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Article in *Culture Medicine and Psychiatry* · April 1994

DOI: 10.1007/BF01384879 · Source: PubMed

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A. JAMIE SARIS

REVIEW ARTICLE

THE RETURN OF THE REPRESSED:  
BRINGING CULTURE BACK TO PSYCHIATRY

*EMPTYING BEDS: The Work of an Emergency Psychiatry Unit.* Lorna A. Rhodes. 1991 University of California Press.

*ETHNOPSYCHIATRY: The Cultural Construction of Professional and Folk Psychiatries.* Atwood D. Gaines, ed. 1992 State University of New York Press.

*Reviewed by A. Jamie Saris.*

Joe had been explaining things in the meantime. He said it was the beginning of the unfinished, the rediscovery of the familiar, the re-experience of the already suffered, the fresh forgetting of the unremembered (Flann O'Brien, *The Third Policeman*).

INTRODUCTION

In their modern form, both anthropology and psychiatry derive in large measure from philosophical musings on the nature of rationality that developed out of the Enlightenment. John Locke, one of the heroes of this intellectual awakening, pointed out great categories of humankind who, in their natural state, seemed to be beyond the pale of "reason" as he was formulating it in his *Essay Concerning Human Understanding*. These groupings were idiots, madmen, savages, and children (1975 [1700], esp., Book I:Ch.2:Sec.27, and Book II:Ch.11:Sec.10–13). These species serve various functions throughout the *Essay*, forming a logical and rhetorical boundary between man and brutes. Along this boundary, Locke develops and sustains such diverse proofs as the impossibility of innate ideas to common sources of error in the minds of even educated men.

I start this discussion of two recent volumes concerned with the intersection of anthropology and psychiatry with a brief nod to Locke, a hallowed forefather of "reason" as we understand the term even today, because when we look for connections between modes of disordered thought and "culture", we are, knowingly or not, involved in a conversation to which he was an early and major contributor. In particular, his sub-divisions within the category of the "irrational" can be traced right through the disciplinary division of labor that

developed within the Academy in the eighteenth and nineteenth centuries. Alienists, and then psychiatrists, claimed the ability to assess (and insofar as possible to direct) "madmen" and many "idiots," and anthropologists took upon themselves the responsibility for understanding "savages."<sup>1</sup> In a real sense, then, these two disciplines were important explorers (even colonizers, for less charitable readers) of a theoretical continent of partial understandings and misplaced meanings. On this strange landscape, seeming deficits of rationality and apparently wrong reckonings confront ordered thought, often in mutually enlightening ways. How to understand these differences – why rationality as it was understood in "the West" (in the event, a rather select group of Northern European males) was or was not universal, and, if it was lacking, could it then be bestowed/regained – became central issues in the human sciences, a source of enduring debate that pitted universalists and particularists, romantics and rationalists in various, often interesting, combinations (see the various contributions to Wilson 1970, Sahlins 1976, Lévy-Bruhl 1985, Shweder 1991:1–72, Good 1994 among many others).

#### MEANING AND CRISIS IN ANTHROPOLOGY AND PSYCHIATRY

Eventually, the problem of *meaning* emerged as a central question in these debates. Very crudely, those who saw meaning as necessarily connected to questions about rationality fretted over the role of interpretation in human life. Metaphors of "conversation" and "translation" began to dominate this discourse, and a certain amount of ambiguity was accepted as part and parcel of human existence (Herder 1803, Cassier 1955, Sahlins 1976, Tambiah 1990:ch.6, and Good 1994). Those who saw meaning as relatively epiphenomenal, on the other hand, as following mechanically from a "correct" engagement with an always/already natural world saw the question of human engagement at best as a source of error (see Rorty 1979 for overview and critique of this position). In this discourse about human existence, metaphors from the so-called natural sciences predominated, with reduction of complexity and the derivation of "laws" emerging as central priorities. Probably the founding statement of this tension for American anthropology is Franz Boas' musings on "The Study of Geography," which contrasts nomothetic and ideographic impulses in the human quest for knowledge (1966:639–47).

The point that I want to make for the moment is that concerns about "meaning" and "rationality" are still the main bridge that connects at least certain strains of psychiatry and much of anthropology even today. These same concerns also divide those who study culture from much of the seeming mainstream of American psychiatry. Psychoanalytically-influenced psychiatry, for example, has historically confronted the problem of meaning in the

"abnormal," attempting to understand and bring to light the semantic sands upon which the foundation of pathological symptomatology rested. Indeed, there was a time, from the 1930s through the 1950s (hard to envision for someone like myself, an anthropologist trained in the late-1980s), when anthropology and much of academic psychiatry in America enjoyed a real collaboration around a set of interrelated questions concerning individual thought and culture. During this period, it was not unusual for the "Culture and Personality" school in American anthropology and the various (if sometimes competing) strains of Freudianism in American psychiatry to look towards one another for research objectives and paradigmatic innovations.

Of course, such collaboration is not nearly so evident today. An important part of this disciplinary divergence, I would argue, stems from a set of crises that struck at the foundation of both disciplines in the social and intellectual ferment of the late sixties and early seventies. Anthropology's crisis was a dual one – of representation and legitimacy. The liberation of the colonial world, the traditional universe of anthropological research, quickly led to the questioning of ways of creating and using knowledge that many ethnographers had hitherto understood as value-neutral and politically unproblematic (see Marcus and Fischer 1986, Clifford and Marcus 1986).<sup>2</sup> At the same time, hitherto marginalized voices of women and non-Europeans began to exert far more influence in the discipline. In the wake of such a challenge, even the recording of the fruits of research – who gets to represent what to whom and for whose purpose – became very difficult issues.

Within a quite different institutional framework, American psychiatry suffered through a set of structurally similar shocks. Hitherto very marginal voices in American society who were also constituted as psychiatric subjects, from homosexuals to ex-mental patients, challenged the legitimacy of psychiatric practice and nosology. Radical critiques from both within and without the discipline connected psychiatry (particularly public psychiatry) to the crudest means of social control in a fashion very reminiscent of charges levelled against anthropology as being the handmaiden to colonialism (compare Goffman 1961, Liang 1967, Szasz 1970a, 1970b, Scull 1979, to Said 1981, and to a lesser extent Herzfeld 1984). Most importantly, third party payers for psychiatry's specialized services began to express severe reservations about the many ambiguities in psychiatric practice, not the least of which was its poor inter-clinician reliability of diagnoses and the seeming open-endedness of its then-dominant treatment paradigm (for overview, see Wilson 1993).

Clearly, anthropology and psychiatry have handled their respective difficulties with representation and legitimation in very different ways, and this difference, more than anything else, I believe, explains the relative estrangement between the mainstreams of both disciplines in the 1990s. In the wake of its crisis, American psychiatry effectively split in two. On the one side remained a

minority (seemingly ever weakening) dynamic wing that had long subsumed certain ambiguities of psychiatric practice, such as variable diagnosis and outcome, under the complex problem of developing individual meaning during the course of long-term psychotherapy. On the other side emerged a dominant biological wing that rejected issues of ambiguity entirely in favor of a revitalized nineteenth-century model of demarcating ontological disease entities by describing supposedly discrete symptom complexes. This biological wing, under a dual impetus of exciting and elegant research into the biochemical properties and dynamics of the brain and a social setting in the U.S. increasingly comfortable with the human body as a source of limitations rather than possibilities, has in the meantime gone from strength to strength.<sup>3</sup>

No such clean post-crisis division has emerged in American anthropology. Much of American social-cultural anthropology, under the prodding of symbolic anthropology, has tacitly embraced a philosophical underpinning that can probably best be labelled some brand of hermeneutics. At the same time, the discipline has continued to worry about the epistemological and institutional sequelae of abandoning the comfort of external structures and, more importantly, the authority, however provisional, of social *science*. Perhaps the most public recent example of this ambivalence was Derek Freeman's heralded "attack" on Margaret Mead's work in Samoa, made expressly from the standpoint that Mead (more specifically her mentor Franz Boas) had betrayed the "science" in anthropology to an ideological "absolute cultural determinism," along with the various disciplinary responses that this charge generated (Mead 1928, Freeman 1983, Rappaport 1986).

#### NEW DIRECTIONS

More to the point, these crises have launched important trends in both disciplines that have shaped, and been shaped by, their respective disengagement. Over the last twenty years, biological psychiatry has been going ever farther afield in order to demonstrate the ontological status of its major disease categories as disorders of the brain at a species-wide level. Large projects emanating from the World Health Organization, for example, have ostensibly shown the viability of Western understandings of (at least severely) disordered brains, such as schizophrenia, in a wide variety of settings, even as they have shown interesting variation in course and outcome in the supposedly relentless unfolding of these "hard-wired" states (WHO 1973, 1979, Sartorius *et al.* 1986, 1993, Jablensky *et al.* 1992, Roth and Kroll 1986, Warner 1985, for critique see Barrett 1988). One does not have to look far in the major journals in the discipline, moreover, to find authors who give the impression that any number of major and minor problems recognized by Western society as crazy or bad are

about to yield to sustained research and reveal their essential genetic/biochemical nature (Sethi 1985, Häfner 1987, Guze 1989 among many others; see Lewontin *et al.* 1984 for summary and critique).

During this same period, anthropology has focussed its gaze increasingly nearer to home, either investigating directly the workings of various Western societies, or highlighting the role of the world system (in which such societies are granted leading roles) in relationship to local contexts. While biological psychiatry extended itself into the hitherto exotic on the back of a nineteenth-century vision of the connection between the disturbance of physical organs and symptom clusters, anthropology's homeward movement has been more theoretically complex. The discipline has simultaneously held the opinion that its special insights, forged in relatively close investigations of exotic, primitive, or simpler societies, reveal to the anthropologist the essentially arbitrary nature of much that some entity "The West" takes to be both objective and natural. At the same time, the discipline acknowledges that it is problematic to have constantly investigated "Others" to develop such cultural critiques (Marcus and Fischer 1986). It is widely accepted now, for example, that some anthropologists work in "familiar settings", i.e. Western Europe and the U.S., although exactly how to best write about such settings remains a problem, one addressed in an interesting fashion in the Rhodes volume.

The foregoing is, I think, a necessary, if inadequate, preamble to two cultural forays into psychiatry at a time when much of that discipline is ideologically hostile to cultural concerns. *Ethnopsychiatry*, edited by Atwood Gaines, is a very wide-ranging, theoretically ambitious collection of essays covering such diverse topics and perspectives as medical sociology (Hershel, Blue), illness phenomenology (Csordas, Jenkins), institutional history (Dwyer), and post-structuralist ethnography (Rhodes). Lorna Rhodes' *Emptying Beds* is a book-length treatment of an emergency psychiatric unit in a major American city (a truncated chapter of which also appears in the Gaines' volume). Informed by a set of theoretical concerns largely established by Foucault and a sensitive ethnographic eye for revealing data, Rhodes spins out a staff-eye view of the day-to-day existence of the new face of psychiatry in the strange world of what is euphemistically referred to by most of American society as the "inner-city." I will treat both works separately and serially below and then examine some of the questions and problems that these two volumes raise.

#### CULTURE AND PSYCHIATRY

*Emptying Beds* is one of our few book-length treatments of a modern urban setting containing psychiatric patients and facilities (also Estroff 1981, see Jodelet 1989 for a more rural setting). Contra some of her earlier work (Rhodes

1984), the author is content to leave the individual experience of "psychopathology" largely in the background, focussing instead on how the experiencers of this state are taken up and constituted as particular sorts of subjects by a modern institutional setting in America. This is not to say that we do not get evocative portraits of individual sufferers in *Emptying Beds*. Rhodes' sketches of the badly damaged, aged alcoholic "Judge," who goes from being bureaucratic "hot shit," something to be made into somebody else's problem, to pampered pet on the unit, and the tormented, drug addicted, but strangely articulate "Keith Holmes," who negotiates a local reality with a psychiatrist that can be best characterized as somewhere between winsome and terrifying, are detailed and convincing character portraits. Nonetheless, the focus of the work remains fixed on the unit's staff within a particular and unusual institutional setting and how they manage the extraordinary experience of disordered subjects, while balancing contradictory disciplinary tasks, limited resources, intrusive bureaucratic oversight, and various, generally competing, moral and ideological imperatives.

At this level, the book can be read as a sort of revisitation of Goffman's classic work, *Asylums*. Whereas Goffman's asylum was a heartless total institution, relentlessly conducting its "people work" of manufacturing compliant institutional subjects (1961:3-124), Rhodes' institutional panoply seems to proceed in a headless fashion, fragmenting subjects, who are already only indifferently unified, in a social setting (the American inner-city) where such fragmentation is itself an eerie sort of norm. Rhodes' presentation is more sensitive than Goffman's sometimes heavy-handed treatment of his data, but in both works we get a sense of the importance of trying to think clearly about the concept of "institution" as a prerequisite to understanding the disordered persons that they take for their subjects.

As one moves through Rhodes' work, moreover, one gets a sense of Kafkaesque order emerging out of this strange mixture of bureaucratic structures. These structures end up constraining marginal individuals in particular portions of the modern urban environment through a mechanism of seemingly deliberate institutional fragmentation. This "accidental" quality of the disordered order is very reminiscent of recent work in so-called post-modern geography that reads regimes of discipline and surveillance in the "new," seemingly disorganized architecture of cities (Davis 1990, Soja 1988). This quality of the modern bureaucracy is brought out very forcefully, for example, in the remarkable drawings that some of the staff make in response to Rhodes request to map out institutional territory. The physical and institutional geography of dispersed sites of power and influence, encompassing courts, prisons, hospitals, and community care facilities is represented in these drawings by bizarre game boards and terrifying machines in which hapless subjects are moved around seemingly at random and with practically no avenues of escape (pp.118, 148-52).<sup>4</sup>

It strikes me, however, that such rich, multi-vocal data could have very easily borne the weight of more analysis than the author provides. The very brevity of the work (less than 200 pages including index and bibliography) leaves the reader wanting to see in what ways theoretically or didactically such data might have been pushed in another chapter or two. In part, this truncated quality of the argument is a deliberate attempt on the part of Rhodes to convey something of the fragmentation and partialness of the social setting she is investigating, a stylistic decision very much in line with recent calls to reinvent ethnography (Clifford and Marcus 1986). Notwithstanding this strategy, her artful juxtaposition of voices whets the appetite for a more complete theoretical engagement of some of the authors she cites in her Introduction.

Michel Foucault, in particular, is invoked far more often than he is examined. While Rhodes insists that this work is not an analysis or critique of the French thinker (p. 6), his presence in the work is unmistakable and could do with more overt elaboration. A cultural engagement of Foucault in relation to a modern institutional setting, moreover, is long overdue, given his overwhelming interest in the classic state panoply of asylum, hospital, school and prison. Rhodes' emergency psychiatric unit seems to partake of all and none of these models. Yet, as we would expect knowing Foucault's oeuvre, there is an undeniable resonance between the fragmentation of subjects, of institutions, and of the broader society.

#### CULTURIZING PSYCHIATRY

*Ethnopsychiatry*, edited by Atwood Gaines, is another, rather different way of bringing "culture" back to psychiatry. The volume is formidable in size (500 pages), relatively high in price (\$73.50 in hardcover and \$24.95 in paperback) and very ambitious in scope, encompassing 14 authors and 16 papers, many of which are abstracted from much larger works in progress. In and of itself, this density could be intimidating to the potential reader who may not have much acquaintance with this literature. To his credit, however, Gaines has command of an immense amount of (particularly recent) material on the interface between psychiatry and cultural anthropology and he presents this complex body of work reasonably effectively. Both the initial essay on the theoretical foundations of the "new" Ethnopsychiatry and the final piece in this volume, a sort of annotated bibliography of "Ethnopsychiatry sources," make this work a tempting graduate student purchase – no small praise given the limitations of the graduate student budget and calendar. Due to space limitations, I will discuss below only a selection of the papers in this volume.

Gaines' own work in *Ethnopsychiatry* deals directly with many of the issues raised in the opening pages of this essay, and it is on these ideas that I will focus



my comments. The initial piece in the volume, "Ethnopsychiatry: The Cultural Construction of Psychiatries," is self-consciously cast as a theoretical overview of the complex interface between psychiatric and anthropological concerns. Essentially, Gaines argues, contra most of current biological psychiatry,<sup>5</sup> that the abnormal is as much a subject of cultural patterning as is the normative in human life. In this Introduction, Gaines erects a framework with historical antecedents in the conflicted but rich work of the Hungarian-born, French-adopted anthropologist-psychiatrist, George Devereaux, (more on this choice of historical forbears anon). He also charts out directions for future research, in a more sensitive investigation of such diverse phenomena as Violence and Ethics. These new investigations are to be informed by the wisdom that (1) various "ethnopsychiatries" around the globe are "cultural constructions" and (2) that we cannot therefore privilege one ethnopsychiatry over another one or even the professional over the folk ends of any particular ethnopsychiatry continuum.

Gaines situates his "new ethnopsychiatry" within a familiar vision of three root paradigms with which anthropology has found itself engaging medical realities. The first he labels the biological approach, which is essentially a form of positivism. This paradigm takes the basic categories being investigated in medicine as more or less real entities in the world. Occasionally, these realities are given a particular spin by local conditions (e.g., Simons and Hughes 1985:3-62), but they always remain accessible to Western epistemology. In any case, this approach is confident that its objects of study are "out there" in an unproblematic way. Gaines dismisses this vision of the world with little argument, the author assuming, I suppose, that one of the first intellectual exercises in graduate school training for anthropologists is the sustained theoretical dismantling of straightforward positivism.

The second paradigm we might call "inventionist" is related to the first. Gaines associates this stance most strongly with "Critical Medical Anthropology" (CMA), but many authors in the discipline who write under the banner of "critical" theory could be encompassed by his critiques. Gaines rightly points out that CMAs among others hold to an Enlightenment idea of an objective reality, but they insist that the everyday ways that the West has gone about creating knowledge about this reality mystifies its essential nature. Such thinking is by no means confined to CMA, however. With regard to recent anthropological and historical speculation concerning "nationalism," for example, I would point out that someone like Eric Hobsbawm (1990) answers to Gaines' description tolerably well. In any event, Gaines takes such "critical" authors to task for their failure to appreciate the great importance of the symbol in human life, and their reproduction of theoretical problems of positivism in the very act of arguing against it.

The final point in our theoretical triangle, and to Gaines' eye the most fitting research tool for the anthropological engagement with psychiatry (and medicine

more broadly), is the cultural constructivist paradigm, which he connects to related developments in sociology (1992:17–18). In this theoretical field, we see all of reality (or at least its socially relevant bits) as “constructed,” and there exists, therefore, no acultural field for biomedicine or economic forces to inhabit. Reality as such, then, is ambiguous and open to negotiation. This idea of negotiation creates a theoretical space in which the position of subjects with respect to cultural and political structures and agendas can be examined. These ideas, hardly new of course in this essay, share much with the post-modern moment in the humanities and social sciences in their rejection of total and totalizing structures of thought. Furthermore, this position also emphasizes a certain degree of fragmentation and irreducible ambiguity as a defining feature of cultural contexts.

#### FICTIVE KINSHIP?

Given Gaines’ intent to radically relativize ethnopsychiatry, it is interesting that he places George Devereaux at the apex of his intellectual genealogy. To be sure, Devereaux coined the term “ethnopsychiatry,” and produced a volume, *Mohave Ethnopsychiatry*, that to this day stands as one of the most exhaustive and sensitive investigations into another culture’s evaluation of the relationship between the psyche, distress, and the external world (Devereaux 1969 (1961)). Yet, Devereaux was, in the final analysis, a psychiatrist who in almost all his writings is committed to an ultimate separation between the normal and the abnormal and a more or less pre-cultural unconsciousness, albeit one overlaid in any particular setting by varying ethnic unconsciousnesses. At this level, his use in Gaines’ project would appear to be problematic. It is illuminating, therefore, to see how the author traces out the genealogical lineaments that bind together the old and new ethnopsychiatry.

Gaines simultaneously summons and distances the ghost of George Devereaux through the use of the term “new” Ethnopsychiatry. Like Devereaux, he is interested in cross-cultural approaches to mental abnormality. Like Devereaux again, he is very interested in decentering the universalistic claims of modern (particularly American) psychiatry in favor of the cultural construction of both the object of a particular psychiatry and its means of affecting this object. Gaines takes one more theoretical step, however, by using the “ethno-” label in front of psychiatry not only as a flag for the cultural boundedness and particularity of a set of practices, but also as a device to flatten, at an ontological level, the various claims of these psychiatry to absolute knowledge (perhaps even any knowledge).

There are some problems with this argument. First, I am unclear on how Devereaux himself would have responded to his use in the cause of a relativistic

project pushed to the length that Gaines clearly wants to take his argument. To me at least, Devereaux reads like a high modernist author convinced that there is a basic explanation to all human motivations (his own brand of cultural psychoanalysis). From a perspective on the other side of the postmodern moment in the human sciences, he gives the impression of a man sure of his footing on the path to some unitary truth. Even leaving aside the parts of his oeuvre that today read in a very dated fashion indeed, such as his various theories about the always/everywhere pathological abnormality of homosexuality, Gaines' theoretical deployment of Devereaux still strikes me as Manichaean. The parts of the "old ethnopsychiatry" that read very cultural constructivist are loaded on board the Gaines framework with high praise as part and parcel of the "new" Ethnopsychiatry, while the parts that seem to argue strongly against the indefinite pluralizing and ontological levelling of psychiatries, such as Devereaux's career-long hostility to relativism (1980a), are either ignored or done away with an aside (Gaines 1992:5). While it is true that Devereaux sometimes used the "ethno-" label as a means of decentering *certain* Western claims to universality in psychiatric practice (1980b), this was done more in an attempt to point out the *inadequacies* of some dominant Western psychiatric ideas and less as a means of pluralizing the truth as such.

One has only to read, for example, Devereaux's speculations concerning that object of endless anthropological fascination "shamanism," particularly his comments on the self-evident abnormality of the famous Oglala medicine man Black Elk (1980a:19), to see the enormous gap that separates much of current anthropology (as well as the sort of philosophical vision that Gaines is apparently trying to get across) from Devereaux's speculations. Were Black Elk's (Neihardt 1972 (1932)) richly detailed spiritual experiences "ineffective cultural defense mechanisms" constantly threatened and occasionally overwhelmed by the harsh taskmasters of external reality and "inner psychic conflicts"? Were they failed appeals to supernatural beings not strong enough or interested enough to stop the inexorable advance of the United States against the Sioux People? To be sure, there are few anthropologists, the author included, willing to subscribe to the second hypothesis (at least in print), although this seems to be the one Black Elk himself believed. On the other hand, formulations like Devereaux's are no longer very popular either. More importantly, when we frame someone like Black Elk in terms of the potential of the "individual" to adjust and readjust and judge him wanting accordingly (Devereaux 1980a:64), we end up with a paradox that silences further discussion. Indeed, we might ask in what sense is individual adjustment a meaningful concept in relation to the futile valor of The Little Big Horn or to the slaughter at Wounded Knee, both of which Black Elk saw in his lifetime?

## CULTURE, REALITY, AND FALSEHOOD

It is, however, both unfair and uncharitable to hold descendents responsible for the sins of ancestors, even intellectual ancestors. I digress into Devereaux to make a point about how Gaines sometimes employs the term "ethnopsychiatry" and how this term is used at times in many of the volume's essays. It seems to me that Devereaux used the "ethno-" label fundamentally as a way of universalizing *error* in opposition to a royal road to truth upon which travelled a relatively select band of culturally illuminated psychiatrists and dynamically inspired anthropologists. The idea of boundedness in Devereaux's oeuvre carries with it a definite pejorative air – implicitly, true knowledge *should* be universal in scope, and our knowledge is wanting, to the extent that it cannot be universalized. To be sure, he applies the "ethno-" label at times to Western categories, particularly to the concept and treatment of "schizophrenia" in modern America, but, again, this is done to show the *limitations* of mainstream psychiatric and popular practice on this matter.

This idea of a symbolic system institutionalizing "error" is a venerable (at some points, even defensible) philosophical position, and some of the papers in the volume, such as Nuckolls' "Notes on a Defrocked Priest" relate very much this sense of the mutual partiality of distinct systems from a perspective external to both of them. The connection between the assessment of the relationship between individual distress and intra- and extra-psychic forces in both modern American psychiatry and among experts in a small village in Tamil Nadu India, Nuckolls tries to show, is their relative boundedness and their inability to be imported across contexts. Note, however, that, in this case, it is precisely the externality of the anthropologist to both systems that allows such an assessment. By its very nature, then, the argument sidesteps the theoretical problem of the situatedness of the observer, an important issue in most constructivist thought. If we take the symbolic constructivist position seriously, however, there is a theoretical difficulty with this sense of exteriority for the anthropologist to systems that he or she is presumably investigating (Wagner 1981). We might say, with a nod to the medical concerns of both volumes, anthropologist, deconstruct thyself.

This occasional difficulty in situating the observer in a volume that takes "situation" to be of some importance stems, I think, from employing the idea of "cultural construction" too often in its most deconstructive/destructive sense, i.e., as a way to make a negative point against a position that takes for granted its own ontological status. Unless great care is taken, this negative deployment ignores the massive facticity that such "constructions" do in fact have in lived social experience. Gaines, for example, very cogently discusses the question of race in America. The category of "race" in America, he rightly argues, is a sort of social fiction not discoverable in quite the same way in other parts of the

world (although his comparison on the social deployment of "race" in Alsace *vis à vis* the United States might have been elaborated more) (1992:184–190). The idea of race being discursively constructed, however, can only be the beginning of an analysis of such a complex social reality. To the extent that "social construction" or "social fiction" functions as an "explanation" of race, we misunderstand the effects of the cultural practices that underlie and reproduce this category.

In short, a "negative" sense of the term "cultural construction" can easily mislead our readership as to the nature of cultural realities. Categories like "race" in contemporary America are *real* to that precise extent that they are *constructed* – any number of very real social and biological measures from infant mortality rates to the prevalence of violent death to the likelihood of being incarcerated or receiving a home mortgage are an enduring testament to the amount of cultural labor concretized in the category of race in the United States. Indeed, we have come to a point in our society, a culturally-constructed and historically contingent point to be sure, such that it is almost impossible to avoid a discussion about race when talking about contemporary America (see, for example, West 1993), this both despite *and* because of its "fictional" quality.

In part, this necessary "truth-value" in cultural constructions is the reason why Critical Medical Anthropologist authors continue to exercise influence in the discipline (it is also the reason for their political engagement), despite the shakiness of their theoretical underpinnings that Gaines masterfully exposes (1992:20–23). In a society of affluence, poverty, too, is a peculiar social and cultural "construction," a result of political choices by the powerful among meaningful objects. Indeed, to deprive sections of the body politic at the level that is acceptable in contemporary America takes an act of *political* will hand-in-glove with a near society-wide willingness to engage in a certain amount of *cultural* work. My point is that faultlines in society are no less real for their being social, and, in the absence of political engagement, their relative non-necessity is small comfort to those involved in oppressive power relationships and poor health indices (see Swartz's essay for a similar discussion of the negative theoretical and political baggage attached to a naive constructivist position for South Africa).

Gaines is sensitive to some of these issues. Therefore, along with this deconstructive sense of the term cultural construction he and some of the other authors employ the "ethno-" label in a more positive sense. Csordas, in "The Affliction of Martin," for example, is interested in this "reality-building" aspect of "construction" within the context of a charismatic healing encounter. This usage is a more janus-faced vision of the term, at once decentering dominant "Western" notions, while at the same time intellectually taking seriously their competition in different contexts. Indeed, Gaines' own contribution to the volume, "Medical/Psychiatric Knowledge in France and The United States,"

gives a clear sense of how French "ethnopsychiatry,"<sup>6</sup> particularly its vision of paternalism in the institution, forms a good cultural "fit" with much of the rest of French society. A vision of overt hierarchy, even a sense of feudal patronage, within a modern institution would be considered an unfortunate bureaucratic ossification in America (as it is in Katz's essay on American ethnopsychiatry in Maryland). In France, however, Gaines implies, this hierarchical sense is firmly embedded in, indeed an important part of, the therapeutic process.

### CONSTRUCTING CULTURES

Nonetheless, there is a tension throughout this long volume between the positive and negative employment of the idea of cultural construction that I think could be fruitfully explored as its disciplinary implications are felt. It seems to me that both the burden and the excitement of the modern notion of the symbol in anthropology is precisely, following Cassier, its quality as *an organ of reality* (see also Good 1994). If the symbol is not something that can be "gotten around" or "outside of" to get to something more true or real, then we have to handle concepts like "boundedness" and "partialness" very carefully indeed.

However bounded they appear to be from the outside, cultural systems also tend to be universalizing in scope. Subjects within them are constantly creating them anew, while slotting the apparently novel into already extant meaningful templates, even as the templates themselves deform under such usage. The relative boundedness of such systems generally comes across as a recognition of the different ways two of them can cut up and reassemble "reality." Yet, communication, even translation, occurs despite such differences. Indeed, complex negotiations over the elusive meanings of symbols occur between two speakers of the same language just as surely as they occur within the brain of one poet translating the work of a fellow poet into another linguistic code. Negotiation implies intentional subjects, with agendas, differential access to the power to define the terms of the debate, and interests in certain outcomes over others.

If we accept this quality of the symbol and a symbolic system, then certain modern questions at the intersection of psychiatry and culture can be viewed in a relatively novel light. To me at least, it is an open question whether or not DSM-IV will change in any fundamental way in the face of calls to ameliorate its current cultural insensitivity (Hinton and Kleinman 1993). If it does not, it would be most interesting to read its penetration into other settings as a project of symbolic imperialism. Like any imperialistic venture, we would expect it to provoke interesting resistances and complex results that could not be reduced to a uni-directional reworking of local social worlds. Yet, like similar adventures of "Western" thought in the "non-Western" world, we would also expect to see

*real* local effects. Perhaps, twenty years down the road, we would indeed see fewer and fewer statistical spikes of "atypical" and NOS categories reported in some exotic settings throughout the world, not because an evil cabal of psychiatrists were deliberately distorting the data, but because the experiential grid upon which such categories were imposed had itself transformed under pressure of a movement of which DSM-IV had been a part. Indeed, we have seen something like this change in America in second generation Puerto Ricans having recognizable DSM-III-R "panic disorders" when their elders had the so-called culture bound syndrome *ataques de nervios* (Lewis-Fernandez 1992). What we would have in such instances is a sort of translation, to be sure one that was a result of the negotiations of unequals, as part and parcel of some aspect of life having actually changed. Just as, when certain Native American groups in the Northwest Coast began to potlatch with dollar bills instead of blankets and coppers, some strands in a meaningful web stretched but held their integrity and others frayed and changed, so too would aspects of our hypothetical DSM-X have subtly worked its way into meaningful local worlds.

I think that something like this sort of translation is currently occurring (or it is at least being attempted) in parts of popular "American ethnopsychiatry," to use Gaines' term, over the rigid biologization of categories of severe mental illness in their instantiation as social problems. Issues like homelessness, for example, are increasingly understood by some thinkers and policymakers to be driven predominantly by *intra-brain* processes. While at an some epistemological level, it may well be, following Gaines, that "folk" and "professional" ethnopsychiatry are ends of a continuum, and therefore "equivalent" in the abstract, in America, it is surely the case that resource disparities and cultural valuations of expertise amplify the influence of the professional side of this equation. For various reasons (including politically active non-government organizations like National Alliance for the Mentally Ill (NAMI), a *Reader's Digest* common sense vision is growing up around the proposition that the best way to attack, say, homelessness is through a combination of increased biological research to discover better drugs, a turning away from "ideologically driven" patients' rights groups to limit the right to refuse treatment, and a relative de-emphasis on solutions such as social spending to improve blighted inner city neighborhoods until the other two goals are accomplished (Isaac and Armat 1990, Torrey 1989). At this point, it is by no means clear how successful such a cultural project will be, but again, if we take the constructivist position seriously, we may well be witnessing the birth of one "reality" rather than another.

## CULTURE WORKS

This idea of a "reality project" leads us to perhaps the most important connection between the two volumes under discussion and my final point. Rhodes places the suggestive but enigmatic term "work" in her subtitle, while Gaines uses the seemingly more theoretical "construction" in his subtitle. Both terms suggest a building project, the development of something concrete. While there are many senses for such complex terms, there is a connection between them that I suspect will become an important avenue of further research, fruitful growth points budding off from these two books. In both these volumes, we are provided with detailed portraits of real social actors laboring on real social projects in which they have real stakes. This is a point that we cannot lose sight of. The notion of the symbol should not only convince us of the limited nature of any one "system"; it should also give us a sense of just how much is at stake for social actors within any particular one of them. Symbolic projects are by their nature serious ventures, often deadly serious ventures, and they generally have very non-trivial consequences. What we will probably develop on the back of these and other researches, then, is a sort of critical cultural constructivism, one that acknowledges the concept of the symbol as an organ of reality, and then worries itself about what that reality will look like for the social persons caught up within it. These two volumes show us that there is much work ahead of us to advance such a project.

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## NOTES

<sup>1</sup> We can complete this triangle of responsibility for various forms of irrationality with the late arrival of psychology in the waning years of the last century, a discipline which from the first exhibited a special interest in the thinking of children and women.

<sup>2</sup> The "colonial" world also included indigenous people in the United States. See Deloria (1969) and *The Indian Historian Press* (1973) for relatively early critiques of American anthropology in this vein.

<sup>3</sup> There are, of course, exceptions to such an overarching generalization, the most active academic psychiatrist in this vein being Kleinman (1988). Nonetheless, much of mainstream psychiatry seems to view both culture and history as more or less epiphenomenal veils over *real* disease processes. Eisenberg's rueful musing that a brainless psychiatry was quickly being replaced by a mindless one (1986) seems more not less true at present.

<sup>4</sup> This bizarre "ordered" quality to the harassment provided by bureaucratic structures interested in the unfortunate, often homeless, inhabitants of American inner-cities is also brought out by non-anthropological observers, such as Jonathan Kozol (1988).

<sup>5</sup> Gaines is also arguing against a line of cultural anthropologists who have accepted that



Western categories of severe psychopathology are relatively unproblematic (Edgerton 1966, Murphy 1976).

<sup>6</sup> There is an unfortunate tendency in parts of this volume to elide the differences (and the complex relationships) between cultural and national boundaries. Occasional conflation of this nature are almost inevitable in a volume this ambitious in scope. Nonetheless, some care must be taken neither to play down the internal complexity of national units, nor to miss potential similarities that may go across political boundaries. For descriptions of rather different institutions within "French ethnopsychiatry," for example, see Charuty (1985) and Jodelet (1989).

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