

The Sick Man of Algeria: Colonialism and Medicine in Camus' *The Plague*.

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Abstract:

This essay examines the medico-colonial complex in Albert Camus' *The Plague*, seeking to understand the deep mutual implication of medical and colonialist discourses in the novel. This begins by briefly surveying the history and theory of French colonialism through the work of Edward Said before comparing with principlist medical ethics per Tom Beauchamp and James Childress and coming to understand the ideology and rhetorical emphases of French colonialism in those terms. Having thus established a framework within which to understand both discourses, analysis then moves to show how their logical and structural commonalities play out in *The Plague*, particularly with regard to the colonial situation and textual elision of the Arab population of Oran over the course of the narrative, commonalities further theoretically grounded with reference to the work of Arthur Frank. Frank provides a bridge to the theory of narrative medicine, as proposed by Rita Charon, which contrasts starkly with colonial medicine by its insistence on preserving the subjectivity and individuality of the patient. Orienting by this point of reference, the essay concludes by tracing the threads of power, authority and control by which the figures of both doctor and patient are woven into the classically clothed colonial ideology of European supremacy.

Albert Camus' novel *The Plague* depicts the action and operation of medical discourse within a colonial context, although analysis shows that the relationship is deeper than simple containment. This analysis begins by interrogating the Algerian context of *The Plague*, situating it within the history of French colonialism and tracing the movement and moment of colonialist discourse within the novel. I will then demonstrate how medicine re-enacts the colonial dynamic, amplifying its discursive silences. This will lead to a discussion of the narrative work performed (and not), which will further explicate the relationship between medical and colonial discourses. I will then conclude by tracing the common genealogy *The Plague* constructs for these discourses, explaining their strong family resemblance.

As noted by John Foley, *The Plague* 'is generally interpreted as an allegorical account of European resistance to Nazism' (3). This gives rise to an obvious and problematic irony: Camus has set a moralising allegory of occupation in Algeria, which had been under French occupation for over a century. Edward Said provides two definitions that will prove useful in analysing this history: "'imperialism' means the practice, the theory, and the attitudes of a dominating metropolitan centre ruling a distant territory; 'colonialism' [is] the implanting of settlements on distant territory" (8). As *The Plague* takes place in a colonial context, the former is instantiated within the latter and it becomes practical for the latter term to contain and signify the former, as it will below. Said also provides insight into the rhetoric of French colonialism, quoting Jules Harmand in 1910:

While [racial and civilizational] superiority confers rights, it imposes strict obligations in return. The basic legitimation of conquest over native peoples is the conviction of our superiority, [including] our moral superiority. Our dignity rests on that quality, and it underlies our right to direct the rest of humanity. (Harmand, quoted in Said 17)

Said later notes that though this represented a shift away from the rhetorical ideal of assimilation which preceded it and towards more openly hierarchical theories of racial types, it 'did not rule out the *mission civilisatrice*' (204).

This rhetoric can be situated in relation to an ethical framework by comparing it to Tom Beauchamp and James Childress's *Principles of Biomedical Ethics*, with the two most relevant principles being autonomy and beneficence. Beauchamp and Childress begin their discussion of autonomy by tracing its etymology to Greece, where it referred 'to the self-rule

or self-governance of independent Hellenic city-states', later extending to individuals and acquiring diverse meanings such as 'individual choice, freedom of the will [and] being one's own person' (120). Indeed, their concept remains 'analogous to the way an independent government manages its territories and sets its policies' (121). Per Harmand, the rhetoric of French colonialism attempts to justify the denial of autonomy to 'native peoples' by asserting French superiority, moral and otherwise. The implication that French rule will represent an improvement on self-governance combines with the *mission civilisatrice* to constitute a claim to the second principle, beneficence, which Beauchamp and Childress define as beneficial actions which contribute to a person's welfare (259). Beauchamp and Childress note that the nature of the patient-doctor relationship readily gives rise to tension between fully-formulated principles of autonomy and beneficence and argue that these tensions are not to be resolved by assigning primacy or pre-eminence to one or the other (271-273). Discourses like Harmand's mobilise the rhetoric of beneficence, but generally as a secondary claim, having first assumed the primacy of autonomy and then given overwhelming priority to French autonomy, whereupon the colonised become a site for the exercise of the same.

*The Plague* does not engage with this issue as it concerns Algeria's Arab population, likely because it represents a serious obstacle to Camus' allegorical intention. Camus did consider himself a native of Algeria, as evidenced by a quote Said translates from his political writing: 'The French of Algeria are also natives, in the strong sense of the word' (Camus, quoted in Said 217). It is unfortunate that this 'also' seems to contain within it a subjugating ethnic hierarchy that ensures French priority. What Camus cannot or will not countenance in *The Plague* is that, as Conor Cruise O'Brien notes, 'There were Arabs for whom "French Algeria" was a fiction quite as repugnant as the fiction of Hitler's new European order was for Camus [...] the French were in Algeria [by] the same right [by which] the Germans were in France: the right of conquest.' (48). The issue that arises for Camus is that his allegory is unlikely to retain a great deal of force or moral authority if the reader is required to ignore one literal occupation in favour of a metaphor for another. This necessitates what O'Brien dubs 'the artistic final solution of the problem of the Arabs of Oran': they almost completely disappear (48-49). Foley concurs with this assessment, but defends Camus' solution: '[the novel's] character as a philosophical allegory can also explain the absence of the Arabs [...], since their appearance would likely overwhelm the more abstract moral questions being asked, about the nature of evil and resistance' (4). Foley dismisses O'Brien's larger critique of Camus, partly because Camus' journalism considers and condemns French brutality

towards Algeria's Arab population, noting that Camus 'compared the practice of French colonialism in Algeria [...] to atrocities committed by the Nazis against the French' (4). Foley's argument is jarring, if not bizarre, because its thrust is almost completely orthogonal to the issue; the technical rationale for Camus' textual annihilation of the Arab population is obvious (if mischaracterised by Foley) and it is its ethical rationale under suspicion. In fact, by rendering the Arab population both invisible and voiceless, the text of *The Plague* reproduces and naturalises the condition and dynamic of occupation, regardless of what Camus may have said or done elsewhere. This can hardly be said to preserve 'abstract moral questions'; *The Plague* resists ethical abstraction by masking similarity when given the opportunity to map it. Instead of a site of ethical inquiry, Camus' Algeria becomes a site for the (re)production of French consciousness.

Indeed, the Arab population is only significantly present in a conversation between Rieux and Rambert. It is useful here to refer to O'Brien's contention that the 'personages named in the narrative have little more than symbolic value, the degree of existence required by figures in a morality play' (43-44). This is alluded to in the text by Tarrou: 'All I say is that on this earth there are pestilences and there are victims – and as far as possible one must refuse to be on the side of pestilence. [...] I say that there are pestilences and victims, and nothing more.' (195). By positing the pestilence-victim conflict as an interpretive totality, this establishes allegory's textual primacy, although perhaps not the allegory Camus intends; Rieux and Rambert come to represent, respectively, medical and colonialist discourses. Rambert is a journalist undertaking 'an investigation for a large Parisian newspaper about the living conditions of the Arabs' (11). This recalls Said's 'dominating metropolitan centre ruling a distant territory', from which Rambert has travelled to constitute the colonised within an imperial field of knowledge, and thus Rambert comes to represent colonialist discourse. The textual basis for reading Rieux as representative of medical discourse is more explicit; he bases his initial claim to narrative authority, to 'authority in an enterprise of this kind', on the fact that 'chance had [...] made it possible for him to gather a considerable number of testimonies and [...] force of circumstance had [...] involved him in everything that he describes' (7). 'Chance' and 'force of circumstance' have very little to do with it and are only invoked because to admit that could compromise the narrator's disguise; Rieux is a doctor and textually defined by that fact. The medical discourse which Rieux represents initially appears to be an alternative to the colonialist discourse of Rambert, vying for control of the Arab population's narrative. Rieux triumphs, declaring 'I can only countenance a report

without reservations, so I shall not be giving you any information to contribute to yours' (12). The interaction has the texture of a power struggle, one which ends with Rieux delivering an ultimatum derived from his personal (and somewhat arbitrary) standards, rather than any obviously practical or goal-oriented rationale. However, more importantly, the contested narrative really belongs to neither of them. In approaching Rieux, Rambert has already rejected Arab autonomy, refusing them the opportunity to control their own narrative and ascribing that right instead to another European. More starkly still, Rieux admits that 'their health is not good' and then declines to say more because he has undertaken 'to reject any injustice and any compromise' (12). From a principlist perspective, the logical parallels to French colonialism are striking: the (Arab) patients are denied autonomy and reduced to a site for the expression of a (French) physician's ethical autonomy, with the rhetoric of beneficence a justificatory afterthought. Thus, Rieux re-enacts Camus' colonialism, exposing the structural commonalities of medical and colonialist discourse in *The Plague*.

These parallels, between medical and colonialist discourses, are not unique to *The Plague*; Beauchamp and Childress explicitly analogise individual and state self-governance. Arthur Frank goes further, claiming that 'Colonization was central to the achievement of modern medicine' (10). Frank contends that modern medical discourse can be better understood "by drawing an analogy to people who were politically colonized. Gayatri Chakravorty Spivak speaks of colonized people's efforts 'to see how the master texts need us in [their] construction . . . without acknowledging that need'" (11)<sup>1</sup>. While Frank's analogy, drawing from Spivak, does identify important similarities, it has its own problematic of consent; where most patients consent to their (medical) 'colonization', colonized peoples generally do not. Frank is remiss when he omits this, but it does raise the question of how freely given medical consent actually is. The narrator of *The Plague* notes that the people of Oran 'considered themselves free and no one will ever be free as long as there is plague, pestilence and famine' (31). Medical discourse often extracts consent under the duress of disease and, in a sense, the people of Oran may choose to be colonized by medicine or occupied by the plague. However, Frank's analogy is more productive as a compass than a map; it risks reductivism, but the resultant ruptures direct the attention to key sites of difference. Similarly, *The Plague* highlights these ruptures by briefly resolving them, having

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<sup>1</sup> The analogy rests on the 'general unifying view' of these discourses, which take patients/colonized peoples for their objects and cannot acknowledge their objects as individuals/subjects or their own objectifying stance while maintaining legitimacy.

medicine imposed with the threat of force: '[Rieux] would appear with soldiers and it would take some blows with the butt of a rifle before the family would agree to let them in' (150). Having thus followed adversarial medicine to its natural endpoint (perhaps further), it seems appropriate to establish a point of comparison: narrative medicine.

Rita Charon argues that the patient-doctor relationship need not be adversarial, proposing a practice with attention and representation at its heart (211). By actively listening to the stories patients have to tell and then faithfully, fully and accurately representing these narratives, Charon argues that the patient-doctor relationship can be one of intersubjectivity, characterised by benevolence and kindness (210-211). Rieux's practice contrasts to this starkly, as in his treatment of M. Michel. For the duration of his illness, Michel is referred to (by Rieux in his guise as narrator) as 'the concierge' and largely described in symptoms and measurements, with no attempt made to listen to him. Instead, while Michel not only still lives but continues to talk about 'The rats!', attempting to communicate, Rieux tells his wife 'He is dead' (19-20). Rieux declines to pay attention to or attempt to represent the story Michel evidently still wants to tell, albeit in 'Broken words' (19). Instead, he is reduced to a text of temperatures and symptoms, which Rieux reads, relates and, indeed, writes detachedly until he declares the end of Michel's narrative.

The reduction of a person to figures is characteristic of Rieux's medical discourse and symptomatic of his pose as 'an objective witness' (232). Tracing the consequences of this objective stance reveals the larger discursive framework of *The Plague*. Rieux's claim to narrative objectivity, strengthened by his initial anonymity, serves to naturalise his editorial decision to 'borrow from [narrative sources] when he sees fit and to use them as he wishes' (8). Unsurprisingly, he ignores Arab sources and the Arab population is subsumed into the muted bulk of death toll statistics. Although European narratives and voices, like Rambert and Tarrou's, are filtered through Rieux's medico-colonialist lens, their stories are privileged in comparison. By silencing competing discourses, *The Plague* lends European narratives a universalised aspect. The medical and colonialist discourses so generated are intertwined in the 'collective history that was the plague', which resonates with a deeper meaning than Camus intends (129). Camus refers to historical plagues in Athens, Constantinople, Marseille and Canton, citing classical sources for the former two, and by this constructs a historical continuity between classical Greece and colonial France (31-32). This is not an innocent aesthetic decision; scholars like Luke Richardson observe that in 'the literature of French

Algeria there was a long tradition of using classical motifs to justify colonialism' (67). Indeed, Barbara Goff argues that classics '[was] the common coin of the educated metropolitan elite' in Europe, to the extent that 'Latin and Greek language and culture were so inseparable from the elite's vision of itself that they [became] inseparable from the vision of the imperial role', noting the accompanying 'weight of tradition and authority' (11). This is the context in which Camus mobilises the cultural capital of classical Greece to produce a more hospitable discursive environment for the medico-colonial complex that is the engine of *The Plague*, generating a common space that shapes and colours both discourses.

More than this, such claims to a classical heritage are a common staple in discourses of European supremacy and cultural superiority, and it is precisely discourses like these, such as Harmand's, that inform and attempt to justify European colonialism. In *The Plague*, Camus demonstrates, exemplifies and enacts the narrative attitudes that follow from such colonialist discourses and allows the reader to witness the work performed. The subject matter introduces a second, related, discourse, that of medicine, and the nature of this relation becomes clear after analysis of the novel: Camus' colonial medicine is not just informed and directed by its ideological backdrop; rather, the relationship between medical and colonialist discourses is one of deep structural echo and mutual reinforcement.

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