

21A.460J
Class Notes
March 31, 2005

The Quest for Therapy- Medical Pluralism in Lower Zaire by John Janzen

1. General impressions of the case studies
 - a. Too repetitive- All the people in the cases seemed to be members of the lower classes in society. What happens when people higher in society become ill?
2. Question: How do changes from traditional to urban setting change the identities of people?
3. We will discuss the three different bodies as described in the book by Margaret Lock and Nancy Scheper-Hughes. We will take discuss them on a case by case basis and look at the following questions. What body is the case dealing with? What is the patient's relationship with his/her clan? What possible political factors are there? How do types of illness change? And what is distinctive about the Congo view of the body?
4. Incest- described as a cause of affliction in some cases, but at other points we have read that marrying within bloodlines can strengthen them. How is the distinction made? Also, kinship diagrams were hard to follow. Looked at an example:
 - a. Parallel cousins- related parents are the same sex. Cousins are almost like siblings to one other. Marriage between these cousins is considered incest.
 - b. Cross cousins- related parents are of the opposite sex. Marriages can occur between these cousins, especially on the patrilineal side.
5. Death and the Invisible Powers: The World of Kongo Belief (1993)
 - a. Author: Simon Bockie
 - i. Born in the area of his study (the Congo)
 - ii. PhD in history from UC Berkeley
 - iii. Describes kinship relationships and the need to venerate ancestors (mpu)
 - b. Spirituality of Living Ancestors
 - i. Need spiritual blessings from ancestors, not doing so can cause afflictions and suffering
 - ii. Members of clan must recognize and admit wrongdoing. Clan goes to ancestors' rest home (makulu) with a goat to be sacrificed and palm wine and asks for forgiveness. They expect that tomorrow will then be better for them.
 - iii. They do not pray to the dead- they venerate them.
 - iv. Levels of community: ancestors → community/clan → lineages → family → individual
 1. Affliction results when web between levels is disrupted. The individual's sickness can be a sign of an affliction at any level.

- c. Family Relationships
 - i. Individuals are governed by fixed relationships that are determined by custom. There are senior and junior status lines that are evident in relationships between a mother and child. (Also, mother-child relationship is the most important relationship.)
 - ii. Blood of a family descends through the mother (matrilineal society). The term for mother includes birth mother and her sisters and brothers. An uncle gives more to his sisters' children than his own. The term for father is likewise an inclusive term.
 - iii. Matrilineal descent doesn't leave the father powerless, though. Dependent children live with their father and mother. The father protects his children from witchcraft.
- 6. The Gift by Marcel Mauss (French anthropologist, 1925)
 - a. Mauss theorized exchanges between social groups and issues of power. Gifts come with obligations of receipt and reciprocation. Those who give have more power than those who receive. A gift acquires spiritual potency (mana) from its giver.
- 7. Elementary Structures of Kinship by Claude Lévi-Strauss (1969)
 - a. Lévi-Strauss theorized what happens in the primitive mind. He stated that there are patterns in the mind that are similar regardless of cultural background. These patterns are attempts to categorize one's surroundings.
 - b. Kinship is a categorization at the level of society. It involves issues of seniority, gender, and power. Lévi-Strauss discussed the exchange of women in multiple societies, particularly the objectification of women. Marriage is a way of controlling power. A bride payment is compensation paid to a father for his daughter being taken from her family into another. He called this concept the theory of alliance.
- 8. Back to Janzen... Question: Is witchcraft real? Are there any similar concepts in the Western world?
 - a. Ideas that mental problems can be due to stresses and family and that modes of thought and feeling can influence physical health are very much a part of today's modern world.
 - b. The difference in African society seemed to be that sometimes if no cause was found by Western medicine, the people turn to traditional medicine and search for the cause.
- 9. Distinction between illness and disease
 - a. Disease- physiological causes
 - b. Illness- cultural understandings of the "therapy managing group"
 - c. It was also noted that even when real causes were found by Western medicine, the "local moral world" had its own causes that often needed healing.
- 10. Causes of affliction: incest, unresolved marriage issues, fetishes
 - a. A comment was made about the similarity between these African views and the ideas of "karma" and cycles of rebirth. They were similar, but the emphasis in African society is on ancestors rather than self.
- 11. Chapter 8- The Clan as a Patient

- a. Mbumba was in line to be clan chief (mpu) but a change in clan religion resulted in the termination of the mpu position. When Mbumba was afflicted by disease, he became a deacon and moved away from his clan to resolve the conflict. His identity as a person had been affected because his clan had abandoned one of their traditions.

12. Comparisons to Haiti

- a. When people are touched by spirits, they become ill, and sometimes this is a sign that the person should be initiated. Sometimes, children become afflicted by mistake. This causes a disruption in the family, and the child must be promised to the spirits in order to relieve the problems.
- b. We discussed previously that many women in Haiti were raped for political reasons, and when their physical injuries had psychological ramifications, such as leaving them not feeling like women. Men were also victims of sexual violence. They were often forced to leave their homes and everything they owned behind. Men also suffered psychologically because it was their job to provide for their families, and in many cases, they were not able to do so.

13. Questions of gender and power

- a. What was the role of women in treatment of illness and disease? Women took a back-seat role in the therapy managing groups. Generally, they did not make decisions regarding their health. It was noted, however, that there were some women in the therapy managing groups.
- b. Is illness a form of resistance? In the case of the male nurse, we saw that if a man is sick and cannot work, then he will not have to pay his family.
- c. Overall, people feel trapped by gender and kinship roles (both men and women).
- d. Modernization caused disruptions in traditional society, including changes in roles. These changes are also apparent in the Western world today as the roles of women in the family and in society are shifting.
- e. Even today, gender is a powerful symbol of gender roles and expectations. For example, women's status is often a sign or symbol in political conflict (abortion, rape).
- f. Discussion of eating disorders as a control issue.
 - i. Results from the confusion of the role of women in society since the women's movement in the 1970s. Also, the June Cleaver ideal of a woman.
 - ii. Cross cultural differences in views of women.
 - iii. Person with eating disorder is a sign of conflict in a family (compare to therapy managing group and clans in Africa). Psychology/psychiatry today even have family systems therapy.