of Indigenous
peoples by British invaders has been and remains profound.
Occasionally there has been a 'whispering in our hearts'[29] that stirs
some of us to action, but more commonly Occupier Australia keeps
the public secret[30] that we all know but refuse to speak; there has been
a failure to witness occupation, a silencing. As part of a process of
becoming, as David Gaertner puts it, 'better guests', Occupiers must
surrender our power, acknowledge the sovereignty of Indigenous
ontology and listen.[31] It is through listening that we might become

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[28] Stanner, *The Dreaming and Other Essays*, 258.
[29] *This Whispering in our Hearts* is the title of Henry Reynolds 1998 history of white
attempts to engage with indigenous dispossession.
[30] Michael Taussig, *The Nervous System* (New York: Routledge, 1992), 27.
[31] Nicolacopoulos and Vassilacopoulos, *Indigenous Sovereignty and the Being of the
Occupier*, 24.

ourselves in a new way that has integrity. Cherokee scholar Daniel Justice reminds us that if First Nations people and Occupiers are to move forward together, 'collaboration is a necessity not an option'.[32] Part of this process of becoming will involve bearing witness, 'taking the role of a companion in a journey onto an uncharted land, a journey the survivor cannot traverse or return from alone'.[33] In witnessing, Dori Laub suggests we must

> *listen to and hear the silence*, speaking mutely both in silence and in speech, both from behind and from within the speech. He or she must recognize, acknowledge and address that silence, even if this simply means respect – and knowing how to wait.[34]

In sharing these qualities, art can be a form of witnessing colonial violence and may in turn enable a process that opens a space for ethical encounters between Indigenous and non-Indigenous peoples, thus envisaging new ways of thinking and of being in Australia.

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[32] Daniel Justice, "A Better World Becoming: Placing Critical Indigenous Studies." public address, University of Melbourne, 6 November, 2014.

[33] Laub, "Bearing witness or the Vicissitudes of Listening", 59.

[34] Laub, "Bearing witness or the Vicissitudes of Listening", 58.

Democracy and Violence:
Political Justice in Post-War Hungary

Máté Zombory

Questions of political violence are of particular relevance in transitional periods such as the one after the Second World War in Europe where, especially in the countries of the former Axis Powers and on territories of German occupation, retribution was at the top of the political agenda.[1] Displacement, internment, political verification, and political justice were the main instruments of post-war retribution in Hungary[2], where the new regime intended to legitimately differentiate itself from both the national socialist rule of 1944 and the autocratic kingless kingdom of the interwar period. The new political elite of 1945 was composed of political forces that formed an anti-fascist coalition during the war years, which, when coming to power with the support of the Allied Powers, most importantly the Red Army, strove to establish a new pluralist democratic order against the background of the horrific past system. Though the institutionalisation of the Cold War, together with the concomitant communist takeover, prevented the completion of the great task of national recovery through democratisation, it is worth examining the short historical period of the so-called coalition era, in which questions of democracy and political violence arose sharply in the context of post-war reconstruction.

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[2] Tibor Zinner, 'Háborús bűnösök perei. Internálások, kitelepítések és igazoló eljárások 1945-1949', *Történelmi Szemle* 28(1) (1985), 118-141.

This paper discusses post-war political violence through the case of the so-called people's courts, institutions of political and legal retribution, between 1945 and 1947.[3] It aims to uncover the social conditions of possibility in which the question of legitimate political violence was raised in the post-war and pre-Cold-War era. Instead of judging the people's courts' role according to the present-day regime of historicity [4] and normative order (with the memory of the Holocaust as its universal reference point), it focuses on how justice, transmission of the past and political emancipation were related in the post-war discursive setting. This study, inspired by Jury Lotman's prospective approach[5] and Reinhart Koselleck's conceptual history[6], is not justified by the self-interest of producing historical knowledge. In the manner of Foucault's 'history of the present'[7], it intends to provide potential for the critical understanding of the social conditions of legitimate political violence in the present-day normative order.

Post-war European justice was established on two separate, yet connected levels: international legislation (connected to the Nuremberg Trials), and national people's tribunals. The first dealt with crimes which were not linked to specific geographical locations, the other treated cases linked to national-local contexts. While the first type of crime required new forms of international legislation, the second entailed new forms of national justice. The two levels were connected in several ways: countries had to extradite individuals to the

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[3] Some people's courts functioned even until 1950. In total, people's prosecution examined 90,551 individuals, of which 59,429 were put on trial; from these, 26,997 individuals were convicted (45.42%), 14,727 discharged (24.78%). 477 people were executed (1.76%). 46.77% were sentenced to a maximum of one year of imprisonment, and 36.69% to 1-5 years of imprisonment. Zinner, 1985.

[4] François Hartog, *Regimes of Historicity. Presentism and Experiences of Time*, (New York: Columbia Univ. Press, 2015).

[5] Yuri Lotman, *Universe of the Mind. A Semiotic Theory of Culture* (New York: I. B. Tauris and Co, 1990).

[6] Reinhart Koselleck, *Futures Past. On the Semantics of Historical Time* (Cambridge: MIT Press, 1985).

[7] David Garland, 'What is a 'history of the present'? On Foucault's genealogies and their critical preconditions' *Punishment & Society* 16(4),(2014), 365-384.

international court if needed, and the international legal proceedings certainly influenced the way national courts delivered their verdicts.[8]

In Hungary, the system of people's courts was created in the context of the national work of post-war reconstruction. Beyond retribution, the main roles attributed to this institution were 1) the definition of the political community on the basis of the newly constructed categories of political crime; 2) political emancipation, that is, making 'the people' the subject of historical justice through the organisation and composition of the people's courts' councils, and the regulation of the proceeding; 3) the production of historical truth by way of presenting original documents and providing testimonies of defendants and witnesses; and finally 4) the imposition of moral values of the new regime. In what follows, I discuss these points in detail.

Defining the *Demos*

The preamble of the PM Decree of the People's Jurisdiction no. 81/1945, adopted on 25 January 1945, declares that all those 'who caused or participated in the historical catastrophe which happened to the Hungarian people' should be punished as soon as possible. The jurisdiction and the actual practice of people's courts [9] can be

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[8] See Imre Szabó, *A nürnbergi per és a nemzetközi büntetőjog*, (Budapest: Officina, 1946).

[9] Although several studies discuss the famous cases of the principle war criminals in Hungary, until today there has been no exhaustive and systematic analysis on the functioning of the 24 people's courts in Hungary between 1945 and 1950. Studies on the subject usually provide data categorised according to type of judgement; there are no nationally representative data available on judgements categorised according to types of cases. The work of Barna and Pető is an exception since they acquired data by probability sampling (n=500), which is supposedly representative of the 22,000 cases of the People's Court of Budapest. Differentiating between five types of trials, the authors reveal that 81 per cent of the cases were concerned with acts committed during the Second World War, and 'ideological cases' became dominant (with 18 per cent) only in 1948. From this they draw the conclusion that people's jurisdiction cannot be treated merely as the instrument of class struggle in the hands of the Communist Party. Anyway, the spring of 1948 marks the end of the first phase of the operation of people's courts in Hungary, when 15 out of the original 24 people's courts ceased to function (see Zinner 1985). There have been

interpreted as a specific state-level institutional answer of the Hungarian legislative and judicatory practice to acute problems of the post-war era, resulting from the 'historical catastrophe': eliminating the remnants of the unjust past in order to establish the new democratic order. The idea of democracy, it is important to note, was not restricted to its Western liberal model, and was closely related to the need of social transformation. The necessary social transformation aimed at the legitimate definition of the political community: from the outside, the boundaries of the nation from other nations, most importantly in relation to the Germans, and the inclusion of those Hungarians excluded by the former regime as anti-Hungarians, the Jews; from the inside, it referred to the inclusion of 'the people' into the political community, and the exclusion of the proponents of the former regimes. The left had the inclination to call this transformation revolution, but the meaning of the term was also open and contested. Not restricted to the Marxist interpretation, on the political right revolution also meant radical change.

One of the few consensuses of Hungarian post-1945 politics was that the democratic political community should be, temporarily or definitively, restricted in order to make democratic institutionalisation possible. The principles of legitimate social exclusion were created by way of the categorisation of past political crimes. The Hungarian decree on people's courts defined two new types of political crime in order to, as the Minister of Justice put it, 'provide the possibility of retaliation to all those acts that directly or indirectly put Hungary into

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neither systematic nor profound international comparisons of legal retribution on the national level (see Deák 2015). According to István Deák, the Hungarian system was in accordance with other national cases of post-war historical justice (Deák 2001). Ildikó Barna and Andrea Pető, *Political Justice in Budapest after WWII* (Budapest: Central European University Press, 2015); István Deák, 'War-Crimes Trials in Post-World War II Hungary: Retribution or Revenge?' in *Hungary and the Holocaust. Confrontation with the Past* (Washington D.C.: Center for Advanced Holocaust Studies, US Holocaust Memorial Museum, 2001); István Deák, *Europe on Trial. The Story of Collaboration, Resistance and Retribution during World War II* (Boulder: Westview Press, 2015). On legal aspects see László Nánási, A magyarországi népbíráskodás joganyaga 1945-1950. In: Gyenesi József (szerk.): *Pártatlan igazságszolgáltatás vagy megtorlás. Népbíróság-történeti tanulmányok* (Kecskemét: Bács-Kiskun Megyei Önkormányzat Levéltára, 2011), 6-55.

this terrible catastrophe'.[10] These were war crimes, including both what the international legislation called crimes against peace and war crimes[11], and crimes against the people (*népellenes bűn*), a criminal category that was absent in Nuremberg.[12] Hungarian legislators categorised past political crimes by substantial law, that is, by defining the object of the crime: while war crime referred to making offensive war, breaking the conventions of waging war, war propaganda and collaboration with the German military and security forces, crimes against the people included mainly persecution of social groups (the decree speaks of 'certain layers of the people', 'layers of society', and 'racial and denominational hatred'), fostering fascist and antidemocratic ideas in public, and collaboration with anti-popular state forces and organisations. After its first modification in April 1945, the text of the ministerial decree on people's jurisdiction was published and distributed together with the expositional interpretation of the Minister of Justice. István Ries defined crimes against the people as 'acts that were not connected to the war, did not serve

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[10] István Ries (1945a), 'A népbíróság védelmében' *Népbírósági Közlöny,* 8 November 1945.

[11] Any act of a person in a post of responsibility fostering Hungary's participation in the war, or preventing the armistice agreement, or promoting war, was qualified as a war crime. Participation in the Arrow Cross takeover on 15 October 1944 and in state administration afterwards was also considered a war crime since the Arrow Cross system extended the country's war participation and deepened the alliance with the Axis Powers, especially with Nazi Germany. Helping armed forces in violent acts against people or property, joining the German army or security services (e.g. SS, Gestapo), or collaboration with German corps were also heard as war crimes before the people's courts. The category of war crime also consisted of acts against the conventions and international agreements of waging war, the treatment of POWs, and the atrocities committed against the civilian population. All those who 'took part in people's illegal execution and torture' were brought to justice as war criminals.

[12] Crimes against the people pertained primarily to the following acts: initiating 'laws going seriously against the interests of the [Hungarian] people', cruel treatment by the authorities after 1 September 1939 in 'executing laws and decrees against certain layers of the [Hungarian] people', public distribution of 'fascist and antidemocratic trends', arousing and supporting 'racial and denominational hatred', collaboration with organisations serving the 'persecution of certain layers of [Hungarian] society', voluntary function or membership in the *Volksbund* and in antidemocratic parties or organisations, and public promotion and support of anti-popular and antidemocratic measures.

Hungary's involvement, and more intense participation in the war, or the prevention of the armistice agreement, but were realised against "some groups of the Hungarian people, namely either the Jews or the democratic elements'".[13]

In the post-war political imagery there was a causal relation between the two types of political crimes. The historical catastrophe did not commence with the war in 1939; it was 'rooted in the counterrevolution following the 1919 revolution', that is, in the so-called Horthy-regime under which 'Hungarian soil was mined, and the seeds of hatred were scattered'.[14] Consequently, war crimes were connected directly to the Second World War, while crimes against the people were related to the politics leading Hungary into the war.[15] In parallel to the causal relation between the two types of political crime, in general the possible punishments for crimes against the people were less severe than those for war crimes. Even though people's legislation neither applied the category of genocide nor mentioned the Jews, it allowed the punishment of deeds committed on racial grounds. It also made possible the prosecution of non-racial persecution.

Emancipating 'the People'

What the legislators meant by 'the people' (*nép*) is central to our interpretation. In a political sense, the concept referred to the Hungarians to whom, according to the preamble of the decree, the catastrophe happened. So the victim of crimes against the people were 'the Hungarian people', whom the ruling forces, themselves, also Hungarians in a way, drove into the national catastrophe. If the Hungarian people were the victims, then who were the perpetrators? In post-war Hungary, this 'national paradox' was solved in different ways by various discursive strategies, all differentiating between the

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[13] István Ries (1945b), *A népbíráskodásról szóló 81/1945. M. E. számú és az ezt kiegészítő 1440/1845 M. E. számú rendelet szövege és magyarázata*, magy. ell. Ries István (Budapest: Politzer, 1945), 33.

[14] Ries, 1945a.

[15] Szabó, 1947. See also Tibor Lukács, *A magyar népbírósági jog és a népbíróságok (1945-1950)* (Budapest: Közgazdasági és Jogi Könyvkiadó, Zrínyi Kiadó, 1979).

Hungarians. People's courts typically drew this intra-national boundary by representing only democratic Hungarians, and by convicting Hungarians as anti-democratic.

At the same time there was a sociological conceptualisation of 'the people': it referred to the previously ruled social categories, deprived of political rights in the former regime - basically the peasantry and the working class, but also Jews and left-wing politicians. Beyond retribution, in the eyes of the legislators it was equally important to make the people the subject of historical justice who, stepping on the stage of history, now had the possibility to decide on those responsible for the national catastrophe.[16] The ministerial decree explicitly declared that people's courts 'return a verdict "*In the name of the Hungarian people*"',[17]

Making the people the sovereign political subject - turning the people into *demos* – this ultimate goal was supposed to be realised by the people's courts' organisational structure and principles of operation. Most importantly, these tribunals were primarily laic juridical institutions. Judgement was passed by the clear majority of the votes of the five (later six) members of the people's court councils, each a non-expert delegated by one of the coalition parties, and by the Trade Union. Each council was chaired by one trained professional judge who, until 1948 at least, did not have the right to vote. Their role was to keep the legal frames of the procedure, and if asked by one of the laic people's judges, to inform the council about legal aspects of the case – without telling how they in the given case would judge the accused and why. By putting the 'laic element' in the centre of the procedure, legislators intended to assure that it was really 'the people' who called to account those responsible to their own suffering. As one of the articles in the booklet of the Budapest People's Court put it: 'According to the principle of active democracy, [the people's court] does not really cooperate with the people but here it is the people themselves who are the court by way of delegates

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[16] The saying 'ruling the people against the people' well exemplifies this conceptualisation of the catastrophe, which of course enabled the responsibility of the everyday Hungarians not to be raised.

[17] Hogyan működik a Népbíróság sajtóosztálya? *Ítél a nép... népbíróságikiadvány*, 1945. május 4. Paragraph 51.

chosen from their own'.[18] It is more precise to say, however, that it was not the people themselves but only the political parties of the ruling coalition who could delegate people's judges. Legal expert Imre Szabó, who argued for a reformed and permanent system of people's courts, proposed to delegate the judges according to public registers, thus abandoning the 'mechanical party composition of the councils'.[19]

The role of the supposedly liberating 'laic element' was not confined to the procedure of returning verdicts - it also determined the work of the prosecution. The decree on people's jurisdiction gave orders about the function of the people's prosecutors, who had to be professional judges, counsels, or at least legal experts, appointed by the Minister of Justice. However, on the basis of the ministerial decree's preamble, actual judicial practice created the role of the political prosecutor, assumed by non-expert persons. 'The practice of people's courts regularised specifically the representation of indictment because, concerning also the prosecution, it intended to enforce the formulation [of the preamble] that the plaintiffs of the crimes of war and crimes against the people are the Hungarian people'.[20] The political prosecutor embodied the Hungarian people as the plaintiff of political crimes, and their task, among others, was to 'clarify the actual trial's historical, social and political relevance'.[21] In legal terms, the political prosecutor was not part of the prosecution, since he only disposed of the rights of the plaintiff. While the people's prosecutor proceeded in the name of the Hungarian state, the institution of political prosecutor was destined to make the Hungarian people part of the process. In some cases, political prosecutors had a considerable role in the proceedings: either they cooperated with the people's prosecutor in writing the indictment, or they made the process continue even if the individual plaintiff had withdrawn her accusation.[22]

By making the 'laic element' central in the functioning of people's jurisdiction, Hungarian legislators attempted to assure that it

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[18] Ítél a nép..., 1945. május 4.
[19] Szabó 1947.
[20] Lukács, 1979: 272-3.
[21] Ibid.
[22] See Ibid, 274-281.

was really 'the people' who were the political subject of post-war historical justice. The revolutionary aspect lay in this characteristic of people's jurisdiction: the political and social emancipation of the people, that is, their transformation into a collective political agent. Professional control was included in the system, though. Not only did the head of the people's court's council have to be professional, but also the members of the National Council of People's Courts delegated by the coalition parties. This court of second instance was supposed to correct the decisions of the people's courts and, since there was no precedent for the application of the decree and actual interpretations considerably varied in the 24 people's court councils, to give guiding principles of juridical practice, to lay down the common interpretation of the ministerial decree's orders.

Documenting Historical Truth

Besides legal retribution and political emancipation, people's jurisdiction was intended to contribute to the production of historical truth. In the immediate aftermath of the war, the truth about the 'historical catastrophe' was highly contested because of the ideological views and propaganda of the previous regimes and the lack of authentic information. This is why the problem of documentation was of particular importance after the war ended. Also, since the catastrophe was conceived as a logical outcome in a historical reason-consequence consecution, it was essential to explore its causes in order to ensure that the past catastrophe would never return in the future.

Historical truth was established in various ways during the proceedings, most importantly by the work of the people's prosecution, which included the collection of sources and interrogation during the interrogative phase, and by testimonies during the trial. As one of the people's prosecutors put it: 'the people's prosecution [...] every time when it impleads, it discloses in a reason-consequence manner to the people's court how the actual defendant's crime affected the final catastrophe'.[23] The procedure of

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[23] Ferenc Fontány Dr., 1 nemzetvezetö, 4 miniszterelnök, 21 miniszter, 6 államtitkár a népítélőszékeelőtt, *Népbírósági Közlöny*, 1946. január 5.

people's courts, with such practices as interrogation, confrontation of the defendant with documents and victims, the opposition of prosecution and defence, and decision-making in the council, provided institutional conditions of producing historical truth, what Foucault called *regime de vérité*. As the article in the first issue of People's Courts' Bulletin put it, informing the readers about the system of political justice, 'Beyond the retribution of criminal acts, in people's courts it is history which is written day by day.'[24]

According to the post-war Hungarian social imagery, people's jurisdiction would serve as the laboratory of historical records, available to the public. The Minister of Justice even proposed (in vain) to integrate the memorials of trials of the principal war criminals into the school curriculum since 'the witnesses of historical times, written documents, and even the testimonies of the defendants, all explore before the whole public of the country what happened during 25 years in Hungary'.[25] Contemporary intellectuals, historians and journalists, attended the trials in order to attain otherwise inaccessible historical records. In November 1945 the Ministry of Justice launched its own weekly journal, People's Court's Bulletin, which published the sentences of the people's courts and of the National Council of People's Courts, as well as the decisions on appellation of the justification committees which, from May 1945, were an additional role of the people's courts; it also published the calendar of trials, and in some important cases they made the indictments available to the public.

Moral Rebirth

It is beyond doubt that the constitution of reason-consequence narratives of the historical catastrophe had a strong ideological aspect. By discursively inscribing what was right and wrong in relation to the old regime, people's courts were supposed to repair the moral order and legitimate the would-be democratic system. Their role in giving moral examples was never questioned;[26] if contemporaries criticised

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[24] Népbírósági Közlöny, 8 Nov 1945.

[25] Ries, 1946.

[26] See e.g. Berend, 1946, 28.

the practice of people's courts, they pointed to their failure to clearly trace the boundary between crimes that have to be punished and acts that need to be morally condemned rather than criminalised.[27]

Another enlightening role attributed to people's courts was a sort of 'learning by doing' - that is, establishing democracy through direct popular participation in historical justice by way of the 'laic element'.[28] In a sense, the National Council of People's Courts was meant to operate as a 'national super-ego', because its judgements and statements of principle functioned as a practical interpretation of past deeds based on the text of the law, and as the just differentiation between right and wrong. These decisions were supposed to serve as guidance in knowing who merited pardon and against whom democratic Hungary must be defended. Through the decisions of the courts of first and second instance people could, in principle at least, refer the new categories of political crime to their own past and thus account for their own deeds before and during the 'historical catastrophe'.

Conclusion

What makes the post-war era peculiar is the fact that the new regime did not exclusively attribute political violence to the representatives of the past. Reconstructing the political subject, for which people's courts were one of the most important institutions, also included violence to the Self, that is, retaliation against the previous political system's deeds, and the political exclusion of adversaries from political life. This is why the problem of legitimate political violence, of the principles of difference between revenge and justice, was of central importance in the would-be Hungarian democracy after the war.

As one of the main institutions of post-war retribution, people's courts were meant to inscribe the criteria of legitimate political violence exercised by the new regime. Their principle of operation was inseparable from the broader sense of history. The recent past was conceived as a historical catastrophe that had

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[27] Eg. István Bibó, A magyar demomrácia válsága, *Valóság* 2-4 (1945), 5-43.
[28] Imre Szabó, 'A népbíráskodás időszerű kérdései', *Fórum* .1 (1947), 54-62.

happened to the Hungarian people, and the present was experienced as transitional where the material, mental and moral remnants of the past impeded the establishment of a politically, socially and economically democratic society. In this complex social imagery where the ideas of democracy and revolution were deeply associated, calling to account those who had been responsible for the national catastrophe was considered a precondition of post-war recovery. The system of people's jurisdiction served this collective task in several additional ways. Beyond mere retribution of political crimes, other important functions were attributed to it, of which this paper has discussed four. First, by the legal construction of past political crimes, people's jurisdiction contributed to the legitimate definition of the political community. The differentiation between democratic and anti-democratic elements was supposed to solve the national paradox according to which both the victim and the perpetrator of the catastrophe was Hungarian. Second, people's jurisdiction was meant to serve political emancipation: the legal discourse constructed the plaintiff in such a way that the people as a whole were an active and collective agent in the trials, and the procedural regulations made historical justice democratically accessible by the 'laic element'. Third, people's tribunals were conceived as sites of documentation where authentic historical records would be produced. Forth, they were supposed to contribute to the moral rebirth of the nation by inscribing what was wrong and right in the recent past.

The above study in historical sociology focused on the changing social conditions of legitimate political violence. Instead of writing the history of the people's courts in Hungary, its aim was to provide resources for possible critical positions toward the present day normative order. Even if the great effort of building democracy was doomed to failure after the war, the way democracy, political emancipation and historical justice were relied upon is far from being irrelevant today.

Kinds of Violence

Brendan Hogan

Normative discussions of legitimate violence are notoriously fraught with a variety of problematic distinctions. On the state level, for example, consider the doctrine of double effect as a *jus in bello* principle of the conduct of war. Likewise, consider invocations of violence to preserve public safety, including controlled killing itself as a legitimate form of punishment in the US and several other nations. The complexity of the moral considerations of such state actions is well known. Weber, in a sparer fashion, constructs his definition of the state itself as a 'human community that successfully claims the *monopoly* of the legitimate *use* of physical *force within* a given *territory*'.[1]

At the foundation of the dominant contemporary idea of the

State, the liberal tradition famously introduces self-preservation, and violence in its name, as a *sine qua non* of the human condition in both any state of nature as well as a social order. Further, the concept of individual rights, and in particular liberty, becomes paramount in liberal political theory as an additional part of the conceptual architecture of this picture, stemming from self-preservation, but including ideals of workmanship and property ownership in Locke.[2] In a variety of ways, the individual bearer of rights, so often the trump card in discussions of normative political questions, intersects with a notion of liberty that is essentially negative. Much has been written on the problematic distinction between negative and positive liberty, both at a conceptual level and at the level of consequences of practices. I point to the privileging of negative liberty, freedom from interference, in the liberal tradition for purposes of highlighting it as an ideal

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[1] Max Weber, "Politics as a Vocation" *in* Hans Gerth and C. Wright Mills (eds.) *From Max Weber* (Oxford: Oxford University Press, 1958).

[2] See John Locke, *Second Treatise on Government*. Edited by Ian Shapiro (New Haven: Yale University Press, 2003), 312.

theoretical concomitant of the market system, and one that occludes other normative claims. Specifically, this hypostatization of the negative dimensions of liberty as prior to conditions of human flourishing contributes to the justification of practices that are best understood as 'economic violence'. In fact, these practices point up a contradiction with wider notions of self-preservation.

But what happens to the liberal normative justification for violence after a Hegelian and Marxist historicisation and materialisation, respectively, of the conceptual life of the species? What are the consequences for our diagnosis when the critique of the liberal order finally faces the question of violence after the principles of liberalism have been exposed as having been co-opted into instrumentally functioning as an ideological feature of the legitimation of capitalism? Further, what follows from the fact that the contemporary defense of a political economy of expanding free markets and minimalist state regulation relies on a distorted and false picture of the metatheoretical and justificatory status that liberals would otherwise claim for economics? For example, the very idea that free contracts between individuals are so clearly superior to the chains of feudalism becomes subject to critique when the abstract models of agency and rationality are once again set upon their feet. But one need not go too far afield from the Enlightenment tradition itself to find David Hume attacking the very notion of the capital-labour contract when he said (to paraphrase) that the kind of liberty the worker experiences in selling their labour is the same as the one of a person who, having been shanghaied, wakes up on a seafaring ship, deep in the ocean, and is given the 'free' choice to row or walk the plank. So much for the concept of 'exit'.

But how does legitimate violence flow, if at all, from a theory that primarily targets *systems* as opposed to individual actors as its focus of critical and descriptive analysis of the conjuncture at which any group sits with respect to the development of the capitalist mode of production?

As is well known, Marx did not have a problem with the expropriation of the expropriators. However, when historical agency is moved to the level of class actors in this tradition under conditions of a variety of historical conjunctures, the historical record presents a

deep challenge to praxis oriented to revolutionary change. However, in the tradition of Western Marxism, it is perhaps Antonio Gramsci's work that offers the most sophisticated discussion of force, violence, and war. He was crucially concerned with just such questions in his own writings.

Specifically, Gramsci targeted the intellectual landscape at his time as the legitimating and causally supportive force of the exploitation endemic to capitalism as a mode of production. Before exploring economics as a constitutive element of the question of violence under these conditions, it is worth noting the lineage from which Gramsci operates and its place within larger intellectual trends in critical theory. Gramsci and a variety of left-Hegelian emancipatory thinkers have been seen to embrace 'totalising,' 'essentialising' and 'absolutising' perspectives. In response, thinkers friendly to the ends of Marxism or Democratic Socialism have embraced a variety of conceptual positions in opposition to what they consider to be these particularly egregious errors indicative of a kind of modernist triumphalism, the metaphysics of presence, epistemological ethnocentrism and false universalism, and the infallibility of a foundationalist and overly scientific view of rationality. This movement has alternatively gone under a variety of names, including post-structuralism or post-modernism. It is my contention that this is an overreaction to tendencies in some thinkers within a diverse tradition that is filled with nuance and within whom 'the fallibilism of modern self-consciousness' was a feature, though of course not a perfect one.[3] The details and support for this claim are outside the scope the current concern of this essay, but in the tradition of Western Marxism there are plenty of critical, fallibilist, anti-authoritarians who read communism as radical democracy, and Gramsci is not particularly subject to the pitfalls of these overarching mistakes of Enlightenment rationality. Indeed, he targets such overreach frequently, and in particular the kind that reads economics

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[3] Thinkers who assert these irreducibly dominating and subjugating features of the exercise of rationality include most prominently Friedrich Nietzsche and Michel Foucault. These and other thinkers, such as Jacques Derrida, who criticize rationality along these lines are addressed by Jürgen Habermas in *The Philosophical Discourse of Modernity*, (Cambridge: MIT Press, 1986), 326.

as a law-like science which is akin to the natural sciences and thus value-free.

Gramsci is a particularly interesting figure within this tradition as his own model of emancipatory political change is some distance from those of his Soviet revolutionary contemporaries. While not offering the most detailed criteria for deciding when violence is legitimate in class struggle, he created a conceptual framework using the concept of war as a touchstone. 'Wars of *manoeuvr*e' and 'wars of position' are the terms of art he used to describe the axis of political strategy under conditions of capitalist hegemony; and much less discussed, the taxonomy he provides also includes 'underground war'.[4] That Gramsci saturated his analysis of hegemony with such discussions of consent and coercion, force, and violence clearly points in the direction of a kind of violence that is legitimate within situations of capitalist exploitation. Such types of violence, as symbolic, gender, political, and economic violence, are now part of the habitual conceptual vocabulary that we have at hand to explore what a war of position or a war of manoeuvre must endorse in terms of counter-hegemonic action, and yes, violence. Wars cannot be carried on without violence. But Gramsci was also clear-eyed enough in his understanding of the revolutionary situation in Italy and other European countries to be very reticent with respect to physical, class-based violence as a means of change. That is, the conditions for a war of manoeuvre are difficult to diagnose.

It is through Gramsci's analysis that the contemporary panoply of kinds of violence can gain a register pointing towards some violence as legitimate under current conditions, including strikes and some forms of expropriation.

Economic Violence

The type of violence I am concerned with diagnosing today is a hybrid. It could perhaps be called symbolic violence, but I prefer the term 'economic violence' as the main frame of our juncture. Due to

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[4] Antonio Gramsci, *Prison Notebooks, Vol. 1*. Ed. Joseph Buttigeg, (New York: Columbia University Press, 1993), 219.

the inextricability of the symbolic legitimation of neoliberal globalisation from the discipline of mainstream neoclassical economics, I believe that the threshold for violent actions of a very restricted sort may have been reached in certain contexts by *even* the classical liberal criteria of self-preservation mentioned at the beginning of this paper. The two bases of this judgment are environmental sustainability, on the one hand, and the creative dimension of human labour on the other. In this sense, a Gramscian legitimation of violence in these instances may perhaps be best characterised as self-defence or preservation. It is an open question, and a provocative one, but it must be seen as one that is timely given the dire straits of humanity under the weakening ecosystem that sustains life.

While it has become an increasingly popular, and very welcome, movement to criticise the intellectual foundations of neoclassical economics (to say nothing of their function in legitimising capitalist hegemony) from a variety of theoretical perspectives, including post-structuralism, normative economics, interpretive social science, and feminist economics,[5] it is interesting that Gramsci had already diagnosed a fundamental methodological, philosophical, and thus normative problem in both Soviet Marxism and liberal utility-maximising neoclassical economics. He used the term 'economism' to discredit both models of philosophical anthropology, or models of human activity, and spent much intellectual labour criticising these mirror images in opposed political camps. The reductive interpretation of *homo sapiens* excluded the creative and thus political and cultural dimension of human agency and served to distance Gramsci from his more positivistic colleagues such as Bukharin and others.

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5 See for instance, Wendy Brown, *Undoing the Demos: neoliberalism's stealth revolution* (New York: Zone Books, 2015); Charles Taylor, *Modern Social Imaginaries* (Durham: Duke University Press, 2003); the classic immanent critique of Edward Nell and Martin Hollis, *Rational Economic Man*, revised edition. (Cambridge: Cambridge University Press, 2007); and Julie Matthaei, "Beyond Economic Man: Economic Crisis, Feminist Economics, and the Solidarity Economy." Más allá del hombre económico: crisis económica, economía feminista, y la economía solidaria Cayapa. *Revista Venezolana de Economía Social.* Año 10(19) (2010), 65-80.

More specifically, as is well known, Gramsci targeted Bukharin's adaptation of a concept of law in human history as exclusive of indeterminacy, and of the necessity of free, conscious struggle and development on the part of the working class with respect to their future.[6] The self-reflexivity of the human agent, which poses such a deep challenge to the social sciences - the fact that the agent changes their field of action in reflecting on it, changing the very nature of the action itself, thus changing the field being observed, whose observations in turn change the actor's intentions, ad infinitum - is eliminated. Human action is rather modeled as explainable by covering laws akin to those at work in the natural sciences, reducing seeming intentional actions to epiphenomena of deeper cause and effect processes.

Neoclassical economics is perhaps the expression of this positivistic tendency in the social sciences *par excellence*. What is this model and how does one attribute 'violence' to it? Neoclassical economics is famous for removing class agency and social structure from its conceptual framework. In the words of Duncan Foley:

> For one thing, the Rational Consumer integrates the roles of the Classical Worker, Capitalist, and Landowner. Everyone is, after all, to some extent a worker supplying labor-power, a capitalist who owns at least some dividend or interest yielding assets, and a landowner. The marginalist revolution obliterates the vigorous class distinction of Classical political economy to create a Representative Economic Agent who is a scale model of the whole society… [T]he characteristic problem of the Rational Consumer is different from that of the Worker, Capitalist, or Landowner, who had to fight out their class positions existentially. The Rational Consumer's function is to Choose. Thus he (or perhaps even she) becomes Sovereign in the neoclassical picture of the function of the

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[6] See Giuseppe Fiori, *Antonio Gramsci: a life*, Trans. Tom Nairn (London: Verso, 1990); Joseph Femia, *Gramsci's Political Thought* (Oxford: Clarendon Press, 1987); Antonio Gramsci, *Modern Prince and other writings* (New York: International Publishers, 1959).

capitalist society. The immense investment of resources in productive facilities and infrastructure is simply the most convenient device by which the Rational Consumer can transfer her wealth from the present to the future. Her Tastes govern the allocation of social resources among competing ends. Though to the undiscriminating eye the enormous capitalist firms and trusts of the late nineteenth and early twentieth century might appear as formidable centers of economic and social power, the penetrating economist recognizes that they are actually pussycats under the heel of the Rational Consumer, whose whim expressed as demands on the market bring them to heel.[7]

A short sketch of the main features of *homo economicus* and the model of practical reason therein is in order. This will fill out the dominant picture of human action at the root of what I called above the symbolic legitimation of our contemporary global order. The generality of this sketch will belie a certain skirting of issues with regard to the nuance that utility-maximizing models of the rational chooser have gained in response to the myriad critiques it has undergone. Still, though there have been, and continue to be, technical innovations to widen the understanding of preferences, for instance, the model of rational choice that informs *homo economicus* remains at least minimally committed to the following features:

1. All actions and events are explained by reference to an

    individual utility-maximiser or aggregate of such

    utility-maximisers.
2. This chooser maximises their utility based upon a given schedule of preferences,
3. and perfect information regarding the ability to realize those preferences,

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7 Duncan Foley, "The Strange History of the Economic Agent*" New School Economic Review*,11 (2004), 84.

4. and a perfect internal computer that is able to calculate which preferences can be realized, given perfect information, and chooses accordingly.

The amount of conceptual underpinning that allows these features to constitute the model of *homo economicus* is enormous, and a treatment that truly belaboured the entirety of disagreement that an alternative model of human choice would have with such a picture is of course beyond the scope of this paper. Inherent in the original claims that these assumptions help to explain or predict human economic action in a scientific manner are an entire battery of theses, including at least four:

1. Human action is explained according to methodologically individualist tenets.
2. Maximising personal utility is the prime motivator of action.
3. Perfect information is possible.
4. Human beings have the power or habit of computing choices, given preferences and information, in a 'rational' manner which is imputable and unaffected by historical contingency or exigencies of any kind; that is, it is *a priori*, unconditioned and perfect. It is algorithmic.

A helpful way of conceiving of this agent is as, in Martin Hollis' terms, a 'throughput'.[8] Convincing arguments have been shown that rational choice models restrict the agent from formulating different preferences according to different problematic situations within the choice situation itself. Any deviations from stated preferences that subjects may avow, or any inconsistencies in the choice given stated preferences, are dissolved by the claim of what the agent would do if they were rational, or by invoking such technical fixes such as 'counterpreferential' choice, and 'revealed' preferences. Though there are good reasons from a variety of theoretical perspectives to reject

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[8] See Hollis, M.. *Reason in action: Essays in the philosophy of social science* (Cambridge: Cambridge University Press, 1996), 49.

such a model of choice, and indeed these rejections are becoming more numerous, the point here is to highlight the model in a general fashion.[9] This also because it informs policy, both in terms of international relations between power players and neoclassical economic development actions.

The Violence in this Model

The costs of enlisting neoclassical economics as an ideological spearhead through which capital sets up extraction process around the globe is well-documented, and thus the fallout of what Gramsci diagnosed as the 'economism' of this model of human action can be assessed. Specifically, the question of the globalisation of the liberal market model of political economy is perhaps the most obvious starting point for discussion. The empirical results of this story are debated, but there is good evidence suggesting that the 'development' projects framed according to neoclassical principles and foisted upon many countries fail in terms of quality of life indicators as proposed by the UNHDR.

Lawrence King has detailed the ways in which neoclassical models and the introduction of neoliberal economic processes contributed to greater mortality rates in the former USSR through shock privatization.[10] These serve as good illustrations of the above model, as their justification and legitimation includes a robust claim to be mandated by the value-free employment of the science of economics with the help of econometric modelling of aggregate utility maximisers. In addition, King has more recently been tracing rates of

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[9] The preference structure has also spawned much literature that is beyond the scope of my concern here today. Specifically, preferences are 1) given in a choice situation 2) current 3) homogenous and 4) consistent.

[10] "Mass privatisation and the post-communist mortality crisis: a cross-national analysis" (with David Stuckler and Martin McKee) *The Lancet.*, 373(9661) (2009), 399-407. "International Monetary Fund programs and tuberculosis outcomes in post-communist countries" (with David Stuckler and Sanjay Basu). *Public Library of Science Medicine* 5 (2008): 1-12; "The political economy of farmers' suicides in India: Indebted cash-crop farmers with marginal landholdings explain state-level variation in suicide rates" (with Jonathan Kennedy) *Globalization and Health* 10(16) (2014): 1-9.

TB in countries that have introduced IMF structural adjustment programs, as well as suicide rates in India among farmers. The evidence is striking in terms of how IMF plans, resting as they do on the conceptual architecture of neoclassical economics, have resulted in widespread rises in inequality, the spread of TB and a rise in mortality rates. What is particularly crucial in pointing to neoclassical economics here is the additional feature of the reification of markets as a space where 'natural' forces are set free to work through the activity of rational economic humans. [11] The states King analyses are also particularly relevant to correlating the rise in mortality rates to the implementation of econometrically justified structural adjustment programs. It is in these states, lacking as they do the normal features of democratic civil society, democratic cultures of representation, and historical practices within a contemporary market society (which show up in neoliberalism's adaptation of neoclassical economics as 'inefficiencies' and 'costs'), that the market was given wide latitude to operate, and in a sense operated perfectly according to the logic of capital. In a deep sense, they were the laboratories of ongoing experiments begun with Milton Friedman and carried on by his even more radical neoclassical acolytes.[12]

However, what Gramsci allows for in contradistinction to the neoclassical (and, it is noted, the postmodern and Soviet) models of agency and hegemony is an understanding of the human subject that is both constituted by and constitutes its material and symbolic environment. The agent is both spontaneous and receptive, with respect to the social structures and economic activities that they find themselves thrown into, historically speaking, as well as in their native capacities.

Gramsci regularly invokes human creativity as a norm for articulating the criterion for self-defence, for class agency and for the naming of economic violence.[13] However, this naming process, the

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[11] For a compelling philosophical account of the background to this architecture see Charles Taylor, *Modern Social Imaginaries.*

[12] Think also of Pinochet's Chile, a laboratory of Friedmanite policies.

[13] Elsewhere I have taken up a fuller account of these insights of Gramsci's. See, "Pragmatic Hegemony: questions and convergence" *The Journal of Speculative Philosophy* 29(1) (2015): 107-117.

praxis of intellectuals at any given conjuncture, requires social inquiry that resembles the norms of democracy as much as any other political arrangement. Specifically, Gramsci's deep awareness and methodological inclusion of the periphery and his origins in the Sardinian subaltern infuse his commitment to the scientific element of class struggle. Far from excluding those class actors whose position he once inhabited before taking a role on the international stage and then his imprisonment, Gramsci makes their inclusion in the process of scientific praxis an essential element of class struggle that is both democratic and scientific. In addition, it is also a process whereby one can, through this social process of inquiry, determine when a war of manoeuvre is called for to end a system of hegemonic domination and establish a new hegemony. It is at this level, when the inclusion of the condition and input of the periphery informs the next step in class praxis, that one of the conditions for class action of violent expropriation or resistance can be legitimated. That is, the epistemic requirement of class consciousness and its articulation requires a multiperspectival dialogue on social problems among the people who constitute the problematic situations, the subject and objects of praxis. This is the way in which the both the methodological individualism and the compartmentalization of preferences from learning processes at the heart of neoclassical model of human action is overcome. However, if the situation is understood to be one where survival becomes a paramount interest, then self-preservation requires a recognition of this. And thus economic actions, be they the war of position in terms of a boycott or the war of manoeuvre as in a strike, are called for. This requires (and not minimally) a deep thinking and deliberation regarding the ensuing responsibility for the consequences of the latter's violence as constitutive of the process whereby a strike is enacted to stop economic violence of the sort referenced in this paper and unfortunately increasingly present at our historical conjuncture.