The Black Body in Colonial and Postcolonial Public Discourse in South Africa

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Abstract
The black body has been over-represented in colonial travel accounts, administrative records, novel literature, media and popular anecdotes. Without suggesting that other persons are more immune to poor representations, this essay simply wishes to focus the reader’s attention on the historical representations of black people, and women in particular, to offer an epistemological account of the black body in religion, gender and health. In so doing, we argue that the continuing alienation of the body within religious and social discourses in contemporary South Africa is sustained by three historical articulations and representations of the black body. We further argue that these colonially produced representations continue to shape the rhetoric and the epistemologies of the black body in the postcolonial context. We suggest that the representation of the black body as site of labour; violence and disease has been particularly enduring. The article

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interrogates the representation of the black body, and the ways these representations have been sustained by social discourses that imagine black bodies as fixed and without agency. Through the deconstruction of these representations this we draw attention to some ways through which to reconsider discourses about gender and health in the southern African context. The main argument is that an understanding of the relationship between gender and health in South Africa requires a necessary understanding of the representations of the black body in history because they frame current articulations and/or relationships to black bodies.

**Keywords:** black body, health, colonial and postcolonial public discourse, South Africa, Violence and Degeneracy, Representation

**Introduction**

The intersection of religion and health has enjoyed much vibrant discussion in Southern Africa in recent years. The HIV pandemic has provoked a range of social responses and religious reflections on what constitutes health and well-being (Cochrane 2012; Haddad 2011). Historically, faith communities in Southern Africa have not reflected much on the idea of the body, other than as a socially located subject engaged in a struggle for liberation. The theistic religious traditions that have been the norm in South Africa have by and large assumed a Cartesian conception of the body as a biological entity distinct from the mind. While most scholars would offer a critique or revision of traditional Cartesian ideas about the body, few would contest that his ideas about the body have significantly shaped modern protestant thought (Torcello & Wear 2000; Barglow 2002; Meiring 2014).

Johannes Meiring (2014) in his excellent doctoral dissertation on ‘the corporeal turn in Southern Africa’ lays bare the dominance of Protestantism and how it has informed ideas about the body in colonial and Apartheid South Africa. The inherited alienation of the temporal from the profane resulted in a material segregation of interests in the body from interests in the soul, and this impacted on the lives and futures of black people in very particular ways. For example, David Chidester (1996) in his *Savage Systems* reminds us that in early encounters with colonial travellers, indigenous people were believed not only to lack religion but also the ability to reason.
More recently, Anthony Pinn (2010) writing from the perspective of black theology in the USA, asserts that historically American protestant religion reinforced the idea that black people’s bodies need to be policed and kept under surveillance because if not arrested in labour, they would degenerate into chaos. The historical collusion between state and church was similarly characterised by the ways in which black people’s bodily rights were constrained in South Africa in the colonial era.

As we reconsider the intersection of health, the body and religion in the postcolonial context – we need to recognise that the body is always simultaneously fixed and flexible. It is fixed in its socio-spatial context, for example for the person in a wheelchair or a woman prevented from speaking in church; and yet it is flexible because whether through prosthetics or surgery bodies can be modified, and in ritual performance arresting representations of the religious or racial body can be disrupted through, for example, dance. Further, despite material and theological reservations about the idea of the body as flexible, and well-being as environmental, these issues require serious consideration in the postcolonial context.

As an incident that highlights the interest and sensitivity around politics of health and the representation of black women’s bodies, we want to start with a consideration of the 2012 media storm provoked by Afro-Swedish artist, Makode Aj Linde’s ‘genital mutilation cake’. The artist produced a large cake caricatured as a black woman, as part of an art installation to highlight the issue of female circumcision. Yet, it was the Swedish Minister of Culture’s participation at the opening ceremony that initially provoked the most vocal public protest about insensitivity and caricature. According to another Afro-Swedish critic who blogged about the exhibition it was precisely ‘the objectification of the black female body via the cartoonish color scheme that distanced the viewers from the victim’s humanity’. What this debate signals is that despite this artist’s concern with female genital cutting during this exhibition, the sign and symbols concerned with the depiction of the black female body in the modern era remains highly contested and politicized, not least when reminiscent of or inspired by colonial representations and imagery.

Colonial and Postcolonial Representations of Black Women’s Bodies

Most postcolonial scholars (cf. Mazrui 2005, Mohanty 2003, Gandhi 1998, Rattansi 1997, Mudimbe 1988, Said 1978) acknowledge that the discursive practices of arresting the black female body as uncivil, superstitious, degenerate, lazy and over-sexed forms part of a longer history of Orientalist depictions of the colonial Other. Indeed, in much of nineteenth-century literature as well as in the popular imagination, the black body emerges as a symbol of sexual promiscuity and deviant behaviour (McClintock 1995). A particularly disturbing and illuminating example of the ignorance and prejudice that African women’s foreign sexuality engendered is the infamous case of the ‘Hottentot Venus’. The story of Saartjie Baartman is the tale of how British ‘colonial powers transformed one young African woman into an icon for racial inferiority and savage female sexuality’.

Saartjie Baartman (1789-1815) a young Khoisan woman was taken to Britain in 1810 and exhibited as a biological oddity and scientific curiosity due to her supposedly pronounced buttocks and genitalia. Baartman’s consequent humiliation and degradation exposes the racist attitudes that characterised 19th Century Europe, and for many activists her image has become an enduring symbol of Western colonial and patriarchal attitudes towards Africa.

Throughout the colonial period black women’s bodies continued to be sites of contestation. Colonial battles for mastery over the territory and over indigenous polity continued to be fought out on and over women’s bodies, and African geographies were imagined as ‘virgin lands’ ready for occupation and settlement. In this, colonial territories were gendered, and the conquest of female lands and bodies came to symbolise the civilising mission. Theorising the relationship between gender and nationalism, Nira Yuval-Davis and Floya Anthias (1989:7) write that ‘women are seen as the biological producers of national collectivities, they reproduce the boundaries of national groups’. For example, in 1998 the Anglican Church celebrated Manche Masemola, a young Christian convert who died for her faith in 1928, as one of the ten martyrs of the 20th century and installed a statue of her at London’s Westminster Abbey. By most accounts Masemola, in her

determination not to be deterred from her new-found faith famously declared, ‘I shall be baptised in my own blood’. Masemola died having been killed by her family after she refused to renounce Christianity and relinquish colonial, western dress. Both the examples of Baartman and Masemola illustrate how the domestication and policing of women’s bodies, whether by science or religion, remained sites of contestation from early colonial times well into the postcolonial period. Further, what has historically often been viewed as a western scientific project to grasp the African mentality or sexuality, must also be seen in relation to the various ways that indigenous polities and colonial mission have been embroiled in the policing and domestication of black women’s bodies.

However, these constructions of black women’s bodies as unruly and deserving of regulation persists even in the postcolonial state. In recent years both Zimbabwe and Swaziland have sought to regulate women’s freedoms in public spaces. For example, during the 2013 Swazi national election campaign two Swazi chiefs threatened to ban women from participating in the elections if they wore miniskirts or trousers. These men insisted that women should ‘dress properly, decently, in line with our culture to show respect’\(^4\). In a more decisive move to regulate women’s freedoms and bodies, the Zimbabwean police in 2013 launched a campaign called Operation Zvanyanya (It’s too much) a campaign intended to expel women sex workers from the city of Harare. The police gained widespread support from Christian churches that welcomed this move to rid the city of this supposed immorality. In a statement Apostle Last Fundira of the Zimbabwe’s Christian Aflame Ministries, not only asserted that ‘we do not need these undesirables on our streets’ but went on to insist that the expulsion of these women was in the national interest. He stated that ‘as a nation we cannot stand aside and look whilst our capital city is turned into Sodom and Gomorrah’\(^5\). Evidently at the heart of these religious and cultural objections are not only concerns with sexuality, but also the reinforcement of the idea that black women’s bodies


are the locus of physical disease and moral decay.

In her eloquent chapter ‘Nudity and Morality: legislating women’s bodies and dress in Nigeria’, Bibi Bakare-Yusuf (2011) exposes the hypocrisy of religious leaders and legislators in utilising Judeo-Christian, as well as Islamic, ideas to argue for the recovery of what they call ‘African modesty’. She insists that among Nigerian moralists it is no longer possible to imagine the female body or sexuality outside the realm of arousal (Bakare-Yusuf 2011: 124). Thus in order for society to be safeguarded from moral decay, likeminded moralists throughout sub-Saharan Africa would argue that women’s bodies must be regulated by men, a practice largely underscored by religious and social discourses that relies on rhetoric of civic morality and public health.

**The Body and Knowledge Production**

Some may ask why this focus on the body? And what might we learn from considering the ways that the body has been theorised and, elsewhere, administered? Chris Schilling (2001) argues that the body has come to occupy a central position within both social theory and contemporary media culture, particularly through its representational power and symbolism. Similarly, Anthony Giddens reminds us that in the modern era, which he refers to as an ‘age of anxiety’, embodiment has gained currency and appeal because reason in some respects the body has become regarded as a false god. In his view the body can no longer be imagined as a fixed essence and he argues that as a result ‘we have become responsible for the design of our own bodies’ (Giddens 1991; 102). Bringing attention to representation through and from bodies, Ben Carrington argues, will allow ‘us to map dominant ideologies as they circulate through culture and produce themselves as sites of interpellation of individuals in specific gendered, classed and racialised subjectivities’ (2010: 4). It is thus precisely through examining the symbolic significance of the body as a metaphor of social relationships (Turner 1994) that we can trace the meanings embedded within cultural representations of particular bodies – for our purposes, black women’s bodies - and see how such imaginaries operate to sustain specific power relations between groups and therefore influence women’s social, political and reproductive rights and decisions.
Most significant literature about the body has emerged out of poststructuralist and feminist critiques of social subjectivity and embodiment. This body of literature is historically represented in the work of Bryan Turner (1994), Arthur Frank (1996), Chris Schilling (2001), Donna Haraway (1991) and Judith Butler (1990). Turner (1991) argues that society is best analysed in relation to the ‘government of the body’ which is effected through reproduction (patriarchy), restraint (incarceration), regulation (policing), and representation. Frank (1996) in a less Foucauldian fashion than Turner, moves beyond a consideration of the body as simply an artefact manipulated by institutional and structural constraints, to emphasise human agency and the active nature of bodies. This conception of the body is echoed in the work of feminist theorists, Donna Haraway (1991) and Judith Butler (1990) who both emphasise the notion of the body as not simply a site of inscription but also significantly, simultaneously as site of performance (resistance and self-assertion).

In his sociology of the body, Arthur Frank (1996) suggests that the body is represented in distinct ways and he differentiates between the sexualised body, the medicalized body, the disciplined body and the talking body. Of course we must in this recognise the distinctly gendered and racialised ways in which men’s and women’s bodies are imagined and regulated, and in particular the ways that black women’s bodies are represented and governed. Frank’s distinction of the various categories through which the body is represented offers a useful typology by which we can imagine bodies in the domains of leisure, health and religion. Further, Frank’s typology makes possible a reimagining of religious rhetoric and representation as it pertains to ageing, medical ethics, disability, consumption and quite significantly, religious performance.

Sociologists of health have variously defined health as the absence of disease, which is of course a rather negative understanding of health, while others have insisted that health must be seen as a social phenomenon (Huber, Knotterus, Green et al. 2011; WHO 2004; Balog 1978; Germov 2009). This latter conception holds that health should be measured against and alongside the environmental conditions within which the body exists. Both understandings of health locates the body at the centre of the social world. However, despite recent scholarship on the sociology of the body, for many scholars of religion this privileging of the body is often situated, at least...
philosophically, as being at odds with the Judeo-Christian notion of the body as a mere vessel or host for the primordial soul (Calef & Simkins 2009). Nonetheless, Feher, Naddaff and Tazi (1989) remind us that historically bodies have been imagined along a continuum, from deified god-like bodies on the one end of the spectrum, to bodies as machines or animals on the other.

The ideological sentiments expressed by Africansist Leopold Senghor demonstrate this: in his recovery of indigenous forms of rule and administration he sought to expel (western) reason because he saw it as corrupting the more intuitive embodiment of African social reality, such as knowing through dreams or dance. Thomas Albert in his 2014 text, *Shamanism, Discourse and Modernity*, not only draws our attention to the explosion of allopathic medicines into a multibillion dollar industry as people look for new ways to engage their bodies in regimes of healing that integrate mind, body and spirit, but also illustrates how postcolonial indigenous healing practices collapse the mind-body/ body-spirit duality. Alberts cites David Cumes who in his shamanistic training with a famous Swazi *sangoma*, Petros Ezekiel Mtshali, came to the following conclusion:

The healing that the *sangoma* does, like the San healing, is the first medicine; it has not changed and will not change. This therapy arises from nature, and like us it will return to nature (Cumes cited in Alberts 2014: 187).

This recognition of indigenous knowledge forms and practices is consistent with shifts away from how the body has been regarded in medical science (as a Cartesian flesh machine), to integrate conceptions of the body in terms of social and political relations (Schepker-Hughes & Lock 1987). There has been a marked shift from medicine as primarily concerned with the elimination, and/or containment of disease, towards a concern with the management of health. Medical science has thus come to be about more than the diagnosis of disease and the prescription of remedies, to now including ‘prescriptions’ on how to live – as well as the pursuit of what is regarded as a healthy lifestyle; about the regulation and management of the body through exercise, watching what and how much you eat or drink, as well as how much you sleep or concern with such mundane matters as how you sit. Consequently such life prescriptions have come to include vigilance about behaviour, lifestyle, patt-
erns of consumption, as well as the organization of social space.

Of course such a view has implicit ideological assumptions, such as the idea that you have control and choice regarding what you eat – which for many economically vulnerable households, for example in Southern Africa, are bounded choices. A further embedded assumption rests in the widely held view that a ‘healthy’ body is the result of self-discipline and good health management, and vice versa. As such we often find that body shapes and illnesses that emerge from poverty and malnutrition in all its forms, are often outside patient control (Goedecke, Jennings & Lambert 2006).

The final assumption underscoring this approach to health is the idea that the body is not essential or determined but flexible insofar as it can be modified through rigorous health management, body sculpturing and/or cosmetic surgery. These ideas of the body as flexible have often been seen as contrary to Christian theological dogma - the idea of being created in the image of God, and as God intended. Similarly, the idea of health as self-management has often been rejected by African civil society activists and health scholars who are acutely aware of the bounded choices of African households. Accordingly they are more inclined to define health not so much as the poor management of the self but as the poor management or provision of infrastructure and utilities by postcolonial governments (Bradshaw & Steyn 2001).

As we suggested at the start of this article, it is our intention to interrogate the representation of the black body, and the ways these representations have been sustained by social discourses that imagine black bodies as fixed and without agency. Recent years have seen a flourishing of scholarship that deconstructs representations of the black body, and here we look to see what critical insights this body of scholarship adds to reflections on religion, gender and health in postcolonial South Africa. It is not uncommon to read scholars who illustrate the various ways that black peoples’ bodies are implicated in social, religious and bio-medical discourses. Butchart (1998), for example, writes that in discourses about missionary medicine in South Africa correlations were created between sin, disease and the black body. Invoking Harriet Washington’s Medical Apartheid, Zine Magubane (2014) reminds us that in early settler histories, the black body became an object of medical fascination and scientific speculation on both sides of the Atlantic. Finally, Sylvia Tamale (2011) cautions readers against
homogenizing and essentializing peoples’ sexualities on the basis of race, religion, class and ethnicity. Drawing on this scholarship, we below explore three historical articulations and representations of the black body that we propose continue to shape the rhetoric and the epistemologies of the black body in the postcolonial context.

The Black Body as Site of Labour and Reproduction

… what he wants from the slave is not recognition but labour.

A mere footnote in Frantz Fanon’s *Black Skin, White Masks* (1967a) this statement goes to the heart of his critique of Hegel’s *Phenomenology of Mind*, wherein Hegel explores the mutuality in the relationship between master and slave. In the chapter ‘the Negro and Hegel’ Fanon offers an incisive critique of the Hegelian master-slave dialectic by insisting that in the colonial context reciprocity is not ever-present. He argues that in a context where race and colour is privileged over (psychic) recognition, the master shows no interest in the self-consciousness of the other but merely seeks the labour offered by the slave.

Recognizing the very racialised conditions of existence under slavery in America, and for our purposes, colonialism at the southern African frontier, Harvard historian, Walter Johnson (2013) insists that we consider slavery or bonded labour as a system of racist extraction of labour in the interest of wealth accumulation. Moreover, Johnson argues that this was also a system of practices that controlled and regulated the black body, globally and intimately, to serve the demands of the colonial labour market. His ‘ecology of cotton production’ points not only to the material parameters of the enslaved peoples – the interchange between human beings, animals and plants – but is suggestive of the conditions of the enslaved. This regulation of the mundane in the interest of labour suggests a conception of the black body as simultaneously *machine* and *animal*.

This notion of the black body as machine is clarified when Walter Johnson, in *River of Dark Dreams* forces us to confront the body in the context of the plantation ecology by drawing attention to the most rudimentary, biological aspects of plantation life, what he terms ‘bare-life processes and material exchanges’ – the sun and soil, semen and shit, blood
and milk – into the history of ‘slavery’ and ‘capitalism’ (2013: 9). This highlights the under-examined material circumstances of the lives of ‘enslaved human beings’ – the morbidity and moral depravity – to reveal narratives of slaves who bled from whips until they lost consciousness, and sometimes life. As was common from around Gilroy’s Black Atlantic (1993) black bonded lives were marked by stories of women raped by slaveholders to produce new labour in the form of an infant child. These tales emerge as accounts of the black body as a site of labour through ‘the calculation of a person in direct proportion to the crop they could cultivate’ (Johnson 2013: 246).

On the other side of the Atlantic, in South Africa, similar calculations were being made by colonial administrators and missionaries as they sought to ascertain the cost benefits of education to the indigenous populations. At the Eastern Cape Frontier – where the indigenous population had been effectively made landless – menacing calculations were refined as missionaries sought to define an education policy at missionary schools. Les Switzer in his Power and Resistance in an African Society (1993) offers a detailed account of the contestation over people and land at the Cape colonial frontier. Demonstrating the complex negotiation between European protestant settlers and Xhosa speaking communities, Switzer highlights, contestation over the colonial mission education policy that would retreat from educating Africans for leadership and instead seek to limit the education of Africans for servitude – labour on farms. And not unlike on the Mississippi plantations, studied by Johnson, in South Africa too economies were built and sustained through the policing and containment of black people’s bodily engagement with the society.

With regards to women in the colonial context, labour was defined in particularly gendered and racialised ways. Apart from the association of women with the symbolic reproduction of the nation, they were also tasked with the literal and material work of reproduction; ‘women’s work’ was defined in relation, and restricted, to the home. This ‘cult of domesticity’ stigmatised women who laboured - particularly black women- who through their labour outside the home came to be seen as masculine, as existing outside of ‘true womanhood’ (McClintock 1995). This historical link between reproductive labour and black women is powerfully illustrated by the fact that the Dictionary of South African English on Historical Principles argues that
the word *maid* denotes both ‘black woman’ and ‘servant’ (Baderoon 2014). In this sense, the historical representation of black women in the Southern African context, situates their labour as primarily concerned with domesticity (and civilisation) and reproduction (McClintock 1995).

For a more contemporary example, let us consider, for instance, the work and life of, the predominantly black, women domestic workers in South Africa. Most domestic work is characterised by long hours, poor wages and the responsibility for conducting what is often considered demeaning and ‘dirty’ tasks. Domestic work, even when formalised and regulated, is concerned with reproductive labour; the work and care required to reproduce and sustain families and households. As such, what is at stake in these employer-employee relationships is the ‘worker’s ‘personhood’, rather then her labour power’ (Anderson 2000:2). For domestic work is not merely labour, it is intimately tied to notions and expectations around womanhood and femininity. A good domestic worker is necessarily also a good mother/wife; she possesses the qualities required to keep a home and a family happy, fed and clean. Through her labour, and personhood, the ‘dirty’ and degraded black domestic worker ensures that the ‘clean’ white, middle-class employer sustains her image as a good mother/wife (Anderson 2000). Yet by so doing, and directly correlated to how well she does it, the domestic labourer ‘fails’ to fulfil the same gendered role as wife-and-mother in her own home. Hence, the work of a live-in domestic worker presents us with a paradox: it is precisely the reproductive work she performs for her employer on a day-to-day, around-the-clock basis, that undermines her ability to perform similar tasks for her own family. As an intimately gendered and racialised form of labour and employer-employee relationship, the labour of domestic work is embroiled with the status and meaning assigned to black women’s bodies.

**The Black Body as Site of Violence and Degeneracy**

… the negro is an example of an animal man in all his savagery and lawlessness, and if we wish to understand him at all, we must put aside all European attitudes … nothing
consonant with humanity is to be found is his character (Hegel cited in Eze 1997: 128).

These words of Georg Hegel reflect the philosophical and bio-medical assumption of his day. The late colonial period was characterised by a mixture of contradictory but pervasive representation of the black body as not just only subhuman but also superhuman; superstitious and child-like on the one hand and yet constantly depicted as savage and threatening. This idea of the black body as threatening informed much of the representations thereof during the last century, from ideas of the ‘noble savage’ to postcolonial depiction of morally based ‘Big Men’. Most theorists and commentators (Cf. Fanon 1967a; 1967b; Mbembe 2003; Mamdani 2001) on the predicament of the African, agree that the black body is frequently configured and articulated in contexts and narratives of violence. Frantz Fanon, for example argued that the black person lives in the world differently precisely because of a long history of representations. He asserts that the Other ‘has woven me out of a thousand details, anecdotes and stories’ (Fanon 1967a; 111) invoking the fact that such representation extend beyond simply psychological alienation but, significantly, that it is born out of narratives of violence that characterised the encounters between Europe and its colonised others. By invoking incidents of European incursion into Madagascar and the French police torture of Algerian revolutionaries, Fanon’s work reflects clearly his concern with the ‘embodiment of colonial violence and the inscription of racist colonial discourse on the black man’s body’ (Pramod Nayar 2013:75). Finally, Nayar (2013: 75) concludes that ‘violence upon the body, then, is a hallmark of the colonial condition’. However, as Fanon makes clear in his A Dying Colonialism (1967b), it was not just the black man who suffered violence in the Algerian battle for liberty. He critically recognises that women’s bodies, and their embodiment of Algerian culture was put at the centre of the struggle for liberation. He writes that the French strategy against rebels, to ‘unveil’ Algeria were as such:

Lets win over the women and the rest will follow and if we want to destroy the structure of Algerian society, its capacity for resistance, we must first of all conquer the women; we must go and find them behind the veil where they hide themselves
and in the houses where the men keep them out of sight.
(1967b:38)

What Fanon here exposes is not just the colonial assumption regarding patriarchy in the colonial territories, but also notions of colonised women as the symbolic, and actual, conveyors of the nation. This French strategy rested on the belief that by conquering the women, Algerian society would be conquered in full.

In the introduction to his *When Victims Become Killers* Mamdani (2001) reminds us that the late colonial period was one of the most violent times in modern history. While the book focuses on the history and geography of genocide in Africa, Mamdani reminds us that such regimes of violence have had a long history in the region. He recalls his reading the genocide of the Herero of Namibia in the early 1900s, when the German army and missionaries colluded to hold 15000 people in concentration camps where they were subjected to harsh working conditions, and exposed to diseases such a typhoid and smallpox from which many perished. Similarly in his *On the Postcolony* Mbembe (2003a) traces a history of violence in Africa, both by those who rule and those who are ruled, to demonstrate how the boundaries between state and society has been collapsed to include government, economy and society. Likewise in his famous ‘Necropolitics’ he invokes Hannah Arendt to illustrate the point that ‘the politics of race is ultimately linked to the politics of death’ (Mbembe 2003b: 16). While Mbembe drives home the point that power and mastery over the black body is coupled in economies of death (necropolitics), he like Mamdani, and if only in a very limited sense, recognizes that black women’s bodies are implicated and engaged with very differently in contexts of colonial and postcolonial violence.

Davis and Anthias (1989) suggest that it is precisely because women’s bodies are depicted and governed as sites of national identities their bodies becomes sites of contestations. Davis and Anthias suggest five ways in which gender and nationalism are coupled: (1) women are viewed as reproducers of national collectives; (2) through restriction over sexual and marital relation women reproduce boundaries of national groups; (3) women serve as active producers of national culture; (4) women are seen as symbolic signifiers of national culture, and (5) active participants in national struggle. Because women are constructed as bearers of the nation (McClintock 1995)
the violence over black women’s bodies - whether through use of rape as weapon of war, forced sterilization, or legislating public appearance and conduct – expose patriarchal notions of ownership over women’s choices and conduct.

Thus if we ultimately accept that the idea of women as keepers of national identity and morality to be a flawed patriarchal presumption, then we must necessarily dismiss those discourses that seek to prescribe and police women bodies, dress and conduct. The tendency within Southern African polities to stigmatize young black mothers and lesbians as locus of societal moral decay (Van der Walt 2003), is a clear contemporary illustration of how colonial representations of the black female body as oversexed and degenerate, endure in the postcolonial context.

The Black Body as Site of Disease

As their philanthropic dreams hardened into colonial realities, the black body became ever more specifically associated with degradation, disease and contagion (Comaroff 1993: 306).

In her ‘Diseased Heart of Africa: Medicine, Colonialism and the Black Body’ Jean Comaroff notes that ‘medicine held a special place in the imagination of colonised nineteenth-century Africa’ (1993: 305). She argues that European colonisers used medical terminology to validate their dominance over indigenous people, and ultimately to assert control over the black body. Similarly, Mari Womack (2010) has argued that medicine provided a model for discrimination and regulation of relationships between the colonised and the colonizers, between the civil and the unruly. Comaroff continues by suggesting that ‘early evangelists in South Africa saw social and political obstacles to their ‘human imperialism’ as natural contagions, responsive to medical control (1993: 306).

Health conditions in Cape Town at the end of the nineteenth century produced socio-political circumstances that would reinforce colonial imaginaries of the black body as disease-ridden. When in 1901 the bubonic
plague broke out in a few neighbourhoods of the city, a motion was tabled by local councillors to remove all black people from the city because their settlements were believed to be the source of the outbreak (Molefi 2001). Ironically, the motion was defeated after employers intervened, insisting that they needed their labourers close to the city and that their removal would be detrimental to the economy. However, when in 1904 the city was struck with the bubonic plague, the authorities invoked the Public Health Act and with little reservation introduced health policies of containment, which eventually resulted in the removal of black communities into quarantine at a place that would later become known as Ndabeni, just outside the city (Sambumbu 2010). Thus the formal expulsion of black people from the city and into a ‘township’ was not simply the result of racist exclusionary policies but was significantly born out of the imaginaries of the black body as site of disease.

This incident was indicative of how the colonial world had become preoccupied with the hygiene of black people which would be used in health policies as a means to discipline and regulate individuals and communities. McClintock, in her Imperial Leather, argues that in the context of colonial science ‘soap took shape as a technology of social purification, inextricably entwined with the semiotics of racial imperialism and class denigration’ (1995: 212). Such industries, alongside speculations about African sexuality, produced an imperial science preoccupied with certain organs, bones and systems of the African body, making it the epicentre of colonial discourses of health (Magubane 2014). The fetishization of the black body as site of disease is best understood in the context of the long history of the science of empire. Depending largely on observer accounts of ‘manners and customs’ of indigenous peoples, this science determined that black body was the embodiment of savagery. For these frontier scientists the scientific location of the body was assumed to depend on outside stimuli such as heat, social and moral value. Mary Douglas in Purity and Danger argues that the boundaries of the body are symbolic of societal boundaries. Simon Clarke building on Douglas’ notion of pollution power writes that ‘pollution and dirt are associated with danger which becomes associated with the Other. The Other then becomes dangerous’ (2008:519). He continues that the idea of the ‘infectious threat’ or the polluting other becomes central to the way that structures of society are ordered and maintained. In the colonial context the unclothed heathen body posed an acute threat to the fragile colonial world and had to be disciplined in the name of decency, cleanliness and health.
These assumptions ultimately conspired to produce representations of the black woman as an icon of exotic sexuality and fertility, while simultaneously being viewed as possessing an uncontained sexuality that threatens moral and social order.

Dorothy Roberts, in *Killing the Black Body* deconstructs pervasive public policy orientation in post-civil rights America insofar as ‘poor black mothers are blamed for perpetuating social problems by transmitting defective genes, irreparable crack damage and deviant lifestyles to their children’ (1997: 3). She critically discusses the collusion between public policy practitioners and pharmaceutical companies to coerce black mothers into sterilization, and a condition for receiving social grants. Roberts explores a number of cases (Norplant & Depo-Provera) to illustrate how in contrast to American women’s right of control over their reproductive choices, black women have experienced a sustained, and systematic denial of their reproductive rights. In making clear the link between historical representation of the black body and contemporary policies, Roberts writes that ‘regulating black women’s fertility seems so imperative because of the powerful stereotypes that propel these policies’ (1997: 8). Of course these stereotypes are not new and Fanon reminds us that they are intimately coupled with (white) anxiety about black people’s reproductive power:

They copulate at all times and in all places. They are really genital. They have so many children, they cannot count them. Be careful or they will flood us (1967: 157).

What is not immediately clear from Fanon’s critique is the gendered nature of white anxiety about black sexuality. For example, in the context of the HIV pandemic that has ravaged Southern Africa, where public health discourses has by necessity assumed a gendered orientation, one that focuses on women (Badul & Strode 2013), black women’s bodies are nonetheless paradoxically viewed as the containers of, and barriers against, disease. Thus in these contexts, where patriarchal cultures have made women disproportionately vulnerable to HIV and AIDS, initiatives has focussed empowering women to gain mastery over their bodies, framing sexual and reproductive choices as the locus of change. However, widespread social discourses, premised also on the idea of unruly black sexualities and the HIV positive person as the
polluting Other, not only present women black women with bounded and prescribed notions of bodily conduct, but also leaves them vulnerable to excessive surveillance, and even the removal of reproductive abilities. A number of HIV positive women in South Africa and Namibia have reported being subject to coerced sterilization with grave repercussions (Essack & Strode 2012). While the motivations for such coerced sterilization vary, they all nonetheless rest on representations of women bodies and sexualities as coupled with containing the spread of disease, degeneracy, and black fertility, as an undue burden on the state. What is finally evident from both sides of the Atlantic, is that public health and social policy concerns are mediated through bio-medical control over women’s bodies.

**Conclusion**

… a sun-darkened skin stained by outdoor manual work was the visible stigma not only of a class obliged to work under the elements for a living but also of a far-off benighted marked by God’s disfavour (McClintock 1995: 212).

It is widely accepted that most colonial representations of self and other are the result of protracted histories informed by ‘a thousand details, anecdotes and stories’ (Fanon 1967a:111). Postcolonial deconstruction of the black body has sought to expose and lay bare how colonial travel accounts, administrative records, media and popular anecdotes, have continued to shape representations of the black body, as well as the resistance to such representations. Our reflection on the intersection of health, the body and religion in the postcolonial context focussed in particular on the ways that the representation of black women’s bodies have informed and shaped their sexual and reproductive rights, choices and opportunities in the postcolonial context. We highlight the prevailing alienation of the body within social discourses in contemporary Southern Africa by drawing attention to Swazi and Nigerian enforcement of ‘African modesty’ by outlawing short skirts, the removal of sex-workers from urban Harare, and the coerced sterilization of HIV positive women in South Africa. Through this we sought to illustrate how postcolonial governance of black women’s bodies rely significantly on
enduring colonial representations of the black body as site of labour and reproduction; violence and degeneracy, and disease.

In the discussion of these representations we, for instance, assert that as an intimately gendered and racialised form of labour, domestic work is embroiled with the status and meaning assigned to black women’s bodies. Yet, women, we argue because their bodies are depicted and governed as sites of national identities, become sites of contestations. We suggest that in postcolonial contexts, the violence over black women’s bodies - whether through use of rape as weapon of war, forced sterilization, or the legislation of public appearance and conduct – expose patriarchal notions of ownership over women’s choices and rights. Thus we contend that the idea of women as keepers of national identity and morality leave black women particularly vulnerable to paternalism, surveillance, violence, and over-regulation of their sexualities.

Finally, we argued that premised on colonial imperial science, which fetishised the black body as site of disease, the black woman’s body is represented as at once an icon of exotic sexuality and fertility, but also the embodiment of dangerous sexualities that threaten moral and social order. The representations of the black body, and black women’s bodies in particular, not only served as a basis for regulating and domesticating black sexualities, but also significantly shaped African women’s reproductive rights and choices. These colonial representations of the black woman’s body remain powerful and debilitating precisely because the articulation of these representations in their postcolonial guises have remained largely unchecked – limiting the possibility of new corporeal schemas wherein the black body can be imagined outside a history of over-determination.

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