

Colonizing Madness: Asylum and Community in Fiji
Jacqueline Leckie. University of Hawai'i Press, 2020.
Glossary, notes, references, images, pp. 284.

Safua Akeli Amaama, Museum of New Zealand Te Papa Tongarewa

The cover artwork of this book created by Rotuman artist John Mausio, and titled '*I am Here*' depicts an arresting image of a person painted as a combination of shadow and solid form, seated on a layer of rocks against a backdrop of a woven and solid brick wall. Mausio is himself an active artist in the mental health area working with the St Giles Hospital, a key centre of the book's narrative.

Comprising of seven chapters and populated with images of people and buildings, Leckie states 'this book explores the way the practices and discourse of modern bio-medicine and mental health were articulated in local communities as well as in the asylum' (p.3). Furthermore, her interest is in 'reading the lunacy archive to address how madness was constructed and managed and how it affected individuals and communities in colonial Fiji' (p.4). Leckie draws on archival research from 'the remaining records of former patients at St Giles to explore the nebulous condition and label of madness and states of mental difference' (p.4). These records are described as 'fragmentary' and 'scribbled in shorthand by colonial officials and the doctors' (p.5). Nonetheless, they provide an account of a complex and deeply affective narratives.

In chapter one, Leckie outlines the rationale for asylums in far-flung places away from the metropole such as Hawai'i and Fiji in the nineteenth-century and the blurry lines of asylum and prison.

Chapter two titled 'Displaced Minds: Indo-Fijians and Mental Distress' outlines the tragic stories of displacement due to migration, illness, and cultural structures. The causes of asylum deaths were mainly due to heart failure and exhaustion. The limited support available to patients within their own communities brings to the fore the underdeveloped structures that hindered care in and outside the walls of the asylum.

In chapter three, the high rates of deaths in the year of admission was alarming (p. 62). Leckie writes, 'The relationship between indigenous Fijians and Western medicine was complicated and ambivalent, especially when the destination was the mental asylum' (p.63). For example, people were likely to ask for State intervention to remove 'mentally ill or troublesome people' (p.63). In addition, the role of Native Medical Practitioners was 'ambivalent' in relation to 'indigenous beliefs about illness and healing practices' (p.70). The impact of the changing environment was evident in the physical landscape and increasing pressure points after the Second World War.

Chapter four focuses on gender and mental illness, where Leckie states 'the asylum are both constructed by and form gendered and colonial identities' (p.88). Narratives of women, their diagnosis, gendered expectations, and surgical intervention surfaces disturbing features of the care environment. The distressing story of Lani, a 14 year old, Fijian woman who was admitted in 1958, and her subsequent readmission about 10 years later, following a turbulent life depicts a deeply moving experience.

Leckie draws on her database of 3,866 admissions between 1884 and 1964 in chapter five. The data focuses on classification of biomedical discourse, and how symptoms were qualified. This

presented an interesting and disturbing intersection of stereotyping and treatment which were often grey areas of qualification.

The private letters interpreted in chapter six contrast the clinical records which have been much of the focus of previous chapters. Martin Syljeseth articulates patient ownership over place and space, at times advocating for others. The act of crafting private letters takes motivation and its circulation is often outside the control of the author. Leckie's inclusion of these private insights frames patients in a more nuanced experience. In conclusion, Leckie affirms that 'recent reforms in mental health legislation, services, and patient rights appear to be breaking with the past' (p.212). This remains a significant point of difference for this text, as an advocate piece, since it weaves fragmented and complex readings of how mental illness was colonised.

I commend Leckie for her work, and the details infused throughout. The photograph of Setareki Veikosi (Fig 3.5) alongside a painting he had created while a patient at St Giles Hospital connects faces to places. I am conscious too that many of the colonial medical staff, like Dr Bolton Glanville Corney, alongside mental illness also covered a range of diseases such as leprosy and how this impacted patients. However, similarly with mental health, for colonial leprosy management in Samoa, Samoans were drawn on to care for patients (p.85). Overall, Leckie brings to the fore a range of experiences and these weave throughout the text bringing to life names and events which deeply impacted multiple lives.