

The Psyche of Fascists

By Grégory Dufaud

The experience of the Second World War prompted the in-depth reform of psychiatry, as social factors were included in the explanation of psychic illnesses. It also served as a justification for the psychiatric and political re-education of political opponents—as Ana Antić shows, based on patient files from a Yugoslav institute.

*Review of: Ana Antić, *Therapeutic Fascism: Experiencing the Violence of the Nazi New Order in Yugoslavia*, London, Oxford University Press, 2017, 262 p.*

While Ana Antić's expression "therapeutic fascism" is compelling and intriguing, it is nevertheless also obscure and confusing. This expression primarily refers to the Institute for compulsory re-education of Communist youth at Smederevska Palanka, where 1,270 men and women were held during a period of two years, from September 1942 to October 1944, in Yugoslavia. Set up in a former camp for political prisoners, this Institute was created by the collaborationist government of General Milan Nedić to re-educate high school and university students who had joined the Communist movement—the latter representing, under the leadership of Josip Broz Tito, the first force of resistance against Nazism and collaborationist governments at the time. However, Antić's book does not limit itself to studying the Institute's activities. Its argument is clearly much broader: namely, to understand the impact of the war on Yugoslav psychiatry and society. Obviously, one cannot generalize conclusions drawn from a hospital population, but Antić succeeds at least in revealing the tensions that cut across society in the 1940s. Thus, while the history of the Occupation is examined through the lens of psychiatry, the history of psychiatry allows for an original reading of the Occupation.

Established in 1929 as an absolute monarchy, the Kingdom of Yugoslavia succeeded the Kingdom of Serbs, Croats, and Slovenes, itself a constitutional monarchy formed after the First World War, in 1918. In April 1941, the Kingdom of Yugoslavia was invaded by the Axis powers after it rejected an offer of alliance from the Third Reich. It was then dismembered and occupied by Germany, Italy, Hungary, and Bulgaria. The Third Reich also set up two puppet governments: the Independent State of Croatia and the Serbian Government of National Salvation. Both carried out a systematic policy of exterminating the Jews and mercilessly massacred populations deemed foreign along with political opponents.

In order to complete her fine research, Antić mobilized various published sources: medical forms, archives, interviews, and patient files. The latter came from six hospitals, including the two oldest and largest of Yugoslavia: the Belgrade psychiatrist hospital and the Vrapče psychiatrist hospital in Zagreb. Antić explored 949 cases from the 1929-1946 period. The book opens with a methodological reflection on the analysis of patient files, which it presents as complex documents that must meet multiple objectives: In addition to serving as tools of communication between members of a medical team, they are used by the hierarchy to control the management of care. Taking the content of these files seriously, Antić uses an approach inspired by literary studies to “deconstruct and interpret its narrative components through close reading” (p. 30). She then shows how changes in the structure and style of patient files reflected more general changes in Yugoslav psychiatry and society—if only because psychiatrists interrogated patients about their political orientation throughout the conflict.

A Renewed Approach to Mental Illness

In Yugoslavia, the late process of specialization of psychiatry was not complete until the early 1920s. The main Yugoslav psychiatrists of the interwar period had been trained in the best European universities and research centers, which had guaranteed their successful entry into the professional circles of Central Europe. In the Kingdom, they presented themselves as educators capable of reforming “the spirit of the nation.” Indeed, they sought to promote hygienism for the purpose of social and national progress. This ambitious political project, however, conflicted with their conception of mental illness: Insofar as the biological paradigm posited the innate nature of disorders, it limited the possibilities of therapy and of social reform. Thus, psychiatrists were unable to truly participate in the development of public health, and they struggled to conceive measures for the prevention of mental disorders. As a result, they experienced tremendous frustration.

A paradigm shift nevertheless occurred as a result of the war. Confronted in daily hospital life with the victims of repression and mass violence, psychiatrists were led to reconsider their theoretical and practical postulates. Despite the Nazification of their professional environment, they developed the notion of psychic trauma, renewed their understanding of disorders, and transformed the management of mental illness. There took place in Yugoslavia what had already occurred in Russia during the Russo-Japanese War of 1904-1905 and in France during the First World War: Social factors were included in the explanation of mental illness, and a psychodynamic model emerged according to which the psyche can change under the influence of internal and external factors.¹ Antić views the analysis of patient files as particularly illuminating in this respect. It shows that before the end of the war, disorders were reconceptualized so as to integrate the patient's experiences and environmental influences. Thus, psychiatrists came to recognize that schizophrenia could be triggered by social factors, while continuing to assert its biological character.

A Profound Political and Moral Confusion

Inmates were detained because they were deemed incapable of performing their function in the social body. A review of their files reveals how violence had spread throughout society and how it affected everyone's lives. Fear and the feeling of insecurity were such that they remained in patients for a very long time: Hospital psychiatrists treated them as symptoms of their disorder. And yet, patients' narratives also tell us about the political situation in Yugoslavia during the war.

Antić highlights two elements. The first is the state of political confusion in which inmates found themselves. It was not easy for them to take a position because the political and military configuration was particularly complex, but also because doing so in a time of omnipresent danger had consequences for individuals and their families. Thus, a significant number of inmates in Zagreb's Vrapče hospital evoked their ambiguous relationship with the Communist resistance. For while it was not uncommon for Bosnian and Croatian peasants to assist resistance fighters, many feared the latter's reprisals against those suspected of collusion with the regime. Yet, political confusion was by no means restricted to the people. Collaborationists, too, were internally conflicted: They wanted to serve the regime but also skeptical as to the means being implemented.

¹ Jacqueline Lee Friedlander, "Psychiatrists and Crisis in Russia, 1880-1917," Ph. D. diss., University of California, Berkeley, 2007; Gregory Thomas, *Treating the Trauma of the Great War: Soldiers, Civilians, and Psychiatry in France, 1914-1940*, Baton Rouge, Louisiana State University Press, 2009.

² On the theory of reflexes, see Grégory Dufaud, "Pavlov, une vie pas si réglée," *La Vie des idées*, 29 February 2016: <http://www.laviedesidees.fr/La-vie-pas-si-reglee-de-Pavlov.html>. On the emergence of the physiological paradigm in the Soviet Union, see Grégory Dufaud, "Quel usage des thèses pavloviennes en médecine? Schizophrénie, incertitudes scientifiques et psychiatrie en Union soviétique," *Les Cahiers du monde russe*, 1, 2015,

The second element is the inability of some of the patients affiliated with a political party—whether Fascist or Communist—to describe its doctrine and values. Far from being all disciplined, loyal, and ideologically driven, Croatian death squad and army members were often frightened and politically ignorant. According to Antić, the patient files make clear that the Croatian and Serbian states had not succeeded in transforming the political consciousness of their citizens.

A Failed Attempt at Shaping the Psyche

Confronted with the Communist resistance, collaborationist authorities and intellectuals came to define Communist sympathies and tendencies as a mental pathology. However, such an interpretation rested on a fundamentally pessimistic view of society and of the state in which it found itself. For if mental disorders had a biological and hereditary origin, then commitment to the Communist movement was predetermined. And if, moreover, a significant number of young people joined this movement, then most of the social body was sick. From 1942 on, collaborationist psychiatrists challenged the biological paradigm by stressing the notions of trauma and psychological vulnerability. Communism continued to be thought of as the manifestation of a mental illness, but it was no longer seen as a degenerative pathology. Now considered in psychogenic terms, it became curable through proper education and psychotherapy. Thus psychiatrists proposed the creation of an Institute for the re-education of young people who had joined the Communist Youth, its mission being to persuade them of their error and to treat them. For Antić, the opening of the Institute in May demonstrates very well how:

[T]he wartime realities transformed—even revolutionized—the dominant conceptions of human psychology and human nature beyond the narrow confines of the psychiatric profession. Thus, Serbian fascists started to define the human psyche as entirely formed by social factors and influences (p. 144).

Education was at the heart of the Institute's activities. The program, which lasted from six months to one year, offered general and political education classes. In addition, teachers called on inmates to take part in all kinds of extracurricular activities, as they believed that their inclusion in a group was a crucial step in their recovery. The drama section was particularly active, with the staging of classical and original plays, and hence quickly became quite well known. At times the benevolence of teachers came up against inmates' resistance, which went from violating the dress code to establishing contact with Communist units. In such cases, teachers did not hesitate to punish patients, even to threaten them with death.

As the conflict progressed, and as the collaborationist authorities became more vulnerable, discipline in the Institute deteriorated. Its leadership thus decided to implement a “form of military regime” in January 1944. All elements who thwarted discipline were isolated, and those who did not publicly expiate their fault were sent to the Banjica concentration camp. What results did the Institute achieve after two years of existence? Antić claims that 104 persons voluntarily joined one of the anti-Communist collaborationist organizations. Yet, she also evokes the failure of the re-education project, as evidenced precisely by the gradual deterioration of discipline and the recourse to punitive measures.

The “Infantile Disorder” of Socialism

At the end of the war, Communist Partisans were experiencing an epidemic of hysterical neurosis: Several thousands suffered from the disorder. Particularly affected were those whom the Communist Party hierarchy had entrusted with responsibilities, even though they were *a priori* unprepared to assume them due to their low education and their political immaturity. This disorder made them unfit for military service or for any political or ideological activity. Psychiatrists were divided as to how this should be interpreted. The resulting dispute revived the split between supporters of the biomedical model and advocates of the psychodynamic approach: While the former spoke of oligophrenia and simulation, the latter evoked an internal conflict between the urge to save one’s life and the desire to fulfill one’s duty. The controversy led to the gradual emergence of psychoanalysis as the main framework for analyzing and treating the so-called “Partisan neurosis.”

As Antić highlights, psychiatrists expressed their concerns about the upheavals associated with the socialist revolution, and warned of the danger that an elite might be formed from within the ranks of the resistance. Presenting social mobility as a source of instability, they formulated solutions to limit the risk of anomie. Thus, faced with what they described as an “infantile disorder” of socialism, they promoted educational and social-prophylactic measures. Partisan neurosis went from being a psychiatric and medical category to being one of the major political and ideological problems of the immediate postwar period. Psychiatrists presented themselves as capable of helping the population adapt to the new circumstances, and reaffirmed their interwar desire to contribute to social and national development. Unlike the biological paradigm of the time, the psychodynamic approach rested on an optimistic view of society and of its future evolution.

Antić has written a rich and copious book. While she would likely have gained from highlighting the key elements of her demonstration, not the least of her merits is that she succeeded in showing with tremendous precision how medicine and politics are intertwined, as

well as how the relationship between the two evolves over time. From this perspective, the Institute at Smederevska Palanka is a unique experiment that implemented psychiatric proposals to transform individuals and convince them of the soundness of the collaborationist government's orientations. Yet, in many respects, this experiment constituted the matrix from which socialist psychiatry emerged in Yugoslavia: While the latter's approach agreed with that defended by Soviet psychiatrists during the interwar period, it moved away from the physiological paradigm (based on Ivan Pavlov's theory of reflexes) that they embraced starting in the 1950s.²

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² On the theory of reflexes, see Grégory Dufaud, "Pavlov, une vie pas si réglée," *La Vie des idées*, 29 February 2016: <http://www.laviedesidees.fr/La-vie-pas-si-reglee-de-Pavlov.html>. On the emergence of the physiological paradigm in the Soviet Union, see Grégory Dufaud, "Quel usage des thèses pavloviennes en médecine ? Schizophrénie, incertitudes scientifiques et psychiatrie en Union soviétique," *Les Cahiers du monde russe*, 1, 2015, pp. 199-233; see also Benjamin Zajicek, "Scientific Psychiatry in Stalin's Soviet Union: The Politics of Modern Medicine and the Struggle to Define 'Pavlovian Psychiatry,' 1939-1953," Ph.D. diss., University of Chicago, 2009.