

**Key Concepts in  
Psychological Anthropology:  
An Encyclopedia**

Written by Students in

ATH 368: Key Questions in Psychological Anthropology

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## ***Introduction: Entering the Conversation***

Psychological anthropology is an exciting sub-discipline within anthropology, exploring the dynamic interconnections of individuals with the larger social milieu. People working within psychological anthropology delve into some of the most exciting and penetrating arenas of human life: identity and experience, human development across the lifespan, social relationships, human variability, mental health and illness, sensations and sensibilities, and the myriad processes through which people perceive, know, make sense of, react to, and engage with their worlds. The theoretical insights that have emerged out of psychological anthropology have been picked up widely throughout and beyond anthropology because these insights bring us closer to understanding and describing what living is actually like.

People who have contributed to the ideas, theories, and methods that form the backbone of psychological anthropology include some of the most brilliant, late, and great social scientists of the 20th century: Bronislaw Malinowski, Emile Durkheim, Sigmund Freud, Ruth Benedict, Walter Goldschmidt, Gilbert Ryle, Irving Hollowell, GH Mead, Margaret Mead, Clifford Geertz, Gregory Bateson, Anthony Wallace, Claude Levi-Strauss, John and Beatrice Whiting, Pierre Bourdieu, Jean Piaget, Frederic Bartlett, and Alfred Schutz, among quite a few others. And they are just the tip of the iceberg. Pick up any issue of *Ethos* or attend a panel of the Society for Psychological Anthropology (SPA) at a conference, and you will see an array of current scholars pushing the field forward in exciting and, at times, brilliant ways. It can be intimidating even approaching the field.

### **Psychological Anthropology as a Conversation**

Tom Weisner, a past president of the Society for Psychological Anthropology, told me once that the purpose of publishing scholarship is not to lengthen one's curriculum vitae. The purpose of publishing is to contribute to a scholarly conversation.

My initial reaction to Tom's idea was astonishment. I had always thought that psychological anthropology, like any discipline or subdiscipline, was a corpus of great thinkers, whose ideas one needed to understand in order to navigate through the massive river of scholarship without capsizing.

But a scholarly conversation is not as threatening and, I realized, a far more accurate description of any field or discipline. The published word is a reification of one scholar's ideas based on one body of research put in print so that people far and wide can engage with them. Psychological anthropology emerges equally in the panels at conferences, the brown bag seminar discussions, the reviews of books and commentaries on articles, and the play of ideas over a good meal or a glass of wine.

But when one walks up to any scholarly conversation, the first thing one has to understand is the language. Like any other area of scholarship, psychological anthropology uses its own vocabulary: concepts that have emerged over time, semiotically referencing certain ideas and perspectives important within the field. The

conversations often either use the vocabulary to make sense of new data or use data to refine the concepts. I tell my students that in order to really engage with psychological anthropology, they need to enter its conversations. And in order to enter the conversations, they need to understand its basic vocabulary.

### **The selections**

This online encyclopedia is meant to be a resource that throws wide the door of psychological anthropology, demystifying the vocabulary so that people can more easily engage in its conversations.

The concepts are ones that frequent contemporary publications in the field. Each time I teach my upper division course in psychological anthropology, I refine the list of concepts needing an encyclopedia entry. Students then write 2,000 word entries in a series of drafts. The entries describe the background or history of the concept in psychological anthropology as well as its current working definition's avenues for its current and future usefulness. The entries conclude with a list of related concepts and a bibliography.

These entries are written to become part of the public domain. All entries are accessible to students in the course from that point on in the semester as they venture into the conversations in the scholarship on a topic of interest to them for their research papers. However only the best entries produced by students each semester are included in this Encyclopedia as part of the larger public domain. While these entries are not perfect, but they are solid and useful for facilitating a deeper understanding of ideas and concepts in psychological anthropology.

This online encyclopedia is a work in progress, to which new concepts will be added regularly. And it is with special thanks to Brittany Speare for bringing this first edition to the public sphere through her careful copy-edits and digital computing work.

### **A final note to the reader**

We hope that you enjoy these entries, and find them useful in facilitating your own participation in the conversations of psychological anthropology. Please remember that the entries are not designed to provide an exhaustive review of the literature, but rather to highlight the semiotic attributes of each concept for the purpose of enabling participation in the conversation.

“Okay,” you might comment after reading these entries, “but could I really go to a panel, pick up an article, or walk up to a circle of psychological anthropologists and know what is going on?” Yes. You may not be able to catch onto everything, but you will have the background to generally make sense of what others are saying, ask intelligent questions and, it is hoped, start making your own contributions. More importantly, you would be welcomed into the circle.

Psychological anthropologists and other scholars I've met at conferences in adjacent fields such as cultural psychology and psychiatry, human development, and neurology are remarkable people, not least because they are more interested in getting their analyses right than in boundary maintenance.

I've considered myself a psychological anthropologist for more than twenty years, and for the last five years I have serviced the field in various capacities including committee work and book reviews editor for *Ethos*, the journal of the Society for Psychological Anthropology. And I've seen students' questions at conferences addressed with the same respect and interest as those of senior scholars. I've seen a neuroscientist-primatologist making comments on presentations by psychological anthropologists, and the room was hanging on his every word. I've participated in conferences on topics that were exciting precisely because they brought into focused conversations scholars from very different theoretical perspectives working with very different kinds of data: clinical physicians, biological anthropologists, neurologists, psychiatrists, linguistic anthropologists, and psychological anthropologists among many others.

I know psychological anthropology to be an open circle. I invite you to join the conversation.

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# COPING

*by Valerie Gascon*

5 April 2010

An individual's internal and external struggles that occur in specific cultural contexts can be made more manageable through the use of coping. People are touched by mental, emotional and physical illnesses and other kinds of challenges on a regular basis. The concept of coping is a way in which people in every society can better understand and overcome challenges that are specific to the definition of personhood of a specific society. By looking at individual difference, coping can be seen as a mechanism to define one's sense of personhood in a society where the expected roles and definitions of what it may mean to be normal have already been defined. By coping with and understanding differing epistemologies that dictate the way people act and think on a daily basis, an individual can be seen as an active agent of culture and society.

## **Madness and Coping**

By analyzing the history of the concept of coping, the evolving tension and struggle for power over one's life can become ever present and real. How one copes with life's struggles can be seen through how it colors a person's responsibilities, actions, emotions, and level of agency. In Foucault's book, *Madness and Civilization: A History of Insanity in an Age of Reason*, a historical perspective regarding madness and institutionalization is detailed. The emerging ideas of madness from the Middle Ages through the contemporary period explicitly show how society copes with those who seem unfit to partake in society.

Foucault's description of madness through different eras shows how society's ability to cope with uncertainty and its discovery and re-discovery of the concept of madness has changed in response to emerging ideologies regarding the idea of normalcy. In tracing the changing definition of madness through the years, Foucault shows the changing stories of madness that society uses to cope with its uncertainties. Coping is society's way of making that which is not clearly defined manageable and logical.

## **Coping and Personhood**

Coping is very important to a person's illness experience and healing process. In a contemporary look at social abandonment, Joao Biehl dissects an individual's life in Vita, an institution for the mentally ill. Patients of the institution who suffer from mental disorders must find ways to cope with their struggles (Biehl 2005:77). Biehl

describes how the people of Brazil believe that a person's worth is based on their ability to be productive in society (Biehl 2005: 47). Catarina, one of the residents of Vita, is a member of society who had a "fall from grace". The ways in which Catarina establishes personhood while living in Vita is seen as a life lived in juxtaposition to the societal definition of normalcy. Catarina shows her ability to cope with her personal struggles that are infringed by societal ideologies by thriving in Vita.

Catarina's social death consisted of her unlucky timing within the political system as well as her victimization by the family institution (Biehl 2000: 288). Catarina's illness renders her incapable of acting as a normal person in society. Her husband sees her as evil (*ibid.*: 286), and as

"solely responsible for her own abandonment, and not even a utilitarian ethics can be evoked: she is paying for her evil actions (such as hitting her disabled mother and burning her husband's documents), she failed to adhere to her pharmaceutical regimen, and she is simply outside the domain of rational thought" (*ibid.*).

The first way in which the family tries to cope with Catarina's outbursts and abnormal and abrasive actions is by medicating her. The medicalization of a disease is a coping mechanism which gives the individual and the individual's family a sense of power and control. This is an example of Gains' notions of medicalization. By naming a disease one is able to find the proper medications to subdue the symptoms that make the person unstable or unfit to reside in a public setting. Using medication to address a person's symptoms is a coping mechanism because the ending goal is to get the sick back to a place where they are able to function properly in society. But many medications treat symptoms and not the people themselves, especially in reference to psychological issues. Medicating Catarina is an example of her family's hope for her return to normalcy acted out through their attainment of drugs to try to help her.

Catarina's lack of progress with the medications leads to the family's next mechanism for coping with Catarina's madness; she is institutionalized in Vita. Her brothers suffer from the same illness but they are not neglected in the same way (*ibid.*: 284). It is the role of women in the society to take care of and tend to the men but men are not expected to do the same. This provides an example of how coping mechanisms can be culturally driven. Catarina is no longer able to tend to her defined roles as a mother, wife, sister, and daughter in society. Catarina's form of madness that is not helped by the medication specific to her symptoms leads to the next chosen coping mechanism by the family: institutionalization. The family takes responsibility off of themselves because this particular woman lacks the ability to fulfill her social roles even with the help of medications. The family sees no other possible solution or avenue towards healing.

Catarina has fallen from grace, experienced social death, and now lives in a zone of social abandonment. What is apparent through Biehl's description of Catarina's life in Vita is the creation of her personhood as a result of her chosen mechanism of coping. Usually through social death personhood is stripped from the sick individual. In her

place of death Catarina actually shows that she has acquired personhood (ibid.: 41). The occupants of Vita still have the “capacity to understand, to dialogue, and to keep struggling,” as Biehl puts it (ibid.: 52). This constitutes personhood; perhaps not on the level that she used to experience it but on a different level, on the level of the ex-humans who live in Vita. The story of those in Vita is a story of how many cope and survive with society’s fabrication of death (ibid.: 49).

### **Illness and Coping**

By taking a non-Western perspective on coping, one will find a completely different epistemology regarding causes of illness and avenues of treatment. The Sasaks of rural Indonesia implement epistemological beliefs regarding jampi into their system of treatment for the ill based on Dr. Hay’s ethnographic data (Hay 2009: 1). Jampi are “rotely memorized formulae that are central to medical practice among the Sasak of Indonesia” (ibid.). When an individual is ill, suggestions of what may be the cause of illness are given by family members, neighbors, and friends. After the cause of the person’s illness is identified, jampis are then recited. As Hay states, “People *acted* by remembering jampi” (2009:1), that is, “remembering the healing formulae of jampi is their local model for acting on the ills that threaten the lives of those they cherish” (ibid.: 3). Reciting jampi to cure an ill individual is the manifestation and realization of a person’s ability to act or have agency within a situation. Jampi can then be defined as a mechanism used to cope with an event, illness, or disease that has been made manageable and logical through the understanding and internalization of a particular epistemology. This is a one of many examples of how different cultures cope with life struggles through the use of socially legitimized practices of healing.

### **Coping and Everyday Practice**

Unni Wikan’s work in Bali details and dissects the meanings of everyday practices that pose challenges to individuals on a daily basis. People are differently positioned within the Balinese culture (Wikan 1990:23). Wikan states that,

“to analyze meanings and acts without reference to [a particular person’s viewpoint] is to miss the context from which they derive their impetus and for and to distort interpretations” (ibid.).

This is crucial because to understand how one applies meaning to an action or thought is dependent upon where a person is positioned within a society as well as what that position implies about their actions and words. A person’s ability to cope with their positioning within a society is manifested through his or her daily actions. Wikan’s primary consultant, Suriati, a Balinese woman, does not display grief or signs of mourning at the death of a loved one (ibid.). This is not because she does not feel any sadness over this death but because Suriati acts in a manner that has been culturally outlined by the society. She is a young, beautiful woman who is to show no grief at times of distress (ibid.). To cope with the despair, Suriati smiles and laughs “to divert attention away and focus it more on pleasurable activities instead” (ibid.: 26). This is an example of how a society provides individuals reasons for certain actions that must be performed in public and how it provides socially legitimized reasons for these actions at the same time. Suriati believes that she must put a smile on her face and laugh merrily because it diverts attention away from un-pleasurable activities. This is a

culturally constructed action that provides legitimate avenues for coping. For the Balinese coping is the daily struggle to decipher what is at stake and to act in a manner that upholds beauty and exquisiteness in the specific context of Balinese culture. The Balinese share unity in their culture but their individual lived experiences are testaments to how coping is employed to uphold the demands of socially constructed roles.

### **The Future of Psychological Anthropology**

The field or study of psychological anthropology serves as an example of coping in a way that is played out through academia. Bruner's "Culture and Mind: Their Fruitful Incommensurability" shows the tension and struggle at the intersection of anthropology and psychology. Our society's inability to fully establish either psychology or anthropology as the supreme explanation of what happens to us as human beings, as well as why, has been an ongoing struggle for years whose answer does not necessarily lie within one field. The dichotomy between culture and the mind can no longer go on as concepts that exist completely divorced from each other (Bruner 2008: 29). The studies of cognitive anthropology and psychological anthropology are examples of where our society is going with the concept in the future. The creation of fields such as these are our society's ways of coping with lingering questions that will go unanswered unless different fields of thought, such as these two, are somehow married; not completely abandoning their main principles but compromising ideas and intertwining them so that we may make better sense of what is normal and how we have come to be that way or not come to be that way. The creation and combinations of theories and ideas are our society's way of coping with the changing world and society. Because fields such as these evolve, it is certain that our society's way of coping with the unknown and unexplainable will evolve as well.

*Related Concepts: Agency, Epistemology, Experience, Knowing, Meaning, Narrative*

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# EMOTION

*by Alex Underwood*

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## **Introduction to Emotion**

Emotion is something that, as humans, we experience on a daily basis. Constantly affecting our actions, our emotions can govern how we act and even how we perceive things. Our state of mind and inner feelings can even determine who we are. According to the Oxford English Dictionary, emotions are “a mental ‘feeling’ or ‘affection’ (e.g. of pleasure or pain, desire or aversion, surprise, hope or fear, etc.), as distinguished from cognitive or volitional states of consciousness” (Oxford English Dictionary 1989). Emotions in this sense are beyond being merely physically conscious, yet they can cause numerous physiological responses affecting heart rate, facial expression, and how we react to certain situations.

## **Key Discussion**

Emotion, like many psychological concepts, had not been studied much until the start of the twentieth century. At this time and as recounted by Ekman (1970), emotions were presumed to be something inside of the body, and inherently biological. Darwin was among these scientists, and first conducted research on facial expression (Ekman 1970: 8). He applied his theory of evolution to this subject by reasoning that it would be useful to have recognizable signs of our inner feelings. He eventually concluded that these emotions are probably biologically based. Later Klineberg suggested that, while there may be some common expressions, the emotions expressed through the face are put there by culture, and the notion that culture assigns the signals of emotion has become heavily influential. LaBarre took this further by denying that there is any kind of inherent set of emotional gestures, and Birdwhistell concluded from his research that there are probably no such universal facial indications of emotion (Ekman 1970: 8).

However, Ekman in “Universal Facial Expressions of Emotion,” focuses on the connections between emotion and facial expressions (Ekman 1970). How is emotion expressed in different cultures? Are there certain shared expressions common throughout these cultures?

Ekman and Friesen present three key factors to consider when using anthropological research to evaluate facial reactions:

*Evoking stimuli:* Certain things may be associated with a particular emotional state, but might not be related. The example given involves the analysis of a funeral (Ekman 1970: 9). What this ritual actually entails is culturally defined,

and thus might differ from group to group. The Western world associates funerals with sorrow, but it could have an entirely different meaning elsewhere in the world.

*Display rule:* This states that there are many different angles and facets that come into play when people are dealing with their emotions (Ekman 1970: 9). There are four reactions: to suppress, intensify, attempt to appear neutral, or to simply block the emotion as much as possible. These culturally influenced reactions to emotion greatly affect the facial expression seen on subjects.

*Behavioral consequence:* This is simply the resulting action of a facial expression. For example, someone may appear sad and leave the room. This movement must be taken into account (Ekman 1970: 10).

To try to provide evidence to support their claims, Ekman and Friesen went about conducting research on different groups of people. At first, they asked college students from the United States, Japan, Brazil, Chile, and Argentina to associate emotions with pictures of facial expression, in an attempt to see if there was any common ground. For twenty-nine out of the thirty of the pictures shown, there was a nearly complete agreement on the emotions being shown (Ekman 1970: 11). However, the authors are quick to point out that the connections between these countries are pretty strong, as each student has experienced similar Western television, movies, and other media and culture through globalization. (Ekman 1970: 11).

The second study sought to improve upon this weakness by studying a tribe in the Southeastern Highlands, New Guinea which has had extremely little contact with the outside world (Ekman 1970: 11-12). These tribe members were also asked to associate an emotion with each image. Ekman found there to be an agreement with the previous study: there was a lot of common ground between the results of this New Guinea tribe and the rest of the world. The only noticeably different emotion that was often picked with another image was fear, which appears to be more culturally enforced.

The last study examined just Japanese and U.S. college students. These students were shown a film that was intended to evoke a certain emotion through the imagery being shown. Despite the communicative ties between these two countries, the cultures remain very different. And, although we can never be sure what effect a video will have on someone, it is one realistic way to get reproducible and consistent results. The correlation between these two groups came out to be 88% (Ekman 1970: 12). Next, the research team hired a native from each area to give a brief introduction to the film and remain in the room with fellow peers, changing it into a more cultural environment. These results came back much differently than expected. There was found to be much less correlation between the two groups, as Japanese tend to mask their emotions more (Ekman 1970: 12).

Alexander Hinton's article "Why Do You Kill?" examines the Khmer Rouge genocide that occurred in Cambodia, asking: What causes genocide? And What cultural factors encourage it? Hinton talks about the idea of the Cambodian "face," which is the image projected to society. This face is based on the perceptions of others, and plays a large role within the guilt and coping of those who have committed

genocide (Hinton 1998). Although not directly related to studies on emotion within facial expression, the idea of a “face” being used to suppress and control emotions is worthy of noting.

Hinton’s other works include “Biocultural Theory of Emotion,” which serves to gather his extensive research on the cause of emotions and their resulting expressions (Hinton 1999). Emotions are tied to deprivation, neglect, trauma, and loss which can become serious problems if they are disregarded. However, emotions can also be motivational and organizational. They can guide us in processing information. For example, if one is feeling mad at someone, he or she is more likely to pick up on negative characteristics. Emotions can change what we notice, the speed and quality of our learning, and what we remember. Once again, if we let our emotions influence our views on other people or other things in general, it will affect the way we not only interact with them, but also how we see them. In this way, emotions can act as mediators and products of the interplay between person and context.

Among the many authors cited, Lazarus made the important distinction that that science-oriented biologists tend to focus on finding universals within expressed emotion, while anthropologists and other social scientists tend to focus more on the learning aspect, believing these expressions to be culturally influenced (Hinton 1999). However, many cultural constructivists and those focused on biological explanations qualify their views, some distinguishing between cognition and culture. Ekman, for example, does this with his notation of evoking stimuli, the display rule, and behavioral consequences (Ekman 1970: 9-10). There are few who view emotional responses as entirely embodied or entirely constructed.

Tanya Luhrmann sees emotion as a constant influence in the context of the medical field. In her book *Of Two Minds*, Luhrmann discusses what she calls “emotion-motivation-behavior bundles” (Luhrmann 2000:71-83). These are instances where emotions interact with motivations, which produce a different behavior. As Hinton discusses in his article, emotions influence how our brain organizes information, and how we perceive certain situations (Hinton 1999). Professions within the medical field have special relevance to these emotion-motivation-behavior bundles because they are the ones diagnosing and prescribing medications to others. If emotions play too much into their work, people could be misdiagnosed or given the wrong medication, leading to serious consequences. Once again, issues pertaining to emotions are of the utmost importance due to the potentially serious outcomes that could result.

The idea that emotions can be so influential as to change our pattern of actions and responses has been documented before. In Briggs’ book *Inuit Morality Play*, she closely examines the socialization process of a three-year-old Inuit girl named Chubby Maata. Briggs, who lived with and studied these Inuit, carefully documents this journey through the use of what she calls “dramas.” These small events provide a basis for her analysis. One chapter (“I Like You, I Don’t Like You”) describes several dramas involving Chubby Maata liking and disliking things. In some cases, she’ll tell Briggs herself that she likes her, yet in others she screams and directly states “I don’t like you” (Briggs 1998: 158-171). This childish exclamation of emotion is just one small example, but it shows how variable our opinions are of one another. Much like Hinton’s article, “Biocultural Theory of Emotion,” our emotions act as a filter on our actions, affecting

our actions towards each other. We may feel one way about someone or something in one instance, but completely different in another.

Carol Worthman, in her article “Cupid and Psyche: Investigative Syncretism in Biological and Psychological Anthropology,” takes this study on the influence of emotion further, by asserting that experience shapes the way our brain works (Worthman 1992). We tend to get into patterns of thinking, which heavily influence our actions. For Worthman, emotions are physiological states that affect cognition and behavior (Worthman 1992). Emotions are produced because of schemata but are not solely biological or psychological. It is a mix of the two, working together to influence our thoughts and actions.

So, then, what are emotions exactly? While it will certainly depend on whom you ask, there seems to be a general consensus that emotions are separate from our basic, mechanical cognitive processes. However, there appears to be some biological influence, as hormones and stimuli can shape how we feel. To what extent does culture influence emotion? There does not seem to be an easy answer. Culture can define how you act in a specific situation created by society, but it is still debated as to whether or not they can influence emotions themselves. Emotion itself heavily affects our actions. Depending on our emotive state, we may act or respond differently in a given instance. While these topics may not give such an exact definition, they attempt to provide an explanation of what emotions means to us as humans.

## **Conclusion**

Emotions are important because they have so many different implications. Why do we do the things we do? Our emotions can organize and focus our thoughts, thus manipulating our actions. Why do we feel the way we do? Why do we love and hate? Do our emotions constantly influence our state of mind, or are they sporadic influences? These are just some of the questions waiting to be explored within psychological anthropology. Barriers such as inconsistencies within test subjects and the difficulties of indexing one’s emotion remain issues. However, research on issues such as facial expression has evolved heavily in just the past few decades, with the work of authors like Ekman. Emotion is a very debatable and subjective subject, but studies on these physiological responses attempt provide what they view as quantitative data. The debate on whether or not these responses are appropriate indexes or universal still rages on. The applications of emotions are being further explored today, with the more recent work of authors like Tanya Luhrmann exploring how emotions can affect those within the medical profession (Luhrmann 2000). There has been a lot of study on how influential emotions can be, as seen in the work of Luhrmann, Briggs, Worthman, and Hinton. This array of subjects within the field of emotions, along with the mix of conceptual work and detailed studies should hopefully provide useful and exciting ideas in the future.

*Related Concepts: Coping, Dramas/Plots, Experience, Identity, Individual, Interpretation, Perception, Person, Self, Subjectivity, Well-being*

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# GENOCIDE

*by Amber Herald*

5 April 2012

## **Definition**

Throughout history, instances of genocide - from colonialism and slavery to World War II to the 1994 Rwandan Genocide - depict the violence that humans are capable of imposing on others. But what makes such tragic incidents happen? What allows one human being to treat another human being with a lack of respect or empathy, degradation, and negligence for equality of life? Dehumanization is a crucial concept to shed light on such defining questions. As defined by the Oxford English Dictionary (2011), to dehumanize is "to deprive of human character or attributes." Thus, dehumanization lowers the person's status to that of an animal or object. The concept of dehumanization is a building process, not only in its conception in society but in its conception as a concept.

## **History**

The word dehumanization is "new" to psychological anthropology; however, characteristics of dehumanization can be traced back to the mid-1900s. The recognition of an "us" and an "other" category from stigmas with the mentally ill and drug addicts starts the process of dehumanization (Gonfein 1999). In being cognizant of two categories, differences in cultural values are constructed, allowing ideas of normalcy to form. Stigma was further examined by Robert Edgerton, a psychological anthropologist, who argued that "the label of mental retardation...lower[s] one's self-esteem to such a nadir of worthlessness that the life of a person so labeled is scarcely worth living" (1967:145). Here Edgerton demonstrates the impact labels, which create groups, have on an individual and their worth, separate from the group identity.

The evolution of "us" and "other" groups led to the "other" being classified in one category as animalistic. This category, driven by colonialism analysis, with connotations of Indians as wild, savage, and ignorant, led them to become inhuman in the eyes of "civilized" Europe and indexed an animal nature implying a lower level of intelligence (Taussig 1987). Through the work of categories, the concepts that would form one step in the process for dehumanization were established.

These early ties to stigma would change in the 1980's as dehumanization became viewed as an intentional process (Hinton 2002; Taussig 1987). The process is modeled from studies on genocide and is broken into five steps (Hinton 2002: 15). First, "extreme socioeconomic upheaval" in a society allows one group to take power; second, after taking power, "structural changes" are implemented from prior religious to

government institutions; third and fourth, structural changes lead to “undermining traditional prosocial norms and moral restraints” as well as “institutionalizing structural divisions” between groups such as privileged and nonprivileged; fifth, divisions are intensified by “effective ideological manipulation” (Hinton 2002: 15). This process which enables dehumanization is deemed as priming for potentially extreme acts such as genocide, and is the model still currently used (Hinton 2002).

The concept of dehumanization is just beginning to be written about in psychological anthropology; however, dehumanization is often replaced with inhuman, subhuman, or ex-human (Biehl 2005; Hinton 1998; Hinton 2002; Taussig 1987). In other disciplines, particularly psychology, dehumanization is also studied. In psychology, dehumanization is often tied to empathy and the biological processes in the brain. Interestingly, at this point in time, empathy is not a focus of study for psychological anthropologists in relation to dehumanization, leaving great potential for expansion. Because empathy is a fundamental part of dehumanization from a psychological standpoint, its relation to dehumanization will be discussed as an avenue to show the need to consider empathy in the process of dehumanization from the psychological anthropologist’s perspective.

### **Approaches to Understanding Dehumanization in Anthropology**

Dehumanization, while associated with genocide and mass violence, exists in many daily aspects of society. As the concept has evolved, two facets of dehumanization have emerged: animalistic and mechanistic. Both are directly labeled with the very words the dehumanized and dehumanizers use to describe their feelings.

#### *Animalistic*

“...bodies of men who Gnade [German commander] forced to strip and who were beaten as they crawled on the ground like animals”  
- German Soldier (Hinton 1998: 14)

Animalistic dehumanization “means denying to other people essential qualities that separate men from animals, such as morality and culture” (Lammers and Staples 2011: 113). In animalistic dehumanization, people are often represented as an animal (Haslam 2006). Depictions of animalistic dehumanization are evident in the portrayal of the Tutsi of Rwanda as cockroaches by the Hutus and African American portrayals as monkeys by early colonizers, portrayals that hold relevance through today (Fisiy 1998: 21; Eberhardt 2008). Transferring the image of an animal to an individual further separates them as “others” different from the “us”. This is a critical step that delineates human from non- or sub- human. In Biehl’s *Vita*, animalistic dehumanization is clearly demonstrated in *Vita*; Catarina calls herself an “animal” while the staff describe the “*abandonados*” as “animals” (Biehl 2005:41).

#### *Mechanistic*

“In normal reality, the body surfaces – the skin, the hands, the feet, the eyes, the face, the clothing – convey personhood...In the laboratory, the hands, the feet, the head remain, bound, and the torso and limbs are the object of sustained attention” (Good and Good 1993: 95)

The contrast to animalistic dehumanization is mechanistic dehumanization.

Mechanistic dehumanization is “denying to other people those qualities that separate men from machines, such as interpersonal warmth, emotions, and individual agency” (Lammers and Staples 2011: 114). This form of dehumanization is commonly seen in the medical profession which Byron Good and Mary-Jo Good uncovered in their work with medical students. Students learned to view the body as a mechanism of working parts, tissues, and molecular structures. One student even commented, “I can’t help but think of us as machines” (Good and Good 1993: 96). The student has objectified the body to mechanical pieces, distancing himself from an individual’s humanness.

Luhrmann’s work also illustrates the mechanistic view from the flow chart to identify an illness to the use of psychopharmaceuticals to “fix” a problem (Luhrmann 2000). From the moment a patient is diagnosed in their sole appointment, their trajectory becomes fixed and prescriptive (Luhrmann 2000). This system functions as a machine, dehumanizing patients to cogs and bolts.

### **Motivations Behind Dehumanization Processes**

Dehumanization is linked to a number of causes ranging from biological to social. However, three motivations appear to have the greatest significance: coping, social groups, and empathy.

#### *Coping*

Dehumanization is often employed as a coping mechanism predominantly used by doctors and family members. Doctors dehumanize for two main reasons - invasiveness and responsibility (Good and Good 1993). In the case of the medical students studied by the Goods, students found it difficult to care for patients, citing feelings of invasiveness to the patient’s privacy when asking intimate questions (Good and Good 1993: 95). In order to relieve this feeling, students had to “restructure” the patient as an object, a mechanism of parts that contained a head (Good and Good 1993: 95). Similarly, in Biehl’s *Vita*, dehumanization alleviates a sense of responsibility for the “individuals and institutions from the obligation of supplying some sort of responsive care” (Biehl 2005: 41).

Likewise for family, as evidenced by Biehl’s *Vita*, dehumanization “played an important role in justifying abandonment” (Biehl 2005: 52). It further allowed the family to continue in their daily routine without “guilt” by acting as a “distancing device” (Biehl 2005). Coping is one functional use that provides motivation in the dehumanization process.

#### *Social groups*

Humans are social beings that seek to create connections with social groups. One suggested cause of dehumanization comes from the idea of group differences. Alexander Hinton suggests in his research on genocide that “constructed groupings constitute a crucial part of human identity” (2000: 9). These groups can only create and retain meaning to their individuals if there is an “other” group for comparison in values, appearance, socioeconomics, religion, etc.; these “other” groups establish ideas of normalcy for the “us” group (Barth 1969: 15).

The “we,” or in-group, feels removed from the other by separating from the “other,” or out-group, consequently lowering the “other” in status. This was the case

with colonization where the “we” was traditionally Europe while the “other” was the Indian, characterized as “backward” and “savage” (Hinton 2002; Taussig 1987). Furthermore, by applying negative ideas to the “other,” an increase in “one’s own self-worth and moral superiority” may occur (Hinton 2002: 9). This was evidenced when “Nazi science and propaganda created new mechanisms of identification that bound German citizens together, and against outsiders, in a state of moral blindness,” demonstrating the power a social group can create as a motivational force for dehumanization (Biehl 2005: 16).

Another aspect that Hinton suggests to explain the violent acts typically associated with dehumanization are those that rely on social structure. Groups may use violence “as a reaffirmation of group boundaries and differences” (Hinton 2002: 14). Connections are created between individuals who partake in shared experiences, solidifying the acceptance of the group’s acts based on shared values.

Values attributed and sought after in a society further foster environments capable of producing dehumanization. In many societies, productivity is tied to value of worth. Phrases such as, “My brother wants to see production, he wants one to produce,” explicitly highlight this idea (Biehl 2005: 96). This cultural value of production led those who were not able to contribute to be subjugated to a dependent role that would lead to their dehumanization. Reason and thought are also valued traits. Communicating thoughts to others is indicative of humanness. Thus, when people became too dependent and were viewed as having lost thought, others were allowed to impose their viewpoints on them (Biehl 2005; Desjarlais 1999). Values consequently play a significant role in the acceptance and process of dehumanization.

### *Empathy*

In psychology, a lack of empathy is related to dehumanization (Haslam 2006). Empathy is the active identification of others’ thoughts and feelings and an appropriate response to those thoughts and feelings (Baron-Cohen 2010: 16). When empathy is “turned off”, humans focus solely on themselves, the “I”, and view all others as things (Baron-Cohen 2010). This “turning off” can occur in any society or any individual for a moment to a period of time (Baron-Cohen 2010). Certain traits—psychopathology, narcissism, and autism—display zero empathy on the empathy scale from 0 - 6; the former two show zero-negative empathy while autism is linked to zero-positive empathy (Baron-Cohen 2010). Zero-positives have problems recognizing emotions, while zero-negatives demonstrate a lack of moral concern; both however, are described as mechanical (Haslam 2006). Thus, empathy plays a critical role in distinguishing humans from objects, limiting dehumanization.

### **Future of the Concept**

Dehumanization can help shed light on the following questions: How does historical knowledge of cultural values play into whom and when people become dehumanized? How does dehumanization lead to political and ethical laws in medicine? How does gender affect the rate of dehumanization? How is dehumanization reversed, and how is rehumanization implemented in societies? To what extent do the ideas and processes of dehumanization come from the Western perspective? How is dehumanization appropriated and portrayed in the media? Who should be held accountable for actions of dehumanization? Can dehumanization be avoided if it is tied

so closely to identity, which itself is constructed by social groups? At what point can a decision of dehumanization be made about an individual or group?

While the aforementioned questions are key for further study, the most pressing question is that of Hinton's model for the process of dehumanization. Hinton's model, in my research, was the sole model for dehumanization. This leads to numerous questions, such as: Is this model applicable to all instances of dehumanization? Is the model flexible or static? Must all stages occur? And finally, is there a better model that could be constructed? With further research on empathy, the argument could be made that Hinton's model needs to be refined and may not be conducive to everyday instances of dehumanization that occur in less violent ways than genocide.

Dehumanization is a complex concept; it deals with the harsh realities of human actions that are deemed incomprehensible and yet, more common than realized. Dehumanization is a child in psychological anthropology whose potential is just emerging.

*Related Concepts: Agency, Belonging, Coping, Deindividuation, Infracommunication, Empathy, Genocide, Perception, Self/Personhood, Stigma, Violence*

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# IDENTITY

*by Brittany Spear*

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The general Western notion of identity correlates to the idea of a unified, cohesive subject (Holland 1998: 7). From this notion, Westerners obtain the idea that identity is the same thing as self in that identity is a representation of who people are inwardly and how people see themselves. However, this general notion is misguided, especially from a psychological anthropology standpoint. Though the concepts of identity and self, self-representation, and personhood are related, they are inherently different concepts that connote different aspects of social interaction and understanding. Identity can be understood as something that “combines the intimate or personal world with the collective space of cultural forms and social relations” (Holland 1998:5); it is personally, culturally, and socially constructed through various factors that are either assigned or assimilated. Identity can be seen as a categorization or a framing of a person (Desjarlais 2000: 469) rather than the “intrinsic capacities and processes that presumably shape a person’s actions” (Holland 1998: 19) that are the basis for self.

Through the dialogue of psychological anthropology, identity can be broken up into two types: personal identity and cultural or social identity. It should not be mistaken that these types are mutually exclusive though; personal identity and cultural identity can be seen to weave with each other at various moments within a person (Worham 2004, Lester 2005). Personal identity aligns more closely to the concept of self in that it involves how a person views himself and what traits or expectations he applies to himself, rather than to a group of people. This type of identification is perpetuated through individuation efforts at larger social levels, creating “person-specific legal and administrative identities” through products like identification cards (Estroff 1989: 192). Cultural identity, inversely, heavily deals with a group mentality and understanding of expectations and traits attributed to the group identity, creating a group affiliation (Barth 1969: 11).

Barth sees identity as a group association exhibited by physical appearances and being a certain kind of person (1969: 14). This conception falls in line with the cultural identity type, as it discusses the creation of identity by ethnic or cultural lines. Ethnic groups are seen as one of the initial frames by which people identify themselves and others and as a “unit which rejects or discriminates against others” (Barth 1969: 11). This discrimination is key; it highlights the differences between identity groupings and shows how the construction of social hierarchies begins. A person’s ethnic/ social

identity limits the person to the categories and expectations of his assumed identities (Barth 1969: 17). These constraints are absolute, as it is very difficult for a person to move outside of his social identity, particularly when it is dictated by physical appearances; social identity becomes an “imperative status” (Barth 1969: 18). A social identity constructed by ethnic or racial boundaries is seen as permanent; while there are some negative connotations with this idea of permanence, such an identity allows for social understanding of who a person can and can’t interact with and how a person should conduct himself with a person within his identity and outside of his identity. The use of this cultural identity and the process of identification in general are integral to effective socialization, particularly between differently identified groups (Barth 1969: 14).

Twenty years later, the analytical frame opens more to the personal identity type, though still evoking references to cultural identity. The question of “Who am I?” comes up, along with the realization that who one can be is heavily influenced by other’s perceptions and various social factors (Estroff 1989: 191). Amongst schizophrenia patients, Estroff notes how the disease is “joined with social identity and perhaps with inner self” (1989: 189), tying the social conception of schizophrenia to the personal experiences of the disease. As the disease transforms how the patients are able to interact with the world, their conceptions of self and how they see themselves interacting with the world evolves and changes, rarely for the better. This identity with which they interact with the world reveals how important a sense of identity is in relation to other people (Estroff 1989: 192). In this frame, a schizophrenic identity is similar to an ethnic or social identity in that it classifies a marked and categorized “other” complete with traits and expectations. The patients are expected by the “others” to learn how to navigate this new identity while shaping and transforming a new personal identity and sense of self based off of this general social identity (Estroff 1989: 189). As the patients are further removed from the old processes of their lives, it can be seen how much of their previous identity was “compiled and derived from [social] roles such as their career, their education, and their family” (Estroff 1989: 194-195). Without these social roles playing a prominent part in their lives, the patients must find new factors and bases from which to build a new identity.

A decade later, Holland takes the concept of identity even further down the personal identity type route. Holland describes identities as “psychohistorical formations that develop over a person’s lifetime” (1998: 15), reflecting a strong pull towards identity influencing factors of self. These psychohistories convey identity as a social product: the identity is based on all the factors and influences that a person imbeds or is exposed to in his life, both inside and outside of his control (Holland 1998:5). Identities are always forming and can be seen as self-understanding (Holland 1998:8) in how they provide fodder for which to base the “intrinsic capacities and processes” that mold a self (1998: 19). In relation to cultural identities, Holland reframes the definitions put forward by Barth almost thirty years previously, with Holland redefining cultural identities as “identities that form in relation to major structural features of society like ethnicity, gender, race, nationality, and sexual orientation” (1998: 7). These cultural identities that are formed can be embodied or imposed, depending on the socialization processes involved in a person’s acceptance of their cultural identity (Holland 1998: 11).

In 2000, Desjarlais addresses how homeless people, when begging for money, must assume a certain identity that evokes sympathy from a crowd; “the trick was to imitate the heartfelt misfortunes of homelessness without sparking sentiments of disgust and horror” (Desjarlais 2000: 477). Though these characteristics may not be part of what homeless people would like to assume as part of their personal identity, in order to receive the money they desire they must relinquish themselves to the stereotypes and standards that society put up as part of the homeless social identity. This understanding of homeless people’s manipulation of their identity to the social world shows an agency that lets them affect the world around them, even if it means subverting their personal identity to a standardized cultural identity. Identity, particularly cultural identity, is seen as similar to a characterization or a framing (Desjarlais 2000: 469) in how the traits and expectations associated with a cultural or social identity can encompass an outsider’s understanding of a person. For these homeless people, this totalistic impression of the social identity they manipulate in order to get things they want or need from the rest of society (Desjarlais 2000: 473) works both in their favor and to their detriment. When the expectations of the social identity evoked responses contrary to personal desires, the homeless people were forced to still comply with the expectations or face the dissent of the general public. Seeing a person outside of the constraints of his social identity, particularly when he is a stranger, makes other people uncomfortable and feel moved to put the person back into the context of their social identity, as the constraints are absolute (Barth 1969:18).

Wortham (2004) twists together the concepts of personal identity and cultural identity, showing the combination and reflexivity of these two types. Wortham echoes Holland (1998) in saying that “individual identities exist only in social contexts, and any study of classroom identities must attend to social categories and processes” (2004:164). Social identity becomes indexed again as a category or frame of reference in which to put a person (Wortham 2004: 166, Desjarlais 2000: 469). As Wortham follows the classroom conception of Tyisha, the “Disruptive Outcast” (2004: 174), it becomes evident how the influences of her classmates and her own actions worked together to create her “classroom identity”. Wortham notes how the identity of the “disruptive outcast” had been created before Tyisha’s actions and was recognized by Tyisha, her classmates, and her teacher. This categorized identity included characteristics such as being disruptive in class and arguing with the teacher, and showed how identities are rarely uniquely created, but are “rented categories from society” (Wortham 2004:167).

Cultural identity and personal identity effectively intertwine in the context of the postulants of the Siervas convent. Through the postulants’ enculturation into Mexican society since their birth, they have grown to associate Catholicism with “Mexicanness,” a cultural identity, and “religiosity...is seen as both a function and a barometer of gender (the proper performance of gender roles, particularly femininity) and national identity (the preservation of a sense of Mexicanness in the face of external cultural influences” (Lester 2005: 64). As Mexicans, the postulants are expected to perpetuate this national identity in any way possible. With Catholicism as a trait of “Mexicanness,” the religious route is open to girls who feel a personal identification with the religious aspects of their Mexican cultural identity. They are able to act within the limits of this category while still pulling out the parts of the cultural identity that are personally

pertinent. When the postulants enter the convent, they transition from being only Mexican citizens to ladies following a religious calling. The postulants become part of a new community and must then accept a new cultural identity within the framework of the society of the convent (Lester 2005: 109) as it relates to the outside world. The new identity as a nun that they are developing is both cultural and personal; the postulants are expected by the outside world to adopt the traits and values associated with being a nun, while the postulants personally embody and adopt their own, and the convent's, conceptions of what being a nun means (Lester 2005).

Currently, the concepts of personal identity and cultural identity are still in effect in psychological anthropology discourse. The general idea of cultural identity is that cultural identity relates to social groupings, defined by ethnic, religious, or lifestyle factors and that the people who adopt a particular cultural or social identity are expected to perpetuate the traits associated with the cultural identity. Personal identity relates to how much, and what parts, of these cultural identities are embodied or taken closer to the self. Personal identity reflects how a person sees himself interacting with the rest of the world and what he thinks his place in the world is.

The concept of identity will continue to be investigated, particularly in the frames of personal identity and cultural or social identity. Such research will work to combat the general Western notion of identity that makes identity a synonym to self. In the future, psychological anthropologists will have the chance to further investigate why people decide to create new social identities for themselves, like with Lester's postulants and Wortham's Tyisha, and leave their old ones behind. The relationship between personal identities and social identities has yet to be thoroughly explored, though Wortham and Lester start the discussion of intertwining the types. Though the types are distinguishable, they work together to create multi-layered understandings of how people navigate through the social world.

*Related Concepts: Agency, Categorization, Embodiment, Individualization, Self, Self-Representation, Socialization, Perception, Personhood*

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# INTERNALIZATION

*by Sarah McKasson*

19 April 2010

## **Introduction to Internalization**

One process that psychological anthropologists explore is how individuals become enculturated, or how they reflect and recreate cultural knowledge. For example, Jean Briggs looks at the socialization of a young Inuit girl, Chubby Mata, who learns cultural knowledge and morality by internalizing the “dramas” that transpire in daily situations (Briggs 1998: 205). Throop (2003) summarizes the term internalization to be: the methods in which an individual inscribes cultural contents in their mind and bodies (Throop 2003: 124). Therefore, internalization is not merely learning cultural knowledge like the terms socialization and enculturation suggest; instead, internalization is the process of embodying cultural ideologies. Therefore, Chubby Mata is able to understand Inuit morality, or what it means to be “normal”, because she becomes attached to salient societal values.

For instance, Weisner (1998) suggests that daily routines or “cultural pathways” must be integrated, coherent, and emotionally engaging to ensure a child’s well-being (Weisner 1998: 71). However, if these pathways do not meet all three criteria, then a child’s development will be problematic, which will inevitably lead to a consequential adulthood (ibid: 70). In essence, “cultural pathways” are tools that facilitate internalization because they teach children cultural knowledge. Therefore, if Chubby Mata successfully learns these pathways as a child, it will lead to the embodiment of valuable cultural ideologies; by embodying valuable culture ideologies, Chubby Mata will be considered a normal member of society.

In summary, internalization is the processes of recognizing, adapting, and attaching to cultural knowledge, where an individual’s ability to attach demonstrates their cultural competence and normality. Consequently, without proper processes of internalization, an individual can be seen as “abnormal” because they are unable to embody the ideals of their community.

## **The History of Internalization**

The Scottish philosopher, David Hume, was the first thinker to understand the concept of internalization. The book *A Treatise of Human Nature* connects the notions of ideas and experiences, stating that all human ideas are received from the senses. Hume asserts that all of our knowledge is based on our experiences. Although the term “internalization” was not coined in the 1700’s, Hume believed that personal experience

is responsible for our understandings of the world. To Hume, the mind naturally makes associations between ideas that are similar in context, explaining why individuals can visualize particular events that may have not been directly experienced (Robinson 2000: 35). Hume's description of knowledge acquisition can be related to today's notion of internalization because it focuses on the connection of similar experiences and ideas.

The pioneer of modern psychology, Sigmund Freud, rarely used the word "internalization;" instead, he often referred to identification, which is the process of internal and external forces impelling a child to mimic the characteristics of the parent (Bronfenbrenner 1960: 22). In a second analysis of identification, Freud described a young boy who acted like a kitten by crawling on all fours and refusing to eat at the table; Freud identified this behavior as a product of "mouldings one's ego after the fashion of one that has been taken as the model" (ibid: 22). From this description, Freud's notion of identification would encompass the psychological anthropologists' definition of internalization, where an individual learns to embody certain cultural models from their surroundings.

In the book *Culture and Experience*, Hallowell (1955) notes two different types of events: those that happen "in the mind" and those that happen "in the world." From these two types of events, an individual is able to condition their being to meet cultural expectations (Hallowell 1995, Throop 2003: 115). Hallowell's notion of events can be interpreted as processes of internalization, where events experienced mentally and physically develop an individual's understanding of cultural knowledge.

### **The Varying Conceptions of Internalization**

Throop (2003) summarizes that internalization to Melvin Spiro is rooted in agency, which leads to the variability of internalization processes. Individuals are active agents in the internalization process and because of personal agency, cultural knowledge is internalized differently (Spiro 1997, Throop 2003:109). Therefore, according to Spiro, the individual determines the importance of cultural ideologies; some forms of cultural knowledge may be "inconsequential clichés," whereas others are internalized so deeply that they are integrally linked to an individual's sense of self and worldview (2003: 11).

For example, in the ethnographical account of the Inuit, Jean Briggs (1998) studies how individuals are socialized and how they become attached to cultural knowledge. However, Briggs notes that there is not a singular meaning to a drama; instead there are "multiple levels of recognition" (ibid: 13). Chubby Mata is able to consciously choose if she wants to be a 'good baby' or a 'foolish baby' and thus is a contributor to her internalization. Unlike socialization, which is the process of simply learning cultural competence, the processes of internalization lead to cultural attachment. Through personal agency, Chubby Mata embodies a certain cultural ideology that becomes salient to her personhood.

Spiro (1997) asserts that internalization is a combination of biology and psychodynamic experiences. For Spiro, internalization is not based upon the common conception of *tabula rasa*, but instead has a "pre-cultural" (i.e. biological) component which influences the acquisition of cultural knowledge. Spiro's theory of psychological

pre-adaptation states that 'pre-culture' allows an individual to: "determine the extent to which the internalization of cultural ideas, beliefs, values, norms, and rules is facilitated or impeded" (ibid: 72). Therefore, according to Spiro, Chubby Mata would have a predisposed biological mechanism that allows her to consciously choose how to interpret these dramas.

In a similar manner, Briggs (1998) concludes that internalization cannot be generalized, but instead is about processual learning, or the continual interpretation of cultural knowledge. According to Briggs, culture is emergent, where person and culture create each other (ibid: 207). Therefore, internalization is dependent on particular individuals and their personal life histories (ibid: 2). Furthermore, Briggs notes that answers such as, "because you are a baby" are intended to make children self-conscious of their behaviors and to bring awareness of social correctness; this moral awareness is to encourage children to become competent Inuit adults (Briggs 1998, Throop 2003:117). Likewise, in Hollan's model of internalization, he considers the dynamic relationship between human awareness, experience and social interaction (Hollan 2000, Throop 2003: 123). Both Hollan and Briggs credit the interconnectivity of the conscious and unconscious, for it's not either-or; instead, internalization is a fluid process.

One of Spiro's students, Gananath Obeyesekere, discusses internalization through his term "work of culture," which states that internalization is a mode of translating 'unconscious motives into cultural symbols' that are deemed important to both the person and the culture (Obeyesekere 1990: 282). Spiro largely credits 'pre-culture' or a person's biology for internalization; however, Obeyesekere, places greater emphasis on personal experiences because these experiences shape the individual's understanding of reality. Unlike Briggs and Hollan, who credit the 'fluidity' of the unconscious and conscious for internalization, Obeyesekere primarily how conscious experiences shape the processes of internalization. For Obeyesekere, cultural symbols only gain significance when an individual internalizes them, and thus internalization is largely based on subjective experiences of cultural symbols, which can shape a person's perception of reality (Obeyesekere 1990, Throop 2003: 114).

Hinton and Good (2009) implicitly emphasize Obeyesekere's conception of internalization in their work "Culture and Panic Disorder." Although panic disorder is found cross-culturally, psychological and physiological symptoms vary significantly between societies. This variation is attributed to differing cultural values and histories, where panic experiences depend on personal internalization of meaningful cultural symbols. For instance, in Rwanda the symbolism behind a proper burial is extremely important; therefore, after the 1994 genocide, many victims experienced shortness of breath because of the failure to perform this symbolic cultural ritual (ibid: 215). In connection to Obeyesekere's theory "work of culture," these painful personal experiences are redirected through the internalization of cultural symbols in which give rise to unique panic symptoms.

In the book *Power of Feelings*, Nancy Chodorow (1999) claims that transference plays an integral role in internalization, where: "our inner world of psychic reality helps to create, shape, and give meaning to the inter-subjective, social, and cultural worlds we inhabit" (ibid:14). Furthermore, Chodorow recognizes the importance of personal

agency in the internalization process, where the past is not seen as a determinant causal factor for cultural knowledge, but simply contributes to the attachment of cultural ideologies through the multifaceted participation in social activities (Chodorow 1999, Throop 2003: 121). For instance, through personal agency, Chubby Mata chooses whether or not she wants to be considered a baby. Depending on the choice of social participation, Chubby Mata attaches to cultural models that are significant for her identity at the particular moment.

### **The Future of Internalization**

Unlike Freud, who viewed the unconscious and conscious to be distinct motivational processes, today's psychological anthropologists claim that internalization involves the interconnection of both the conscious and unconscious. This model of internalization is more efficient because it understands how cultural meaning can have different degrees of impact for an individual: "these new models make clear the possibility that these various modes of awareness may be differentially impacted by cultural resources and as such may provide a way to account for intra-psychic variation in cultural conditioning" (Throop 2003: 125). Throop (2003) asserts that future studies of internalization should conceptualize the factors of time and memory. If theorists concentrate on 'temporal orientations' and memory systems, it will shed light on cultural patterns and whether these patterns affect personal narrative or sense of self (ibid: 128).

For instance, in the book *Vita*, Biehl (2005) describes that in Brazilian society, it is expected for adults to be able to shift quickly to adapt to life's changes. Therefore, because Catarina was unable to shift to a mother role after the birth of her child she was considered mad and consequently institutionalized (Hay-Rollins 2010). Adults are expected to adapt even when cultural frameworks are rapidly changing, and if they are unable to internalize new cultural knowledge, they are deemed mad or incompetent. Considering that internalization is a continual process, and does not halt with childhood, Catarina's personal narrative and sense of self dramatically shifted because of how time and memory affected her internalization process.

For future studies, it is important to recognize that new experiences contribute to internalization; therefore internalization is a continual process that is shaped by current and past events. Acknowledging the idea of transference, or how "present observations are colored by the past and [are] enhancing our understanding of those very processes of meaning" (Throop 2003: 126), will allow theorists to have a less distorted view of a society. Instead of solely relying on informants' introspection to analyze cultural frameworks, future researchers should account for how transference and personal agency can influence the internalization process. Understanding how and why an individual embodies certain cultural knowledge will lead to a less biased understanding of culture.

**Related Concepts:** Enculturation, Identification, Processual Learning, Psychological Pre-Adaptation, Socialization

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# MENTAL ILLNESS

*by Kristen Figas*

5 April 2012

Sometimes I lie awake at night, and I ask, 'Where have I gone wrong?' Then a voice says to me, 'This is going to take more than one night.' – Charlie Brown

This quote, from Charles Shultz's popular comic *Peanuts*, exemplifies a few both prominent and controversial questions addressed by anthropologists studying mental illness. Charlie hears a voice at night. Is this "normal"? Or, is Charlie suffering a psychotic break, hearing a voice that does not exist? The voice tells Charlie that determining his misstep will take longer than one night. How long should it take to solve this psychological dilemma? Is this problem conceptualized as chronic, or acute? Does this originate within Charlie's body or via external sources? The answers to these questions are not universally fixed; they depend upon a society's definition of mental illness. Yet, definitions of mental illness are notably ambiguous and fluid, both across and within societies.

Anthropologist Robert LeVine underscores mental health as one of the prominent domains within psychological anthropology (2010: 3). Likewise, scholars across disciplines have long grappled with explicating what constitutes mental health and mental illness. Mental illness has been conceptualized in numerous, even contradictory, ways over time and across societies. Sociocultural and temporal context intricately influence understandings of the cause, course, individual and societal response, treatment, and outcomes. For example, in Zanzibar, schizophrenia may be attributed to spirit possession and care may be provided primarily by family members (Watters 2010:156), whereas in the United States, schizophrenia is commonly attributed to biological abnormalities and care is provided by clinicians (Gaines 1992; Good and Hinton 2009; Luhmann 2000).

Definitions of mental illness have long been debated, with the subject of debate shifting to reflect current interests. In turn, questions have centered on etiology and myriad other aspects (such as experience, social reaction, treatment, and outcome), universality, epistemology, and phenomenology, shifting over time to reflect different assumptions concerning relevant knowledge and approaches to acquiring this knowledge. Focusing on any single question and operating out of a given set of assumptions yields distinct perspectives, allowing dissimilar conclusions to be drawn. For example, focusing on universal symptomology enables Western psychiatrists to

conclude that Western diagnoses, such as Schizophrenia, are cross-culturally relevant (Watters 2010:134). Conversely, viewing prevalence or prognosis as more relevant, one might conclude that a mental illness with an apparently universal symptom set is culturally-specific in its causes, course, and outcomes (Good 1997; Hagengimana and Hinton 2009). Thus, utilizing different orientations (assumptions concerning relevant knowledge and goals) yields divergent conclusions concerning numerous aspects of mental illness.

### **Historical Use**

The term mental illness has historically been used in varied ways within the discipline of psychological anthropology. Yet, before psychological anthropology was established as a discipline, mental illness was studied in ways that would later heavily influence psychological anthropologists. Around the turn of the twentieth century, Sigmund Freud developed the psychodynamic theory, positing that mental illness manifests through unconscious conflicts with developmental and interpersonal origins (Freud 1930). By emphasizing external events and individual psychological factors, Freud set the stage for relativistic formulations of mental illness and heavily influenced anthropologists studying mental illness. By the middle of the twentieth century, the emerging thought in anthropology was that psychodynamic processes underlay all mental illnesses but that sociocultural processes and events influenced their expression (Paul 1967). Meanwhile, mental illness was studied in a dramatically different way by cultural anthropologists examining the effect of healing rituals on mental health and abnormal behavior (Klukhohn 1942). In either case, the conclusions were culturally-specific and relativistic, carefully avoiding labeling individuals or conditions.

In the mid-twentieth century the assumptions concerning mental illness etiology shifted, focusing heavily on societal factors. Philosopher Michel Foucault emphasized the need for a discrete conceptualization of mental pathology as having nonorganic origins, positing that societal ambivalence provokes illness (Foucault 1954: 10). By assuming that mental illness originates in social conditions (shaped by power relations) and is defined by cultural-political concerns, norms, and values within a specific historical context, mental illness became “historicised” and “politicised” (Roberts 2005: 37). Foucault influenced anthropologists studying mental illness, shifting the focus from individual Freudian psychodynamics toward the role of social-political influences. This orientation has continued to influence recent conceptualizations (Warner as cited in Kleinman 1998: 224; Hagengimana and Good 2009).

In the 1960s, the strictly relativistic assumptions that individual psychodynamic and social-historical processes underlie all mental illness shifted toward more universalistic assumptions. By deemphasizing the singular focus on psychodynamics and cultural-environmental factors, an emergent biocultural model was advanced (Wallace 1961). This model shifted the focus from attempting to relativistically explain individually- or culturally-specific cases of mental illness to attempting to understand mental illness as a more universal concept; however, this perspective was given little credence until the universality debate reemerged in the 1980s and 1990s.

### **Contemporary Use**

Contemporary conversations within psychological anthropology concerning mental illness center around three different themes: universal understanding of mental

illness, epistemology, and phenomenology. Shaped by the ideas of Foucault and Wallace, the universality debate negotiates between radical constructivist and biocultural understandings of mental illness. As Western definitions of mental illness became increasingly biomedical and touted as universally-applicable, an opposing perspective, cultural constructivism was proposed (Gaines 1992). This extremely relativistic approach views mental illness as completely culturally and historically constructed and purports that western psychiatric conceptualizations are “local cultural phenomena” that cannot be generalized or applied to other societies (Gaines 1992:21).

The cultural constructivist model received some support from Byron Good, who advanced a slightly more nuanced multilevel model for understanding mental illness, emphasizing the role of the immediate social-environmental as well as macrosocietal conditions in shaping mental illness (1997:234-235). This model expands upon cultural constructivism by highlighting the significance of interpretations of mental illness in shaping the total experience of mental illness – from cause and diagnosis, through course and treatment, to outcome and societal response (Good 1997:233-234). This orientation conceptualizes mental illness as specific in its cultural manifestation but asserts that mental illness can be understood as a cross-cultural phenomenon by holistically considering socio-cultural influences across multiple levels. In other words, mental illness can be understood as a local, global, and universal phenomenon, depending on the aspect under consideration. By conveying how multiple contexts shape the entirety of mental illness, this approach advances the emerging cross-cultural understanding of mental illness, which hinges on sensitivity to context.

While constructivism and the multilevel contextual model importantly highlight how sociocultural factors greatly influence mental illness, they neglect to consider possible universal biological aspects of mental illness. This deficit led to the creation of a new biocultural model, which views mental illness as both biological and cultural, both local and universal (Kleinman 1998). Cross-cultural studies of schizophrenia and depression demonstrate that these disorders present similar symptoms across varied societies, providing evidence that there are universal biological processes shared by all humans that at least partially influence the development of certain mental illnesses (Kleinman 1998: 224). However, different societies ascribe unique meaning to a given symptom and likewise respond in quite dissimilar ways (Kleinman 1998: 227-229; Good and Hinton 2009; Hagenimana and Hinton 2009). These particulars are due to many different socio-cultural factors depending on what is salient in a specific society, including the political economy, modernization, acculturation, powerlessness, religious beliefs and heritage, historical events and social change, and poverty, among others (Kleinman 1998: 224-229). Thus, both universal-biological and culturally-specific features of mental illness exist, and they can be mutually understood through the biocultural model.

An understanding of the interplay between biological and sociocultural factors, paying particular attention to cultural symbols and meaning, advances the emergent biocultural model yet further (Good and Hinton 2009; Hagenimana and Hinton 2009). Panic disorders exemplify this nuanced understanding, as they are characterized by similar somatic symptoms and cognitive processes in very different societies, which demonstrates an aspect of universality; however, the meaning attributed to the same symptoms varies drastically across societies, thereby demonstrating how sociocultural

contextual factors intricately shape mental illness (Hinton and Good 2009; Hagenimana and Hinton 2009). For example, while individuals from the United States may interpret their somatic symptoms as caused by some traumatic event, individuals in Rwanda interpret these same symptoms very differently—as spirit assault due to improper burial (Hagenimana and Hinton 2009:214). By emphasizing the roles of cultural symbols and meaning in the transaction between social-historical context and universal biological processes, this nuanced biocultural model offers a comprehensive understanding of mental illness that is universally applicable.

In addition to advancing a universal biocultural understanding, psychological anthropologists are currently studying mental illness epistemologically. The epistemological approach shifts the focus to process, versus the previously discussed understanding that can be derived irrespective of considering how that understanding was conceived and embodied over time. Studying mental illness in this manner provides insight into how individuals come to understand mental illness – through constrained experiences and particular styles of acquiring knowledge (Luhmann 2000). The embodied knowledge gained through this process in turn critically shapes how individuals view and respond to mental illness (Luhmann 2000). Likewise, using the epistemological approach is useful in understanding how mentally ill individuals can be known and understood by others in society (Crapanzano 1980). This approach generates profound knowledge concerning how individuals learn to understand, view, and respond to mental illness, yet there is a paucity of research utilizing this approach to advance understandings of mental illness.

Finally, psychological anthropologists are currently studying the phenomenology of mental illness, emphasizing the individual experience of having a mental illness. Such an approach subjectively studies the unspoken covert aspects of how individuals experience mental illness – how their world changes as a result of becoming (or being diagnosed as) mentally ill (Good 2012). Authors utilize the phenomenological approach to examine how mental illness, accompanying homelessness or ostracism from society, and power relations interactively affect personhood and identity (Desjarlais 2000; Lovell 2007). This approach is also used to study the complex process of how individuals are outcast from society and dehumanized through a label of mental illness, as well as how individuals subjectively experience and comprehend this process (Biehl 2005).

### **Conclusions and Future Use**

Over time, the questions psychological anthropologists have asked concerning mental illness have evolved from basic etiology and questions of universality to more nuanced questions concerning the construction of a holistic universal understanding of mental illness, how individuals come to understand mental illness, and the phenomenology of mental illness. Defining “normalcy” is ambiguous within a given society and is widely variable between societies, but the defined boundaries can be understood by examining sociocultural processes. Thus, modern understandings focus less on individual definitions than how these definitions can be understood cross-culturally. Psychological anthropologists do not purport that mental illness can be universally-defined in the sense that the illnesses exist in the same form, through the same processes, and have the same outcomes across societies. Rather, they have demonstrated that mental illness can be understood universally by recognizing the role

of biology but always considering the multilevel sociocultural context in which the illness manifests, by examining the epistemological process by which a given conceptualization is learned or formed, and by considering subjective experience.

Attempting to explain mental illness has presented problems for a long time, but this holistic biocultural, phenomenological, and epistemological model will provide a useful way to examine and elucidate mental illnesses across the globe. Furthermore, it will help enlighten culturally-defined boundaries of normalcy and how these boundaries are constructed. Future research should focus on the vastly understudied area of epistemology within the domain of mental illness – and should examine not only how individuals develop an understanding of mental illness and how individuals can know mentally ill individuals, but also how mentally ill individuals come to know themselves and how this understanding changes. Thus, future research might incorporate epistemological and phenomenological approaches to better elucidate individual processes of knowing and understanding oneself with mental illness.

*Related Concepts: Coping, Dehumanization, Epistemology, Phenomenology, Self, Stigma*

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# NARRATIVE

*by Molly Brazier*

19 April 2010

Individuals often tell stories about their past experiences. These memories and the bearing that they have on the social construction of self shape the concept of narrative in psychological anthropology. Described as “an individual’s ability to relate temporally distinct experiences through personal memories” (Crane and Angrosino 1992: 76), this concept helps us to answer important questions in the field of psychological anthropology. Narrative plays a key role in anthropological thought in that it unveils information on cultural practices, historical truths, and internal psychiatric workings of individuals.

The role of narrative within anthropological thought has a long continuing development. The concept of narrative has always been a fundamental building block in the field of psychological anthropology. In fact its existence in the field has historical roots in people as early as Franz Boas. And though the use of narrative has changed over time, it both draws from and positions itself against its earliest uses.

Early uses and perspectives on narrative fall within a category now labeled as the “life-focused” (Peacock and Holland 1993: 367). Underneath the life-focused approach, anthropologists are concerned not so much with the narration itself but with some truth that is being reflected through it. There are two subdivisions that can be found within this life-focused perspective. One focuses on the external realities that are being played out through narrative, the other focuses on the internal psychological forces that are being mirrored through narration. Peacock and Holland say that “one treats the life narrated as a window on the objective facts of historical and ethnographic events, the other as a view of the subjective experience of the narrator” (Peacock and Holland 1993: 369).

The work of Franz Boas is a good example of the externally centered life-focused approach. Boas felt that peoples’ “life histories” were a “datum for history or ethnography” (Peacock and Holland 1993: 368). His primary concern resided in finding the “truth” in a person’s narration about an event which could be checked against other data gathered about the event (Peacock and Holland 1993: 368). The narration is concerned with discovering a reflection of some external truths which exists outside of the self rather focusing on the story presented in and of itself. In this approach there is great concern with the accuracy of the narration and an ethnographer must be cautious to approach it with as much subjectivity as possible so as to capture the essence of what is being reflected.

As previously stated, the second perspective found beneath this life-focused centered approach is more interpretive. It treats life history as a window into the deeper psyche of a human being. The value in narration lies not in the external realities projected through it, but instead its ability to unveil the internal psychological dispositions of the person giving the narration. In this approach we find that it is not so much concerned with the text of the narration but instead with some reality that is being reflected through it. One proponent of this approach was Sigmund Freud who saw in his patients narratives representations of actual, childhood events which worked to build their current psyche (Peacock and Holland 1992: 371).

While Boas was the first to project this life-centered approach it has been passed down, reflected, and recreated in many different scholars. The narratives are seen as the path to discovering the greater truths in works such as those by Crane and Angrosino (1992: 76), Kroeber (1961), and Simmons (1941).

The next approach developed focuses on dissecting the meaning of narrative story in and of itself. Entitled the "story-focused approach" by Peacock and Holland, scholars under this approach make the narrative their primary concern. The most extreme version of this approach argues that there is no reality reflected in narrative at all. Instead the narrative creates and is the reality. What is important here is not the stories that actually occurred, but a constructed interpretation and reinterpretation of them which exists in peoples' accounts and narratives.

This understanding of narrative is used as a building block in many works being currently published. For example, Joana Biehl in his recently published ethnography *Vita: Life in the Zone of Social Abandonment* focuses not so much on the reality of Caterina's understanding of her past but instead on the narrative in and of itself as her reality (Biehl 2005).

Thus what we have so far are two understandings of narrative. One focuses on the realities that exist outside of the narrative which are expressed through it; the other focuses on the narrative itself as a creator of personal realities.

Yet a bridge has gradually begun to develop between these two drastically different approaches. Later scholars fall beneath the two as they argue for an approach that emphasizes the importance of the narration in shaping social interactions. The life stories or narrations are seen as a product of life experiences. They speak of these life story narrations as giving way to the cultural and psychological constructions of the human experience. As contemporary scholar Mattingly argues, current understandings of narrative center themselves on the social outcome in forming a social identity and creating and reflecting varying forms of meaning in human interaction and personhood (Mattingly 2008: 3).

One primary example of this form of thinking can be found in the work of Jerome Bruner. Thought of as ground breaking in his ability to create a dialogue between psychological and anthropological thought, Bruner argues for the place of narrative in the broader context of both fields.

In his essay entitled "Life as Narrative," he argues for two main things. First, that we have no other measure for "life-time" except through narrative, which makes it an important reflector of cultural, social, and psychological constructions. Secondly, he argues that "narrative imitates life just as life imitates narrative." In other words, life as an external reality and narrative as an internal collection of this reality could not exist separately. Says Bruner, "When somebody tells you his life – and that is principally what we shall be talking about – it is always a cognitive achievement rather than through the clear crystal recital of something univocally given" (Bruner 1987: 692).

Playing off of the basis of this concept, Daniel Hutto argues that narrative reveals the organization of people's internal thoughts. In his article entitled "Narrative and the Minds of Others," Hutto argues that "storytelling practices are a basis for being able to make sense of minds in the first place - that is, for the ability to formulate appropriate, well-structured inferences about people's reasons for acting" (Hutto 2008: 343). Thus for Hutto narratives can be used as a tool for understanding the way that others process and express their memories.

Arguments for this type of approach cause the concept of narration to fall into the hands of many different schools of reasoning such as psychology, anthropology, linguistic research, theories of the mind, and others. Yet with complex new perspectives on the role of narrative and its proper purpose, there arise issues on how it properly relates to the field of psychological anthropology. Peacock and Holland write, "The individual self is fragmented rather than unitary and fixed and thus one's narration of self varies with circumstances...one's narration of self is seen less as an anchor and source of narration than a product of it; self becomes discourse" (Peacock and Holland 1993: 368).

One author who centers her work on the fragmented self is Katherine Ewing. In her essay "The Illusion of Wholeness: Culture, Self, and the Experience of Inconsistency," Ewing argues for multiple projections of selves. Like Hutto, Ewing feels that narrative is a way of revealing internal thoughts. Yet her focus argues that internal thoughts which are expressed through narrative are fragmented and change in varying social circumstances. She defines narrative as an experienced "articulated self" that can shift given the "definition of the situation" (Ewing 1990: 251). In her perception, narrative and identity are inseparable. As narrative changes given the circumstance, the self that is expressed through this narrative changes as well.

In "Narrative and The Cultural Construction of Illness and Healing," authors Cheryl Mattingly and Linda Garro also make use of the concept of narrative. In their understanding, narrative is "a fundamental human way of giving meaning to experience" (Mattingly and Garro 2000: 1). While Ewing focuses on narrative as expressing multiple projected selves, Mattingly and Garro see narrative not as fragmented, but as a tool for mediation between the internal and the external. Its primary purpose is to "mediate between an inner world of thought-feelings and an outer world of observable actions" (Mattingly and Garro 2000: 1). Thus for these authors narratives are a constructive process in which memories and perceptions are translated from the internal to an external shared reality. This in turn creates both meaning and one's understanding of reality.

Biehl also makes use of Mattingly and Garro's understanding of narrative in his novel *Vita: Life in a Zone of Social Abandonment*. Catarina, the woman who Biehl primarily focuses on in this ethnography, keeps a dictionary of sorts with different words and phrases that she has collected throughout her lifetime. As this dictionary reveals, Catarina is at times a young woman, a worn out mother, a frustrated wife with a negligent husband, and a misunderstood relative with failing health. The accounts of all of these are part of a narrative that Catarina has constructed to help her sift through her past experiences and maintain personhood while in Vita. Thus for Biehl, narrative is a way of both developing and maintaining a sense of self by translating internal memories into an external shared world. Catarina's narrative is a coping mechanism and tool of understanding and filtering her past experiences. In this sense, narrative is used to help create meaning and negotiate her sense of self in the world.

Because of the many different uses of the term, the meaning of narrative and the role it plays in cultural, psychological, and social constructions of the self is scattered. As it is used in so many different ways in so many schools of understanding, it seems almost intangible to one specific definition. Narrative's proper place within all these varying fields is as best weakly developed. With so many potential understandings and uses for the term, it is loosely defined by all who wish to use it. This can be seen as both a strength and a weakness of the concept.

Yet if the past is any indicator of the future, it does not go far to assume that the concept of narrative will continue to play an important role in field of psychological anthropology. Through various theoretical stances it helps to uncover or express realities of personhood, human interaction, and culture. In fact, recent works such as those previously mentioned seem to point to it as bridging a gap between ideas of the mind and ideas of social experience. Just as narrative is a personal reflection and measure of self that may unveil internal psychological practices and workings of the mind, it is also a shared cultural construction that can speak to external elements of society. A specific place for narrative within these two fields is still developing. Yet what is certain is that the concept will continue to be important in asking and attempting to answer questions in psychological anthropology.

*Related Concepts: Discourse, Ethnography, Event, External/Internal, History, Identity, Intentional Stance, Life-story, Life-history, Memory, Narrative, Objectivity, Philosophy of the mind, Social Construction, Social Identity, Subjectivity, The Narrative-self, The Self*

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# STIGMA

*by Sarah Shew*

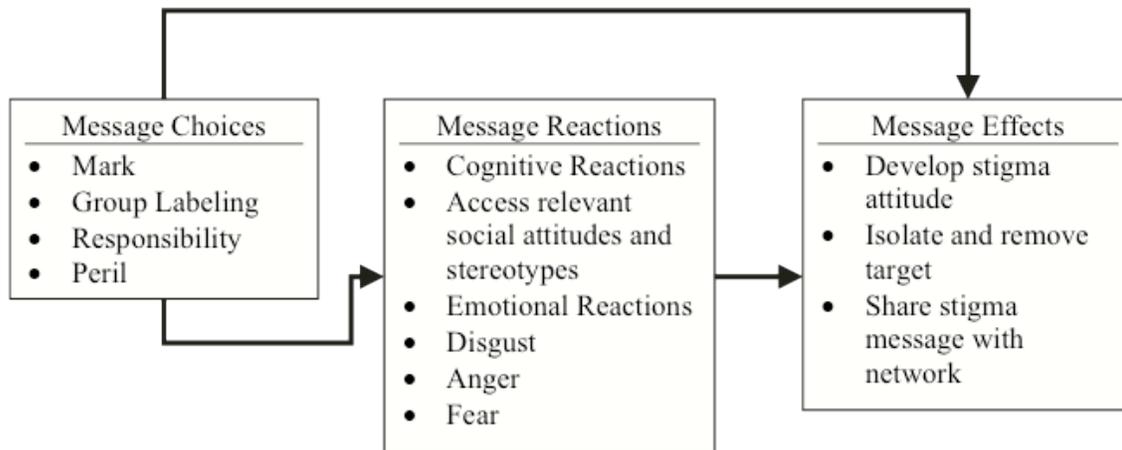
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The Oxford English Dictionary defines stigma as “a mark of disgrace or infamy; a sign of severe censure or condemnation, regarded as impressed on a person or thing; a ‘brand’” (OED, 2011). The history of stigma within human societies varies just as much as the contemporary discourse around it. In every society there seems to be at least one behavior or attribute that is so widely disliked and unacceptable by cultural standards that it is rejected by the society as a whole, and the individuals who possess said characteristics are likewise rejected. What makes these behaviors or traits stigmata (plural form) and how do they develop?

Marking individuals to symbolize their banishment from society and deviance from accepted norms is an ancient practice. According to Rachel Smith, a communication professor at Pennsylvania State University, in her article, “Language of the Lost, An Explication of Stigma Communication,” the Greek roots for stigma refer to a tattoo, or to marked skin (Smith 2007: 463). The Persians developed tattoos as a branding technique, and later the Greeks modified and adapted the practice to identify slaves, prisoners of war, and criminals “for punitive purposes, and so they could be identified if they tried to escape” (Smith 2007: 463). Though the term began as a reference to physical bodily marks, it now encompasses both visible and invisible blemishes on individuals “affixed by people or even the divine” and meant to “signal disgrace” (Smith 2007: 464).

Bernice Pescosolido, Sigrun Olafsdottir, Jack Martin, and Scott Long, sociology experts, professors, and researchers, discuss the culturally and contextually significant aspects of stigma in “Cross Cultural Aspects of Stigma of Mental Illness” in the book, *Understanding the Stigma of Mental Illness: Theory and Interventions*. They claim that stigma is a “deeply discrediting attribute” that causes stigmatized persons to feel less valuable to society and ruined by “‘abominations’ of the body, such as physical deformities, ‘tribal identities’ such as race, sex, or religion, and ‘blemishes of individual character,’ such as mental disorders or unemployment” (Pescosolido et al. 2008: 3).

This indicates, in essence, that stigma and the process of marking an individual is a relational and social construct. Smith’s model of stigma communication depicts the stigma development and impact, which revolves entirely around social action and reaction.



**Figure 1** Model of stigma communication.

(Smith 2007: 463).

The experience of the stigmatized varies from society to society as well as from stigma to stigma. The study of mental illness in particular lends itself well to the study of stigmatization practices. Robert Desjarlais, in his article “The Makings of Personhood in a Shelter for People Considered Homeless and Mentally Ill,” chronicles the life of Alice, a woman also attempting to cope with her own stigmatization. Alice felt that “‘they’ that is, the police, psychiatrists, social workers” forced upon her a stigma of mental illness by “forcing her to take medications, confining her in psychiatric hospitals, and requiring her to heed the edicts of psychiatric and legal institutions” (Desjarlais 1999: 468). Alice reflects the individual and social constructs of stigma, as she thought of herself “as a unique and autonomous individual, encroached upon by the mandates and infidelities of a corrupt society” (Desjarlais 1999: 471). She remained skeptical and wary of society and felt morally obligated to fight tirelessly against these “encroachments” (Desjarlais 1999: 471). Desjarlais also notes that Alice and the other patients experienced internal and external “characterizations” and these often were associated with their stigmatization, as they described themselves within the contexts they were given as homeless and mentally unstable individuals. In an interview, Alice stated she was “mentally abused, but not mentally ill” (Desjarlais 1999: 472). She shows here her reliance on psychiatric jargon and on society to describe her acquired status as a stigmatized individual; an untouchable, unwanted member of the world. Alice also attempts here to negate claims and diagnoses of illness, and thus these stigmata of the medical field and of the populace at large.

In *Vita*, João Biehl compiles the story of Catarina, a woman socially abandoned by everyone she knew, and in essence neglected in a Brazilian institution where people are essentially sent to die. Catarina relies on medical definitions and documenting words in a journal to explain and justify her abandonment (Biehl 2005: 5, 189). Her words reflect how she copes with her stigmatization, by relating it to medical health issues, most specifically rheumatism, because in her opinion “she had not lost her mind... Catarina was trying to improve her condition, to be able to stand on her own feet” (Biehl 2005: 3). Catarina essentially denies the validity of her mental illness; yet she

finds meaning in her stigmatization for medical reasons. She accepts her placement or abandonment in Vita as valid due to her lack of ability to contribute to her society. However, she constantly attempts to comprehend and resolve her “elements of a life that had been, her current abandonment in Vita, and the desire for homecoming” (Biehl 2005: 5). Biehl indicates that Catarina primarily focused on orienting herself in a newfound world of social abandonment, and attempting to remove the stigma of mental and physical illness with which her family marked her (Biehl 2005: 7).

As indicated with Catarina and the fellow inhabitants of Vita, stigmatization occurs at the level of the individual and within groups of a specific context, and may be imposed through a variety of sources. Chikako Ozawa-de Silva in her article, “Shared Death: Self, Sociality and Internet Group Suicide in Japan,” discusses the recent prevalence of group Internet suicides. She points to the “fear of social rejection,” and the associated stigma with said rejection, as a main cause, because in Japan, “a proscription of prohibition of individual experience translates into the fear and felt intolerability of being “left behind” or “left out” ... and downplays individual experience and autonomy” (Ozawa-de Silva 2010: 409). Therefore, Ozawa-de Silva shows that stigma may be brought on when an individual or group of individuals is crippled under societal pressure to assimilate to a particular trait or behavior.

The concept of suicide as an escape from stigma but also a stigma within itself is shown in Philip Singer’s film, *One of the Mad Ones*. The film follows Singer’s psychiatrist, Dr. DeSole, as he discusses his attempts to “return to his subjects’ lives a sense of normalcy while he now struggles to end his own life without the stigma of committing suicide” (Singer, 2011). Dr. DeSole’s situation is unique, as he is an individual who attempts to combat the stigmas with which others are labeled, while also personally feeling stigmatized as the individual fighting against the harming of one’s own body. DeSole shows a key personal conflict brought on by society of the “taboos that surround talking about suicide and moralities of self-care and care giving” (Singer, 2011).

The LGBTQ community is another group who experiences stigmatization on both individual and group levels. In *Marriage Rights and LGBTQ Youth: The Present and Future Impact of Sexuality Policy Changes*, Michelle Marzullo and Gilbert Herdt argue that in the United States, political entities have utilized homosexuality to deprive couples of rights by perpetuating “social stigma and material deprivation to relegate LGBTQ Americans inferior” (Marzullo, Herdt 2011: 542). The LGBTQ community also however represents a unique change of the tide and reduction of stigma, as the youth polled by Marzullo and Herdt indicated “a sense of reduced social stigma and a popularized notion of LGBTQ coupling because of the marriage movement in ways unheard of two decades ago” (Marzullo, Herdt 2011: 546). Their research shows a breaking of the cycle of stigma, as the trait of homosexuality moves closer toward the popular notion of “normalcy” and away from the social sphere of rejected, unacceptable ideals.

In situations of either individual or group stigmatization, a process of “attitudes” and discrimination is the “behavior” that leads to the attempt or desire to strip stigmatized individuals of their place in society, meaning stigma and prejudice are entirely intertwined (Pescosolido et al. 2008: 5). Furthermore, Pescosolido and the other

sociology and social research scholars interpret stigma not as a “static concept” but a socially valuable notion that intertwines the creation of social identity with the recognition of the mark and the devaluing of its bearer (Pescosolido et al. 2008: 3).

Stigma is therefore a socially constructed and highly detailed notion that paradoxically develops within local contexts across the globe. This development is complex, diverse, and culturally sophisticated, applying very uniquely to each group of stigmatized individuals and each stigmatizing quality. Additionally, the process of coping with such a deep social divide caused by stigma varies greatly, and reflects the ancient notion of a disgraceful “mark” mixing with a contextually significant meaning behind said mark. This meaning also may change over time, indicating that stigmata may shift as ideals of normalcy and disgrace shift within a society.

The concept of stigmatization continues to be studied, as it holds such a distinct place in human history and is evident in many societies. Stigma may be used to also study questions relating to societal impact on individuals, as well as the embodied and encultured structure of stigma in various societies. Comparative studies of various societies and their use of stigma as well as coping mechanisms would greatly benefit psychological anthropology in answering questions regarding how people comprehend coping, identity, and development.

*Related Concepts: Abandonment, Character, Coping, Dehumanization, Development, Embodiment, Integration, Mental Illness, Society*

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# SUBJECTIVITY

*by Maggie Rogerson*

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As defined by the Oxford English Dictionary, subjectivity is “the condition of viewing things through the medium of one’s own mind or individuality... dominated by personal feelings, thoughts, concerns” (Oxford English Dictionary 1989). Anthropologists Biehl, Good, and Kleinman expand upon this by calling subjectivity “a synonym for inner life processes and affective states” (Biehl 2007: 6). Contemporary explorations of subjectivity in psychological anthropology are concerned with the subjective experience of suffering and mental illness, the role of institutions in changes in subjectivity, and how individual subjectivities both influence and are influenced by broader cultural processes. Subjectivity is also an important topic to investigate because of its creative role in interpreting and negotiating personal meaning and engaging identity, and its potential to facilitate agency (Biehl 2005, Biehl 2007, Larsen 2004).

The focus on subjectivity in psychological anthropology has come about fairly recently, although the term has been in use, in various forms, for much longer. Amélie Rorty goes back to the philosophical musings of Montaigne, Descartes, and Augustine on the self and observes that “the concept—and perhaps the experience—of subjectivity is historically laden with philosophical presuppositions and controversies” (Rorty 2007: 34). Rather than undergoing a linear progression of meaning, the concept is historically fragmented and often conflicting (Biehl 2007: 27). The English usage of the term began around the sixteenth century, derived from the Latin word *subjectum* (which is in turn related to the classic Greek word *hupokeimenon*), translating into “that which stands or is placed underneath, the material of which things are made” (Rorty 2007: 35). In the nineteenth century, the term subjectivity was used to describe “an essential individuality” at opposition with objectivity, in which “feelings, thoughts, concerns, and perceptions, all supposedly personal, overcome individuals and ‘cloud the eyes,’” suggesting a negative connotation to the word (Biehl, Good, Kleinman 2007: 5-6).

Until the 1980s, which saw the emergence of “postmodern” anthropology, discussions of subjectivity tended to involve the epistemological issue of objectivity and subjectivity (Upadhyia 1999: 1). Now it is generally accepted that because knowledge is constructed intersubjectively, a purely objective approach to social processes is impossible (Upadhyia 1999: 1). This in turn raised the issue of anthropologists studying individuals belonging to other societies, as they risk bringing cultural understandings to the table that may complicate their interpretation of their subjects – and, at worst, contribute to “representations of the ‘other’ in ethnographic knowledge” (Upadhyia 1999:1). The fieldwork method called participant-observation attempts to resolve this by

immersing the anthropologist in the world of the “insider” and in the process enabling a subjective understanding (that is, an *emic* understanding that is personal and emotional) of the society in question (Upadhy 1999:1). On the other hand, “experimental” ethnographic writing that focuses too strongly on the self and subjective experience of the anthropologist also runs the risk of becoming “narcissistic” and distracting from “the wider social-political context in which social understandings are formed” (Upadhy 1991:1). Some also criticize attempts to uncover “indigenous subjectivity” as naïve, because self-interpretations and self-representations may possess pragmatic or political motivations based on the anthropologist (Rorty 2007: 46). Rorty, who terms these anthropologists “ironists,” argues for the use of respect as a conceptual tool (Rorty 2007: 46-47).

Larsen identifies the reason for psychological anthropology’s recent increased interest in the topic of subjectivity as the result of social sciences’ disregard for individual perspectives on and experiences with mental illness in the past (Larsen 2004: 447). He points out that although psychological anthropology has been diligent in examining the culturally distinctive qualities of mental illness, there is a profound need to view the mentally ill as “persons” possessing agency in their own lives and to explore how they make sense of psychotic experiences and generate meaning (Larsen 2004: 447-448). He argues for the value of emphasizing agency “to demonstrate how institutionalized discursive hegemony is both reflected and challenged by individuals,” and how subjectivity is “constrained and empowered by the available social institutions and cultural resources” (Larsen 2004: 448). Biehl, Good, and Kleinman similarly examine the remaking of individual subjectivity in light of “cultural representations and political economy,” a discussion that they ground in the story of a young Chinese man named Zheng Qingming who committed suicide by leaping in front of a train in 2004 (Biehl 2007: 3). Qingming lived during a time of immense political and economic changes. Suicide, generally deemed an acceptable, “rational” method of dealing with failure or hopelessness in Chinese society, has nevertheless become increasingly medicalized and associated with mental illness, a label that carries a deep social stigma to the point that the mentally ill are regarded as “not fully human” (Biehl 2007: 3). The authors state that in order to understand Qingming’s death, one must examine multiple “aspects of subjectivity that illustrate differences across time and cultural spaces” (Biehl 2007: 3). They go on to identify individual subjectivity as “both a strategy of existence and a material and means of governance” that is once affected by and attempts to resist social and political authority (Biehl 2007: 3).

In *Vita*, Biehl further investigates the effect of economic pressures on changing subjectivities and the idea of subjectivity as countergovernance, a process that enables individuals to resist dominant forms of power and knowledge in society (Biehl 2005: 136-137). In his work with Catarina (a woman who has been labeled mentally ill by Brazilian society) in *Vita*, Biehl complicates the concept of subjectivity by stating that even though subjectivity in a sense self-defines one’s identity and plays an important role in countergovernance, it is impossible to reduce the term to just these functions (Biehl 2005: 136-137). He provides a new, expanded definition of subjectivity:

“It is rather the material and means of a continuous process of experimentation—inner, familial, medical, and political. Always social, subjectivity encompasses all the identifications that can be formed by,

discovered in, or attributed to the person. Although identification-making mechanisms are quite difficult to detect, this process of subjective experimentation is the very fabric of moral economies and personal trajectories that are doomed not to be analyzed. I am thinking here of a diffused form of governance that occurs through the remaking of moral landscapes as well as the inner transformations of the human subject.... While her sense of herself and of the world was perceived as lacking reality, Catarina found in thinking and writing a way of living with what would otherwise be unendurable. Thus, subjectivity also contains creativity, the possibility of a subject adopting a distinctive symbolic relation to the world to understand lived experience." (Biehl 2005: 137)

Biehl's definition of subjectivity foregrounds his later emphasis on "the dynamic and unsolved tension between the bodily, self, and social/ political processes" that, he argues, forms the core of subjectivity (Biehl 2007: 15). It acknowledges the important role of cultural processes while also validating individual agency, especially creativity, in the formation of subjective meaning, the shaping of personal identity, and the ability to cope with hardship.

Kleinman and Fitz-Henry highlight a topic that Larson and Biehl have begun to tease out: the importance of focusing on individual experience in order to understand subjectivity. Kleinman and Fitz-Henry's emphasis on this topic comes about as a result of anthropology's tendency in the study of subjectivity to focus on broader "cultural representations and performance" and how they help us understand how societies change rather than exploring the intimate realms of the individual (Kleinman and Fitz-Henry 2007: 52). They also identify the idea of human nature as being "neurobiologically hardwired"—that is, primarily biological rather than cultural—as an ongoing problem in the study of subjectivity in philosophy, psychology, and other social science disciplines (Kleinman and Fitz-Henry 2007: 52-53). While acknowledging the biological basis of human behavior and cognition, they caution against biological reductionism and stress the importance of "history, cultural specificity, political location, and economic position" in understanding subjectivity (Kleinman and Fitz-Henry 2007: 53). That is, they stress that people are bio-*cultural* beings, and the "cultural" part cannot be ignored. What is most at stake—what things matter most to people, both personally and collectively—often varies greatly from culture to culture, and even within a given culture (Kleinman and Fitz-Henry 2007: 54). Furthermore, these "stakes" are never static; as their worlds change, people change too (Kleinman and Fitz-Henry 2007: 54-55).

Kleinman and Fitz-Henry go on to examine how, similar to the story of Zheng Qingming, changing large-scale political and economic processes also redefine the moral processes of what is most at stake in a given society (Kleinman and Fitz-Henry 2007: 55). They focus on an example of genocide—the slaughter of thousands of Jews by the Reserve Police Battalion in Poland in the summer of 1942 (Kleinman and Fitz-Henry 2007: 55). Why, they ask, did only a handful of men in the battalion refuse to go through with the action, when all of them were given the option not to? (Kleinman and Fitz-Henry 2007: 56). The reasons are both collective and individual. Cultural models such as loyalty, camaraderie, and "losing face," as well as the creation of the "other" in mainstream Polish society, contributed to the rationalization of the killings (Kleinman

and Fitz-Henry 2007: 56). However, the men also justified the killings in individually different ways, sometimes leading to “conflicts and contradictions” to cultural models and collective pressures (Kleinman and Fitz-Henry 2007: 56). As a result, though still very much an act of genocide, the setting of the Polish killings was greatly different from, for example, the violence carried out in German death camps (Kleinman and Fitz-Henry 2007: 56). Kleinman and Fitz-Henry use this example to illustrate the need to “describe the patterns by which cultural representations, collective processes, and distinct subjectivities come together in a particular local world” (Kleinman and Fitz-Henry 2007: 57). What they mean is that personal subjectivities are not distinct from the realms of the cultural and collective, nor are they directly shaped by them; rather, subjectivities both influence and are influenced by cultural and collective processes. In shorter and simpler terms, “the subjective is always social and the social, subjective” (Kleinman and Fitz-Henry 2007: 64).

The topic of subjectivity is relevant to several major questions in psychological anthropology, some of which have already been addressed here. Who gets to define madness? Who gets to decide whether someone is mentally ill? How do dominant epistemologies about mental illness become internalized in the sufferer, and /or how does he or she resist them? How do changing external forces unmake and remake subjectivities? How much of the shaping of personal identity is cultural in nature (or, for that matter, biological), and how much is individual? How do we find and create meaning?

Kleinman and Fitz-Henry identify the idea, still prevalent in many social science disciplines, of a universal, biologically hardwired human nature as problematic in the study of subjectivity (Kleinman and Fitz-Henry 2007: 52-53). Additionally, Larsen, Biehl, Good, Kleinman, and Fitz-Henry are increasingly stressing the importance of examining the individual and especially individual *experience* in future studies of subjectivity. In the past and even to some extent in the present, too much emphasis has been placed on cultural and collective processes as defining or shaping individual subjectivities. These authors suggest that now and in the future, anthropologists need to pay attention to individual experience and the dialectical, interconnected relationship that takes place between cultural and collective processes and subjectivities, as each contributes to the other.

*Related Concepts: Agency, Creativity, Embodiment, Intersubjectivity, Self, Subject*

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# TRAUMA

*by Megan Burlew*

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## **Trauma Introduced**

According to the Oxford English Dictionary, the term trauma is defined as “psychic injury, esp. one caused by emotional shock, the memory of which is repressed and remains unhealed; an internal injury, esp. to the brain, which may result in a behavioural disorder of organic origin. Also, the state or condition so caused” (OED 1989). These experiences are wide and varying depending on individual people. The conditions observed after experiencing trauma are equally as varying. Many conditions are marked by “chronic arousal, emotional numbing, avoidance of reminders of the trauma(s), and intrusive thought or dreams related to trauma events” (Doctor and Shiromoto 2010: 276).

Traumatic events are not the same for all people. These events range from long durations, such of years of abuse, to rapid time frames, such as extreme natural disasters or acts of terrorism. Trauma is often experienced after threats inducing considerable fear and anxiety (Doctor and Shiromoto 2010: 276). In psychological anthropology, some overarching and general categories of traumatic sources can be seen through studies in a variety of cultures. Some of these sources can be loosely categorized into the following categories: child abuse, combat-related, political abuse, and natural disasters.

Child abuse accounts for most of the trauma experienced during the developmental years. In 2006 a study was done concluding that each year the United States reported that “905,000 children were maltreated, and of those most were neglected (423,670), while 85,324 were physically abused and 55,550 were sexually abused” (Doctor and Shiromoto 2010: 279). In Western cultures, child sexual abuse often causes lifelong trauma and has lasting affects into adulthood. Besides the physical aspect of sexual abuse, secrecy is often involved with the abuse. Abusers may tell a child to tell no one about the abuse and offers threats about killing them or important individuals in their life. Child physical abuse involves serious physical harm to a child and may result in chronic problems (Doctor and Shiromoto 2010: 279). Unlike physical abuse, emotional abuse “involves extreme belittling of the child and making him or her feel like a bad person” (Doctor and Shiromoto 2010: 279). Typically victims of emotional abuse are told they are bad or evil, an unwanted child, or the source of problems in the family. (Doctor and Shiromoto 2010: 279).

Julia Dickson-Gómez in her article “Growing Up in Guerrilla Camps: The Long-

Term Impact of Being a Child Soldier in El Salvador's Civil War" explores the long-term effects the war had on the children who actively fought in the El Salvador civil war. She reports that some "300,000 children are actively participating in thirty-six ongoing or recently ended conflicts in Asia, Africa, the Americas, and the former Soviet Union" (Dickson-Gómez 2002). Nearly all of these conflicts occur in developing countries in which children are at risk for forced recruitment into armed groups. Dickson-Gómez studies four young adults who fought in the civil war. Using these four cases, she argues that traumatic experiences are even more devastating when they occur in early childhood because they destroy the ability to establish basic trust children have towards caretakers. According to Dickson-Gómez, the forced participation in warfare at early ages required a developmental adjustment, which greatly altered the personality and worldviews of the children involved (Dickson-Gómez 2002: 350). The prolonged chronic danger experienced by the child soldiers in El Salvador interrupted normal socialization practices and the extreme levels of violence became normalized in their lives (Dickson-Gómez 2002: 350). Dickson-Gómez establishes a relationship between a child's developmental stage and traumatic experiences in determining the long-term effects of traumatic events (Dickson-Gómez 2002: 328). Her work highlights the negative affects all forms of child abuse can have on victims.

Another form of trauma currently discussed in psychological anthropology is combat related, which results from "the physically and emotionally painful aspects of combat conditions and seeing others harmed or killed" (Doctor and Shiromoto 2010: 279). Veterans often question why they survived unharmed when their comrades died or suffered extensive injuries (Doctor and Shiromoto 2010: 279). Psychological anthropologists see the trauma caused by war to have far-ranging and transformative repercussions (Lomsky-Feder 2002: 83). Wars as a whole can have serious effects on a society. The 1963 Yom Kippur War, for example, is seen in the Jewish national memory of Israeli society as very traumatic event; however, participants in the war rarely see the event as personally traumatic (Lomsky-Feder 2002: 87, 95). Those veterans who do see the war as a traumatic personal story view their experience as a transformative event. Ze'ev, a pilot in the Yom Kippur war, says, "The Yom Kippur War was a trauma. It was a turning point in my life, in all respects. And within a few hours of the beginning of the war, I really felt that I was a totally different person" (Lomsky-Feder 2002: 99).

Natural disasters such as tsunamis, hurricanes, and earthquakes harm and kill people each year. These disasters drastically alter the victim's everyday life, challenging their sense of safety and putting their lives in jeopardy (Doctor and Shiromoto 2010: 282). According to Joshua Breslau, people helping after natural disaster often experience trauma because they feel guilty that had they acted differently, another victim could have survived (Breslau 2000: 186). As in the case of the 1995 Kobe earthquake in Japan, people see mental illness a possibility for anyone affected by the quake or any other traumatic event (Breslau 2000: 183). In the Japanese culture, trauma is seen as a "stone in a pond": "the traumatic event, in this case the disaster, is the stone, hitting the pond of everyday experience, radiating out from the impact site in 360-degree ripples of trauma" (Breslau 2000: 185). All people who have contact with the disaster will be affected somehow, with the most severe trauma near the initial impact. Following natural disasters, cases of PTSD tend to spike (Doctor and Shiromoto 2010: 282).

Political violence, such as genocide, drastically alters peoples' everyday life and makes for a traumatic experience. Examples of this type of trauma are survivors of the Cambodian genocide who were beaten, tortured, witnessed other's deaths, or forced into slavery (Becker et al. 2000: 321). These experiences skewed their notions of self and worldview (Becker et al. 2000: 321). These survivors narrated their trauma stories in order to make sense of past and present and come to terms with the ruptures in their lives (Becker et al 2000: 333). Dickson-Gómez writes that "basic trust can disintegrate beyond repair after ongoing traumatic experiences as, for example, with Holocaust survivors" (Dickson-Gómez 2002: 337). The trauma associated with prolonged states of emergency permanently alters victims' sense of trust and self (Dickson-Gómez 2002: 338). When it comes to dealing with their pasts, victims of political violence often resist vocalizing their trauma story and tend to keep details of their past secret (Kidron 2003: 514). Descendants of trauma survivors, such as those of the Armenian genocide, are now relooking at the past and examining the long-term effects of trauma in their own lives (Kidron 2003: 514).

### **History and Background of Trauma**

The concept of trauma began in the nineteenth century with Freud's early explanations about neurogenesis. Since the time of Freud, there has been a continuous evolution and growing understanding of what trauma is, where it comes from, varieties it appears in, and what it does to those who experience it (Furst 1967: 54). In 1893, Freud describes trauma as any experience which calls up distressing emotions such as fright, anxiety, shame, or physical pain (Furst 1967: 54). The term evolved from there and in 1917 Freud had transformed the term to mean "an excessive magnitude of stimuli too powerful to be worked off in a normal way" (Furst 1967: 54). Finally in 1926 Freud saw trauma as "the state of psychic helplessness, a situation of helplessness that has been actually experienced, as differentiated from an expectation of danger" (Furst 1967: 54).

In the past, trauma has widely been used in psychology; however, the term has only recently appeared in psychological anthropology. Post-Traumatic Stress Disorder, a disorder attributed to trauma, was introduced into the DSM in 1980 following research on the Vietnam War (Breslau 2000: 176). Before this time, psychological anthropology rarely used the term. Kelly McKinney in "Breaking the Conspiracy of Silence: Testimony, Traumatic Memory, and Psychotherapy with Survivors of Political Violence" writes that "in the late-20<sup>th</sup>- century Western culture, trauma emerged as a paradigmatic discourse for defining the catastrophic, calamitous, or otherwise injurious, for attributing blame and accountability, and for organizing subjectivity and identity" (McKinney 2007: 265). Since the term appeared in psychological anthropology, there have been studies looking at both recent and past events such as political violence and natural disasters as discussed above.

### **Current Use of the Term**

The concept of trauma is gaining hold in psychological anthropology today. Psychological anthropologists study and understand how traumatic events can affect a person later in life. How trauma is dealt with in a society is a topic of discussion in psychological anthropology as well; according to Carol A. Kidron, "the experience of trauma, and the resulting disorder, entail culturally constituted meaning systems framing how one interprets and practices the traumatized suffering self" (Lambek and Antze 1996). Psychological anthropology examines how various cultures define trauma

and its effects; for example, Edna Lomsky-Feder delves into how most veterans of the Yom Kippur War don't feel personally traumatized by the war and how many people view trauma as simply a part of life (Lomsky-Feder 2004: 95). On the other hand, the Japanese culture surrounding the Kobe earthquake has a scale of trauma after an event, allowing the possibility for an individual to be mentally ill as a result of that trauma (Breslau 2000:183).

Psychological anthropologists also discuss the effects of an individual's trauma. Lorna Rhodes in her article "Total Confinement" suggests that people are victims of their life circumstances. Past events in a person's life affect their outcomes (Rhodes). Normalizing stress disorders such as PTSD has become a topic of discussion as well. Following traumatic events, debriefers now teach victims that "traumatic stress is not an abnormal reaction and that there is nothing wrong with the participants for feeling stress and having experienced the feelings they do" (Breslau 2000: 186). Although not explicitly stated, Joao Biehl in *Vita* characterizes the main subject of his research, Catarina, as a victim of her circumstance (Biehl 2005: 292-296). Her abandonment and subsequent social isolation speaks to some of her non-medical related problems. Biehl normalizes her in the sense that he identifies Catarina as suffering from a medical disorder but does hint that she still exhibits a mental disorder. Her life prior to *Vita* was one in which her husband mentally abused her and she suffered because her disease (Biehl 2005: 292-296). Both of these things could serve as evidence that her mental condition is "a normal reaction to abnormal events" (Breslau 200: 186).

*Culture and Panic* reviews the "Ilahamuka," a Rwandan syndrome of response to the genocide. Cases studies in this article show the effects of the traumatic event of the genocide. Trauma is used within current psychological anthropology in cases of genocide or great national tragedies or losses. According to Kelly McKinney, there is a new mental health specialty devoted to helping survivors of political violence to confront the psychological effects of their trauma (McKinney 2007: 266). In general, psychological anthropologists are studying all aspects of trauma from its sources and how it is culturally understood to the effects it has on people long-term (Lende 2009: 1-3).

### **Future Uses or Problems**

The concept of trauma is useful for psychological anthropologists in understanding the actions of those they study. Behaviors that seem out of the usual for most people may actually just be a result of trauma they experienced earlier in life. Psychological anthropologists are often concerned with breaking down stereotypes of people with mental illness. By studying trauma and gaining a firmer grasp over the impact specific events in a person's life can have, anthropologists can explain behaviors as reactions to negative situations. When used in the proper setting, therapists can use the concept of trauma to help those suffering from stress disorders understand why they feel and act as they do.

The concept of trauma could have some downfalls. Potentially, the term could be used to justify people's criminal actions or be used to gain political benefits. According to Dider Fassin and Estelle d'Halluin regarding the politics of trauma in French asylum policies, "the recognition of the existence of psychological traces left by events responsible for a person's exile" and the acknowledgement of PTSD provides a medical

framework in which to think of the effects of violence (Fassin and d'Halluin 2007: 301). Presently, the reliability of asylum seekers' traumas is questioned, a trend seen throughout European institutions (Fassin and d'Halluin 2007: 305). Experts are defining the validity of a person's trauma in order to prove him right for asylum (Fassin and d'Halluin 2007: 305). In the future, defining trauma could play a substantial role in refugee rights.

### **Conclusion**

Trauma is a term with wide use in psychological anthropology. Sources of trauma can range from abuse to natural disasters and political violence. The long-term effects of trauma are currently under discussion in psychological anthropology, such as the development of stress disorders like PTSD. How trauma is viewed in different cultures and the role it plays in individuals' lives is observed through ethnographic and clinical research.

**Related Concepts:** *Coping, DSM, Experience, Illness, Memory, Mental illness/psychopathology, Normalcy vs abnormal, Panic disorder, Post-Traumatic Stress Disorders*

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# SOMATIC PERCEPTION

*by Kabla Davis*

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“We don’t see things as they are, we see things as we are.”  
~ *Anais Nin*

The aspect of human experience that the French author and diarist referred to points to epistemological concerns: how do we sense, and ultimately perceive, the world around us (Bornstein 1975: 776)?

If sensation is “physiologic experience” (Hay 2008: 200), then perception is the interpretation of such experience (Pinel 2007). In order to perceive “things as they are,” it follows that we must be objective, discrete observers from what we observe; conversely, to perceive “things as we are” implies an interface between the environment and ourselves that necessarily prevents objective understanding (Csordas 1990: 36). Certainly, human experience does not occur in a vacuum; rather, it takes place in realms that are “simultaneously physical, conceptual, moral, and ethical” (Farnell 2000: 399). Because of this, this zone of experience interpretation, and essentially, transformation, is not purely physiological; this area where sensation becomes meaningful is the intersection of those various planes of experience--the physical, conceptual, moral, and ethical (Hinton 2002).

It has been suggested that a view of the body as both biologically and environmentally created (Scheper-Hughes and Lock 1987), as well as situated in a certain context (Hay 2008), is valuable. Within this framework, the process of sensation interpretation is revealing: Devon and Susan Hinton (2002:1 57) suggest that sensations can be thought of as “core symbols” in “networks of meaning,” making them both “indexical and iconic.” Examining these networks can provide insight into why sensations may be perceived differently in various individuals and circumstances (Hinton and Hinton 2002).

Within this network, a broad interpretive process for understanding perception has been proposed by Marc Bernstein (1975), Devon and Susan Hinton (2002), Laurence Kirmayer (2008), and Cameron Hay (2008). Generally speaking, each of these suggested progressions include a physiological event to be sensed, the experience of the associated sensation, interpretation of the sensation, and implicit or explicit labeling of the sensation (Bernstein 1975, Hinton and Hinton 2002, Kirmayer 2008, Hay 2008).

As physiological events take place, what factors influence the experience and interpretation of that sensation? Marc Bernstein's article (1975) regarding the variation of color identification across cultures as well as across species speaks to this component of the interpretive process. According to this writing, people who live closer to the equator or are descendants of such people have more pigmentation of the eye, which is meant to protect the eye from the increased ultraviolet light typical of those areas (ibid: 788). As a result of this increased pigmentation, these groups of people have more difficulty sensing hues of blue (ibid: 788). Because of this, these groups of people have fewer color identifications for blues in their respective languages; in fact, the amount of (or more accurately, lack of) color identifications for blues has been reliably predicted based on degrees from the equator a group of people live at (ibid: 788). This illustrates that the body can very much influence which sensations we are sensitive to and the experience of those sensations. Additionally, the decreased linguistic presence of blues compared to other colors could lead to less cultural significance attributed to such visual sensations when they *do* occur. This is similar to Cameron Hay's analysis (2008: 209-210) of the Sasaks of Indonesia in that cultural conception and awareness of certain dangers lead to some sensations being interpreted as more significant than others. These examples effectively show the abilities of physiology *and* experience to shape sensation and, consequently, perception.

The 1980 work of David Mechanic also demonstrated that patients' reporting of symptoms--perception--is contingent on physiological and psychological states, as well as past experience and cultural conceptualizations of illness. Nancy Scheper-Hughes and Margaret Lock (1987) created categorical "bodies" through which to analyze perception. For our purposes, two of these views are useful: the individual body and the social body (ibid: 7-23). In this work, Scheper-Hughes and Lock regard the individual body as the area where the dichotomies so characteristic of Western thought become embodied (ibid: 8). This ideological separation leads to a conceptualization of illness either "*in the body*" with bodily illness as objective and separate from the mind, "or... *in the mind*," with illness as inherently subjective (ibid: 8-10). This denies "the ways in which the mind speaks through the body," and because of this, illness involving the mind may not be viewed as a significant concern, whether considered by doctors, friends, family members, or the individual (ibid: 10-11). This view has obvious implications for the worlds of Western medicine and psychology: if a continuing Cartesian dualism leads to legitimation of only symptoms in the body, so to speak, symptoms in the mind may be misrepresented or ignored. A useful example of this, which is discussed in *Pain as Human Experience* (1992: 5), is chronic pain: Because organic causes of chronic pain often remain elusive, chronic pain may be viewed as existing solely in the mind, and treatments are accordingly limited. Chronic pain also presents a challenge for this mind-body dichotomy: because the experience of pain is inherently subjective, "inseparable from personal perception and social influence," it is impossible to create an objective measure of the experience of pain (Good et al. 1992: 6). This begs the question: if all sensations are situated within such a frame, is objective perception a possibility? The authors of *Pain as Human Experience* (1992: 6) suggest such perception is not possible.

The second view of the body Nancy Scheper-Hughes and Lock created is the social body (1987: 18-23). Whereas the individual body ultimately deals with *individual* conceptualizations of the self, the social body concerns *collective* conceptualizations of

the self (ibid: 18-23). To illustrate the possible variation in ideology about the body and the self, the authors compare “mechanical” Western cultures with more “natural” non-Western cultures (ibid: 21-22). In Western cultures, Scheper-Hughes and Lock allege, metaphors of the body as machine (i.e. “wound up” and “run down”) reflect and recreate capitalist culture, in which “even the human body has been transformed into a commodity” (ibid: 21-22). Contrasted with Algerian peasants, whose conceptualizations of the body are determined by “natural” occurrences like the rising and setting of the sun and grazing of cattle, it becomes easy to see that “the structure of individual and collective sentiments down to the ‘feel’ of one’s body... is a social construct” (Scheper-Hughes and Lock 1987: 22-23). Ways of thinking about and naming the body ultimately affect the experience of that body, creating a relationship in which all elements continually help to create and recreate the others (Hinton 2001, Scheper-Hughes and Lock 1987). Through this constant, fluid process, we come to “know” things about ourselves and our environments, which in turn influence meaning, epistemological groundings, and measures of normalcy (Hay 2008, Hinton 2001, Scheper-Hughes 1987).

More recently, Devon and Susan Hinton identified seven “ontological perspectives,” categorical ways of viewing the body and apprehending meaning (2002: 170). The sensation body involves the level of awareness people have about sensations they may be experiencing, and why certain sensations in some cultures are more significant than others (2002: 158-159). The physiological body is the idea that culturally different experiences of symptoms might have a biological foundation, whether because of genetics or of experience influencing gene expression (2002: 159-161). The ethnophysiological body deals with attentional amplification of physiological shifts: essentially, what sensations are a group of people more likely to pay attention to and amplify, and why (2002: 161-165)? Cameron Hay discusses this in relation to her research in Indonesia, suggesting that “one’s predefined state of being... serves to frame one’s interpretation, and to encourage a particular orientation to one’s sensations” (2008: 222-223). Similarly, the catastrophic cognitions body refers to how people “read” the body for any indications that something bad is happening; different cultures look for different sensations that may be pointing to different negative events (2002:1 68-169).

Devon Hinton’s work (2001) regarding panic disorder nicely illuminates these bodily perspectives. For the Khmer group of people Hinton studied, one’s neck may be associated with vast networks of meaning; his sensation body shows how these associations make certain experiences, such as a sore neck, significant (ibid: 305-306). Likewise, some of the neck associations for the Khmer may cause worry about that sore neck, a relatively normal or common occurrence, to inflate (ethnophysiological body) (ibid: 306). Or perhaps cultural meanings surrounding necks lead a Khmer person to focus excessively on sensations of the neck, many of which have the potential to be read as negative (catastrophic cognitions body) (ibid: 306-307).

Considering the body as a space that is at once physical and cultural, individual and collective, creative and created, can only add depth to some of the dialogue happening in psychological anthropology. With a focus on the ways that certain cultural, biological, theoretical, and epistemological backgrounds might be affecting perception, perhaps psychological anthropology can better address some of the key questions in the field--“Are you normal?,” “How do you know?,” and “How do you find meaning?” Indeed, our conceptualizations of somatic perception have potentially

far-reaching ramifications: If anthropologists take a view of themselves as outside “physical, conceptual, moral, and ethical” realms, what effect might that have on their writings about people (Farnell 2000: 399)? Other foreseeable problems with the concept of somatic perception relate to issues of “culture” as discrete and static, rather than as fluid and ever-changing. The view one takes of culture necessarily affects the view one takes of somatic perception, and vice versa. Rather than making assumptions about societies and people, the recent focus on embodied perception has led to questioning of established assumptions. Anthropology’s attempt to document the amazing variation of human experience would be useless if the attempt itself went unexamined. Somatic perception provides a powerful tool for such analysis.

*Related Concepts: Anthropology of the Body, Embodiment, Ethnography of Sensation, Somaesthetics, Somatic Experience, Somatization, Sensation*

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# WELL-BEING

*by Chelsea Kelly*

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The concept of well-being can vary not only across time but also from individual to individual and from culture to culture. One more certain aspect of well-being is the fact that no matter how it is defined or viewed, it is something that seems to have been an important pursuit throughout history. In *The Structure of Psychological Well-Being*, Norman Bradburn states that in his work on ethics, "Aristotle notes that 'both general run of the men and people of superior refinement say that [the highest of all goods achievable by action] is happiness [*eudaimonia*],' but with regard to what happiness is they differ, and the many do not give the same account as the wise," (Bradburn 1969: 6). While W.D. Ross (1949) uses the widely accepted translation of *eudemonia* as "happiness," he points out in *Aristotle* that it is probably more accurate to use the more neutral term of "well-being," mainly because Aristotle is not only interested in pleasurable feelings that are attached to the term "happiness" but in psychological and mental states and processes.

Achievement of a state of well-being and concerns about how one can achieve a life of well-being is a topic of debate. First and foremost, it is important to establish the meaning behind well-being and the many ways in which it can be interpreted. Psychologists Carol D. Ryff and Corey Lee M. Keyes explain a rather westernized view that aspects of well-being include, but are not limited to, "self-acceptance, positive relations with others, autonomy, environmental master, purpose in life, and personal growth" (Ryff et al. 1995: 719). Granted, this definition can be seen as a rather narrow view of well-being and could present a problem for anthropologists who work to create an understanding that encompasses diverse world views of a concept, without excluding any one perspective. With this task it is necessary to take into account that some societies may see well-being as a state of having available material and financial resources. An instance of financial and career stability being viewed as the more important aspect of well-being can be seen in an ethnographic study done by anthropologist Vanessa Fong.

In a study focusing on the 1979 implementation of China's one child policy, Fong expresses the general family favoring of male children versus female children simply because of the assumed male ability to rise higher up in the Chinese corporate ladder and in financial status. Fong states that, "Parents of daughters as well as sons believe that success in education and work will be the key determinant of their children's (and thus far their own) future happiness" (Fong 2002: 1103). With this, it is possible to draw parallels between well-being and individual happiness and to potentially see a

connection between the two as a universal element. Although some societies, such as China in the 1970's, may place priority on financial stability and career growth as a determinant of well-being, it is possible that others may see contentment, self-esteem, and quality of life as creators of happiness.

A state of well-being could also be described as having or feeling as though you have a fulfilled, high quality of life and are content with oneself and one's life choices and experiences rather than feeling a sense of emptiness or living an unsatisfying life. According to Robert Constanza,

"Quality of Life (QOL) is the extent to which objective human needs are fulfilled in relation to personal or group perceptions of subjective well-being. Human needs are basic needs for subsistence, reproduction, security, affection, etc. Subjective well-being (SWB) is assessed by individuals' or groups' responses to questions about happiness, life satisfaction, utility, or welfare." (Constanza et al 2008: 18)

This view of well-being makes it clear that the way to a sense of fulfillment and well-being is a complex, multi-directional path that is made up of many factors, both personal and cultural. Feeling a sense of fulfillment and contentment is largely determined by both implicit and explicit factors as well as what is expected of an individual, considering the social norms of a given society. According to this model, it is possible that if any individual has not met the social standards of what has been expected by their community, they may feel the pressures of being a failure or having not lived up to their potential. In addition to the need of contentment and acceptance by society, people generally have a variety of other human needs, such as stable relationships and interpersonal connection, which, if fulfilled, could lead to a sense of well-being or high quality of life.

In "Human Development, Child Well-Being, and the Cultural Project of Development," Thomas Weisner expresses that at the time of his publication, work and research dealing with well-being had developed a rather narrow perspective of measures for which well-being can be determined. Outcomes such as independence, verbal and literacy skills, IQ, and social adjustment became factors that measured a sense of well-being and whether or not the state had been achieved and correctly developed by the child's experiences growing up (Weisner 1998: 73). But Weisner expanded upon this theory and acknowledged that the concept of well-being should be taken a step further into an aspect of psychological and developmental well-being, rather than depending on measurable factors. To Weisner, it is important to clarify that "well-being is also the state of mind and feeling produced by participation in routines and activities that produce positive affectance; a sense of satisfaction with oneself in the world, as an agentic, valued actor, and internal psychological state of feeling good" (Weisner 1998: 76). With this, Weisner's, view as an anthropologist may be seen as similar with the perspective of psychologists, Ryff and Keyes, as well as those of Constanza.

Furthermore, Naomi Quinn, also an anthropologist, has done work with child rearing and development, and touches on aspects of well-being and socializing a child into a given community. She notes, "parents and other socializers everywhere exploit the child's desire for love and approval in the interest of their own agendas for molding

the child into a culturally desirable adult” (Quinn 2005: 599). Although Quinn focuses her work around the universals in child rearing, it is understood that culturally desirable adults vary significantly, just as views of well-being vary. In any given community, parents will mold their children into the favored product, just as they will socialize them to favor certain views and aspects of well-being that are dependent on their societal priorities. While theories about a sense of well-being may focus on a family’s wealth, opportunity, and social capital, well-being to an individual may simply mean happiness with oneself and contentment in life. Weisner takes it a step further with the approach that well-being for an individual will increase if there is congruence between the changing developmental needs in the given culture and the abilities of the individual to adapt to new daily routines deemed valuable by the community, thereby adding to our understanding of the achievement of well-being rather than just the concept itself.

The definition of well-being provided by Ryff and Keyes can be described as being a mental state that involves acceptance, positivism, and esteem while in the case presented by Fong, well-being is considered to be financial strength and a steady job but does not necessarily go hand in hand with a joyful life. This supports the idea that ideologies about a state of well-being are very culturally constructed and can easily differ. In a comparison of these two views, we can see that it is possible that while one community may see an adult with a low-level job and below average income but still happy as living in a state of well-being, others may view well-being as career success, simply because they could be well provided for in areas of material wealth and are able to live comfortably. In any case, it is clear that the concept of well-being can vary from culture to culture and is shaped around what each culture views as important for the individual. If a clear definition and explanation of the concept of well-being is created, then it is much easier to address questions concerning the pursuit and development of a state of well-being. In his work on child development, Weisner communicates that the achievement of a state of well-being in adulthood is first developed by their childhood. This means that the way a child’s family constructs their daily life is especially responsible for the later outcome of their development. According to Weisner, “The cultural provision of pathways for development is essential in producing one of the most important outcomes in development: well-being. The achievement of well-being is part of the cultural project of development. It is produced by the effective, innovative, and competent participation in the activities and routines deemed desirable by a cultural community. A family or community daily routine that is sustainable – fitted to a local ecology, meaningful to its participants, relatively stable and predictable to children, and balanced across the diverse interests of family members – provides greater well-being to a child” (Weisner 1998: 70-71).

If this is the case, we may consider well-being as being achieved by parents and the community promoting that the child takes part in actions and activities that are deemed important or desirable. If the child participates in engaging, innovative, and meaningful activities on a stable and balanced schedule, one can assume that the child will have a higher probability of achieving well-being in the future. Weisner explains this as a model of success that can be best described as the “ecocultural” model for pathways to well-being, as “the ability to successfully, resiliently, and innovatively participate in the routines and activities deemed significant by a cultural community” (Weisner 1998: 75).

Currently in questions of well-being, there seems to be a general agreement among professionals that well-being is a goal in the lives of many, but how that state is achieved, what kind of things lead to a state of well-being, and whether or not it is comprised of a single action or if it is a complex, multi-dimensional pathway is still up for debate. Ryff argues that literature prior to recent years is based on conceptions of well-being that abandon important factors of positive function and that the new perspective of psychological well-being follows “the recognition that the field of psychology, since its inception, has devoted much more attention to human unhappiness and suffering than to the causes and consequences of positive functioning” (Ryff et al. 1995: 719). This statement touches on the problem that well-being as defined and researched by psychologists is not the same research bases used by anthropologists. Her statement supports that psychology as a discipline focuses more on the concept itself while anthropologists would ask “why” and work more to understand the reasons and functions behind well-being. Presently with questions of psychological well-being, Todd M. Thrash has done work with inspirational effects on well-being and positive variables, publishing it under the title “Inspiration and the Promotion of Well-being: Tests of Causality and Mediation” and finding that general variations in inspiration have a direct effect on variations in the variables of well-being. Monica Briscoe has also done recent work with well-being, by looking at gender variations, publishing “Sex Differences in Psychological Well-being.” While recent work is increasingly in the field of psychology, the questions that anthropology can contribute to the concept could be extremely beneficial to the understanding of the many features of well-being, as well as expand to include the development and pursuit of well-being, rather than limited to the understanding of the concept alone.

*Related Concepts: Contentment, Happiness, Mental Health, Quality of Life, Resilience, Success, Security, Sustainability*

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