

Israel/Palestine/Covid-19: one more weapon in the siege?

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ABSTRACT

The seemingly endless conflict between Israel and the Palestinian people is typically seen as structured around or based on struggles over land, sovereignty and identity (national or religious). The extent to which health is an issue – particularly a consistent, deliberate, even central element in the aggression, rather than a random or unfortunate by-product of the larger struggle – is less readily recognised. This article will briefly examine some of the principal health issues created by the conflict before addressing the implications of the Covid-19 pandemic for the Palestinians, particularly in the context of the ongoing Israeli siege of Gaza. Finally, the works of the poet Mahmoud Darwish are analysed to see how Palestinians respond culturally to such a situation and how they attempt to stay hopeful in times of affliction.

Keywords

Covid-19, Israel, Palestine, prison, siege, Mahmoud Darwish

On 26 March 2020, Israeli forces in the West Bank destroyed a Palestinian medical facility that was in the process of construction and confiscated all building and medical equipment. The field clinic was being set up as part of the response to the rapidly expanding coronavirus pandemic, as well as to address the appalling state of healthcare provisions in the Occupied Palestinian Territories. Although this kind of behaviour is something that Palestinians undergo routinely, the destruction of a medical facility – however small-scale and under-supplied, in the face of the dangers represented by the advancing Covid-19 pandemic – might have struck foreign consumers of news as deeply shocking and callously life-threatening, had it ever made it onto their screens or newspaper pages. Unfortunately, although Israeli obstruction and destruction of Palestinian attempts at self-improvement, or the construction of a normal life, are a daily occurrence: assaults – often brutal – on numerous aspects of Palestinian health are in many ways as frequent, though rather less commented on. It is against this particular background that we will attempt, in due course, to identify some of the ways in which the coronavirus pandemic is being manipulated in the relationship between Israel and Palestine.

Although that relationship needs to be understood as one constituted by “the hundred years’ war on Palestine,” in the words of Rashid Khalidi’s recent powerful analysis (2020), the century of aggression is nevertheless typically seen as structured around or based on strug-

gles over land, sovereignty, and identity (national or religious). The extent to which health is an issue – particularly a consistent, deliberate, even central element in the aggression, rather than a random or unfortunate by-product of the larger struggle – is less readily recognised. However, the nature and scale of attacks on the Palestinian body, as well as on the would-be protectors of that body, require acknowledgement.

Bodily issues, images, and metaphors also permeate the wider political debate. One of these is the question of vulnerability. It has always been, and remains, one of the central claims of the Israeli state, that Israel and its inhabitants exist in a condition of vulnerability, threatened by a range of enemies, mainly external, but also internal. In fact, something like the opposite is the case: even in 1948, when Israel was notionally at its most vulnerable, its politicians and military commanders knew very well – though they did not admit it publicly – that their forces were better armed, better trained and more highly motivated than the ones they faced. Although this has the air of a secret well-kept from the wider world, British government papers released in recent years indicate that the British also knew that the Israelis were going to win. As the years have passed, the claim has been harder to sustain, but so frequently and vehemently has it been repeated, that the idea that the massively militarised and illegally nuclear-armed state of Israel might be ‘vulnerable’ to the ‘terrorism’ of Palestinian teenagers throwing stones could still be taken seriously (by some at least). Against this mythic tableau of vulnerability, the actual daily vulnerability of Palestinians is very rarely perceived. The great Palestinian poet, Mahmoud Darwish, to whom we will return later in this piece, has some insightful things to say on a related issue – the mythic and inflated claims to victimhood made by one party versus the demonstrable quotidian facts of the victimisation suffered by the other.¹

A number of critics, perhaps most consistently the Nazareth-based British writer Jonathan Cook, have argued that regardless of the changing faces, or the ideological masks those faces wear, in Israeli politics, what does not alter is the determination that the Palestinians must be removed from Eretz Israel. Indeed, the acknowledgement that the (regrettable for some) removal of the Palestinians is an unavoidable corollary of the establishment of a Jewish homeland goes back to the early days of the Zionist movement in the 1880s. In pursuance of that aim, certain steps are obvious, others more experimental. Cook’s 2008 book, *Disappearing Palestine*, is subtitled *Israel’s Experiments in Human Despair*. As Cook says,

It is my contention that Israel has turned the increasingly confined spaces left to the Palestinians not only into open-air cages but also into laboratories where experiments to encourage Palestinian despair, and ultimately emigration, are being refined. In fact, these experiments were begun inside Israel, only being ‘exported’ to the occupied territories after their conquest in the 1967 war (2008, 7).

Cook’s highlighting of despair is an important reminder of the extent to which assaults on Palestinian health are intended to undermine mental as well as physical well-being.

In terms of assaults on the Palestinian body, some are obvious and straightforward, e.g.

killing Palestinians as a way to remove some while potentially encouraging others to leave. Under the rubric of killing, some methods are, once again, straightforward, for example full-scale military assault as in 1948, while others are definitely more experimental, like the truck and car bombs first tried out against Palestinian markets in the 1920s, or hotel bombings like the King David Hotel in 1946, designed to terrorise as many constituencies as possible.² Within the ‘obviousness’ of military assault, for example against the Palestinians in Beirut in 1982, or the Palestinians in Gaza in 2008 and 2014, Israel has experimented with different kinds of weaponry, most of them illegal. These include vacuum bombs, cluster bombs, phosphorus bombs and uranium-based weapons, all of them so appallingly murderous that the psychological impact on bystanders or survivors is shattering. Even battle-hardened war correspondents can find the experience too much to bear, an example being Robert Fisk’s heart-rending reporting on the deaths of Palestinian children from Israeli phosphorous bombs in the Siege of Beirut (Fisk 1990).

Blurring the borders of killing has been perhaps the most recent experiment in Israeli military practice, used most extensively against the peaceful participants in the Great March of Return from 2018 onwards. Although the expenditure of enormous quantities of live ammunition by the Israelis unsurprisingly resulted in the deaths of many unarmed protesters, at the same time, the ‘experimental’ dimension was in the relatively new practice of shoot-to-maim (rather than the standard shoot-to-kill) deployed on a large scale. In her 2017 book *The Right to Maim*, Jasbir Puar develops a complex analysis of the biopolitics of maiming in the Israeli-Palestinian conflict:

Maiming thus functions not as an incomplete death or an accidental assault on life, but as the end goal in the dual production of permanent disability via the infliction of harm and the attrition of the life-support systems that might allow populations to heal from this harm. Maiming is required. Not merely a by-product of war, of war’s collateral damage, it is used to achieve the tactical aims of settler colonialism (Puar 2017, 143).

Maiming is not only an attack on the body and health of the individual, but also of the community. It produces an unhealthy, traumatised body, unable either to function as it previously did, to return to full health, or to find appropriate release in death (supposing such an outcome might be desirable). Such bodies are potentially more docile, or at least less able, it is assumed, to resist oppressive state practices. At the same time as it removes a certain kind of pressure on the Israeli state (somewhat fewer Palestinians are being slaughtered, so there is less likelihood of any international outcry), maiming increases the pressures on a catastrophically over-stretched Palestinian healthcare system, as well as the wider community attempting to look after its injured members with the scarcest of resources.

Deliberately induced scarcity is another way in which Israeli policy impacts the health of Palestinians. Among the many forms of this immiseration, we might mention:

- poverty: Israel’s ongoing dismissal of Palestinians in favour of immigrant workers has

produced levels of unemployment in Gaza which have passed 70%;

- hunger: the loss of their land, and increasingly restricted access to what remains, combined with the routine destruction of all-important olive groves by Israeli settlers, and the spraying of crop-killing pesticides by the military – notionally to ‘clear’ border zones – drastically reduces the Palestinians’ ability to feed themselves;
- thirst/drought: Israel steals most of the water intended for Palestinians from their three main aquifers, including the River Jordan, resulting in Gaza having almost no safe or clean water whatsoever – a problem exacerbated by the Israeli destruction of water pumping facilities in Gaza, and the fact that even where pumps exist, there is only electricity to run them for a couple of hours a day.

All of these contribute to increases in disease and general ill-health, mental as well as physical, to be tackled by a healthcare system which is deprived of the most basic resources by the continuing Israeli blockade of Gaza, and which has lost buildings, equipment, services and personnel as a result of Israeli military action.

The latter point is perhaps the most shocking in the long list of Israeli violations of ethical norms and international law. Although those killed (rather than maimed) on the Great March of Return included doctors, paramedics and ambulance personnel, all wearing high visibility clothing indicating their status, some of them killed while tending to others who had already been wounded, including a paramedic treating a doctor shot in both legs, they are only the latest victims of the repeated deliberate targeting of hospitals, clinics, ambulances, medical teams and individuals. The standard excuse, repeated after every attack, is that the particular hospital or clinic was being used as a base by enemy forces, and was therefore judged to be a legitimate target, though curiously – even in this age of close-up drone footage of everything – no evidence is ever produced. One of the worst recent examples was the Israeli onslaught on Gaza in 2014, in which seventeen hospitals and fifty-six primary healthcare centres were destroyed or damaged, twenty-three medical workers were killed, a further seventy-eight were injured, and forty-five ambulances were destroyed or damaged. The following year, the charity Medical Aid for Palestinians produced a report entitled *No More Impunity*. Five years on, so little has changed that its 2020 update bears the somewhat depressing title *Chronic Impunity* (MAP 2020).

In addition to destroying the Palestinian healthcare system, Israel blocks attempts at its reconstruction, forbidding the import of essential materials and equipment, from concrete for hospital buildings, to ventilators (now likely to be required for Covid patients), everything being deemed potentially ‘dual purpose’, i.e. capable of use in a military context, as well as its alleged purpose. Quite how you deploy ventilators militarily has yet to be explained. Similarly, blocking the reconstruction at the level of personnel is standard: in 2018, Israel refused 98% of the applications made for permission to leave the Strip in order to follow medical training of one sort or another. Forgetting about reconstruction, in the current situation even attempts at

staying alive can meet with official sanction: on 3 April 2020, Fadi Al-Hadami, the Minister for Jerusalem Affairs of the Palestinian Authority, was arrested at home in the middle of the night and beaten; on 5 April, Adnan Ghaith, the Palestinian Governor of Jerusalem, was also arrested at home. Both were charged with the crime of ‘Palestinian activity in Jerusalem’, which amounted to setting up disinfection stations, and urging fellow citizens to stay at home and stay safe.

As well as the repeated military assaults, Gaza has suffered more than thirteen years of an Israeli blockade so severe that the territory has been referred to by many commentators as ‘the biggest prison in the world’. The process of imprisoning is somewhat older, however. As Naomi Klein remarks, “1993 had been held up as the dawn of a new hopeful era; instead, it was the year that the occupied territories were transformed from run-down dormitories housing the underclass of the Israeli state into suffocating prisons” (Klein 2007, 546). Given that, it is perhaps appropriate that prisons provide our point of entry into examining in more detail the politics of the coronavirus pandemic in Israel and Palestine. As well as the ‘norms’ of the prison system, including routine torture (Israel is still the only country to formally sanction the use of torture), inappropriate detention (the young, the sick, the elderly), illegal confinement (imprisonment without trial or determined length of sentence, known as administrative detention), neglect of medical conditions or injuries, refusal of medical treatment, overcrowding and a lack of sanitation, Palestinian prisoners now have to deal with the threat of the coronavirus. The first confirmed case of the virus in the Palestinian population was that of a prisoner, infected, as far as can be determined, by an Israeli prison officer. This then resulted in a number of Palestinian prisoners, who might or might not have the virus, being removed from Peta Tikvah to Ramle and placed in insanitary quarantine conditions. As Carl Cattermole, author of *Prison: A Survival Guide*, has argued, the prison environment works as “a petri dish” for the development of a range of infections (Rizvi 2020, 12). That potential for infection, which is present even in what might be considered better quality penal establishments, is obviously increased in the conditions in which Palestinian prisoners exist. In response to the danger posed by overcrowded prisons, a growing number of countries have been reducing their level of inmates, though few have gone as far as the Indian state of Maharashtra, which is currently aiming to halve its prison population of 35,000. At the same time, Israel has, sadly – and despite international appeals not to behave in this way – been increasing the arrests of Palestinians, especially children, who already constitute an inappropriately large proportion of the prison population.

It is not only the official prisoners who suffer in relation to the virus: on 23 March, Haaretz carried a report about a Palestinian worker in Israel who, having displayed coronavirus-like symptoms, was tested, but before the results were ready was picked up by the police, handcuffed and dumped by the side of the road at the Maccabim checkpoint near Ramallah, where he apparently lay until an ambulance came to collect him.

The connection – on the face of it, perhaps not the most obvious of linkages – between health and settler colonialism, highlighted in the quotation from Jasbir Puar above, is brutally foregrounded by events in Israel. Benny Ganz, Benjamin Netanyahu’s three-time opponent for the premiership, having repeatedly sworn never to serve under Netanyahu, is now doing precisely that, having joined him in a government of ‘national unity’. The stated aim of the new government is to combat Covid-19 (though only in Israel apparently). However, the only action currently being discussed behind the smokescreen of tackling the virus is the massive theft of Palestinian land in the West Bank, given the go-ahead by Donald Trump’s ‘visionary’ plan for the region. (As I write, Mike Pompeo has just flown into Tel Aviv for discussions with Netanyahu about this egregious plunder). In its arrogance and insouciance, this represents another kind of Israeli experiment, this time in how to grab land. The classic approach has been, in the phrase much repeated by Prime Minister David Ben Gurion, “one dunum, one goat”. Taking Palestinian land and livelihood a notional one dunum (i.e. approximately 1000 m²) at a time continues to this day. The incremental spread of illegal settlements on Palestinian land follows this pattern: grab a little land – in this case, a strategic hilltop – get military backup to deal with unhappy Palestinians, gradually build your settlement. Set against that low visibility, ‘softly’ approach, the level of land theft currently envisaged requires something on the scale of a global pandemic to divert international attention. Although events have yet to unfold, there remains the possibility that Covid-19 may constitute a double tragedy for the Palestinian people: firstly, in the loss of life, and secondly in loss of land, both potentially on a scale which may be extremely difficult to recover from.

The idea behind the government of national unity, that ‘we need to get together to fight the coronavirus, and that is our national priority’, is interesting, given that we are led to believe that Israel has in fact already beaten the virus. In the first week in May, there was an online gathering, small, select, and self-congratulatory, of the First Movers, the leaders of the countries who think they have got the virus on the run. These included Austria, Singapore, Greece, Australia, Norway, and Israel. The First Movers swapped tips on how to beat the virus and set out what they thought their own particular success consisted of. In Israel’s case, it was, to no one’s great surprise doubtless, high-tech surveillance. As Naomi Klein has argued, the development of the Israeli economy into one specialising in high-tech processes and homeland security has had a profound effect on the region, not least in the dwindling prospects for any meaningful peace: “The extraordinary performance of Israel’s homeland security companies is well known to stock watchers, but it is rarely discussed as a factor in the politics of the region. It should be” (Klein 2007, 555).

In addition to the ‘biggest prison’ image, the condition of Gaza over the last thirteen years has typically been referred to as a siege, and certainly Israel’s stranglehold on the territory has been as unrelenting, brutal, and inhumane as anything produced in earlier military history. In this case, however, there is a deeply ironic difference: sieges are typically long drawn out

assaults on places too well defended to be captured in a single attack: castles, walled cities and other strongholds. Gaza, of course, is the opposite of that: the ‘walls’ around it are built, maintained and manned by the besiegers; there is nowhere for the besieged to hide from the weapons ranged against them; they have nothing remotely comparable with which to defend themselves; their state of health, their lives and deaths, are in the hands of their besiegers. There is, however, a way in which Gaza more closely resembles a mediaeval siege. If the besiegers could not fight their way to victory, they relied on a process of attrition: hunger, thirst, and disease would be the weapons to defeat the besieged. Thus far, Gaza has not been brought to its knees by repeated and increasingly murderous Israeli attacks; it has survived years of hunger, thirst and material deprivation; it will be interesting to see what role disease now plays in the search for a final, conclusive Israeli victory, of the sort that exiled Israeli historian Ilan Pappé adumbrates in his appropriately titled 2017 book, *The Biggest Prison on Earth: A History of the Occupied Territories*. Pappé logs the way that Israel, particularly over the fifteen years since it ‘withdrew’ from the Gaza Strip, has engaged in ever-larger and ever-more deadly assaults on the territory. It is also significant that each of the military operations has involved a degree of experimentation: particular kinds of weaponry, the nature of the deployment of the weaponry, the levels of civilian casualties that might cause international condemnation (or not). As Pappé comments: “And if the Israeli generals wanted to know how such operations would be received at home, in the region and in the wider world, the answer was ‘very well’: namely, no governments showed any interest in the scores of dead and hundreds of wounded Palestinians left behind after First Rain” – the 2005 attack that set the pattern for those that followed – “subsided” (2017, 216). Other strategies having thus far failed, it is hard not to see Israel’s behaviour in relation to Covid-19 and Gaza as another approach to their overall aim of removing the Palestinian population, a potentially lethal form of coercion, the latest experiment, the newest weapon in the apparently never-ending siege. While the idea of Israel deliberately creating a Covid-centred humanitarian disaster in Gaza remains speculative, what is beyond doubt is that they are doing nothing whatsoever to prevent one. Having closed off the access points to the Strip, they have ensured that no medicine or medical equipment can get in to prop up the shattered health care system, and meanwhile, despite the sophistication of their own system, as well as its current ‘capacity’, they are offering nothing by way of help. At the same time, closing the borders turns Gaza into the perfect overcrowded environment for the production of a devastating local pandemic.

How, then, as a Palestinian, do you respond to such a siege? One very Palestinian way of responding is culturally. That can obviously take time, though we have already seen the young Palestinian musician Nai Barghouti setting Darwish’s poem “Think of Others” to music and dedicating it to Covid-19 sufferers. (The recording was done on a smartphone under lockdown conditions).

When I composed Mahmoud Darwish's inspiring poem, 'Think of Others', I was indeed thinking of so many others. Of Palestinians under a 13-year 'lockdown' in Gaza, or in crowded refugee camps. Of communities fighting repression, poverty, racism and structural oppression. Of courageous medics and humanitarian workers worldwide resisting the pandemic.

When humanity as a whole is facing this unique threat, I feel it is our moral duty to lift up the voices of particularly those who must cling on to hope for a more just and peaceful future while relentlessly resisting systems of injustice. This video is my attempt to fulfil this duty. (QudsN 2020)

Darwish himself, as something of an expert in sieges, would no doubt have had something to say on the subject. As a member of the Palestine National Council, he was in Beirut throughout the Israeli siege of 1982, producing some important poetry and a prose memoir, *Memory for Forgetfulness* (Williams 2013). In 2002, he was in Ramallah when the Israelis attacked. His response was the epic poem *State of Siege*, produced, despite its length, at considerable speed. Giving the impression of a hastily written siege diary, its 115 sections range from one- or two-line epigrammatic fragments to entire poems. Although it is clearly grounded in the events of 2002, where the attempt to crush the Second Intifada resulted in the widespread and repressive lockdown of Palestinian communities, the poem also gives a sense of life under occupation (and there had been over half a century of it when Darwish wrote his poem) as an unending siege. In health terms, the siege, unsurprisingly, has negative effects, both mentally and physically. Despair, depression and terminal boredom are likely, though they can also have unexpected consequences:

The siege will drag on
till the besieging, like the besieged,
discover that to be bored is to be human.
(Darwish 2004, 14)

Pain and grief are widespread, and the former threatens to render the attempt to turn it into poetry pointless:

Rhyme is redundant
when the tune can't be tuned
and pain is beyond measure.
(Darwish 2004, 14)

The grief is frequently that of parents for their children killed in the siege, sometimes fighting and dying as 'martyrs', but also simply shot by the Israelis:

The Mother said:
I never noticed him wet with his own blood.
I never noticed the blood on the floor.
He lent against the wall drinking camomile tea
planning what to do tomorrow.
(Darwish 2004, 18)

Wounds, physical and mental, are common, indeed, the idea of wounded Palestinians, even a ‘Palestinian wound’, was part of Darwish’s recurrent imagery, particularly in his earlier works. And then there is death, an ever-present threat, though not an inevitable fate:

Soldiers gauge the gap between being
and nothingness
through the crosshairs of a tank sight.
We gauge the gap between ourselves
and the shells
through our instincts’ sixth sense.
(Darwish 2004, 10)

Faced with all of this, how do you cope? The opening stanza makes it memorably clear:

We do what prisoners do
We do what the unemployed do:
We cultivate hope.
(Darwish 2004, 8)

This modest introduction is key to perhaps the most important survival strategy on offer. Hope runs throughout the poem, overtly, and behind the scenes. It is noticeable that the most health-focused stanza foregrounds both hope and another essential characteristic – resistance – as well as pointing out that not all infections are equal:

To resist means a check-up
to ensure that your balls and your heart are still ticking,
to make sure you’re infected with a sickness called Hope.
(Darwish 2004, 29)

The modes of resistance are many, from the armed struggle through to a simple refusal to surrender or go away. Darwish also returns to a phrase he made famous in a poem from the Siege of Beirut, “Besiege your siege!”. Then, it was the defenders of the city who were called to adopt this strategy; now, it is poetry that is being enjoined to fight back. In both cases, the task is daunting.

What all the forms of resistance share, however, is the fact that they spring from a life lived hopefully, in spite of everything that the siege continues to throw at them. They are the responses of those identified by Nai Barghouti “who must cling on to hope for a more just and peaceful future while relentlessly resisting systems of injustice” (QudsN 2020). One hopeful attempt by the besieged to end the slaughter through a truce in which, among other things, “we could fight our battles with poetry, for once” is rejected by the besiegers:

But they told us: haven’t you heard that peace begins at home?
What happens if your music brings our high walls tumbling down?
And we answered: So what’s wrong with that? Why not?
(Darwish 2004, 31)

Whether these are the illegal Israeli separation wall or the walls around Gaza, one side has an investment in making sure they stay in place.

The poem ends with a dozen brief stanzas on images of peace, the repetition of the word almost like a meditation mantra or a religious prayer. The final one encapsulates the hope for survival:

Peace sings of life – here, in the midst of life,
wind running free through fields ripe with wheat.
(Darwish 2004, 32)

Without knowing what is to come, we must hope, above all hope for a life – even, somehow, one running free – for the besieged inhabitants of Gaza.

Notes

¹ See, for example, Darwish 1997.

² For an extended discussion of Jewish and Israeli terrorism, see Suarez 2017.

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