

**Culture, Medicine and Psychology in Trialogue II – Applied Anthropology and Advocacy in the Interdisciplinary Field of Research in Anthropology & Medicine // Kultur, Medizin und Psychologie im Trialog II – Anwendungen und Advocacy im interdisziplinären Arbeitsfeld Ethnologie & Medizin**

**Abstracts in alphabetical order // program of the conference (in German) see end of file**

Sandra BÄRNREUTHER, anthropologist, M.A. (Heidelberg, SAI, AG Med. Anth.):

Between Home and Hospital: an Anthropological Perspective on Childbirth in Ladakh

In Ladakh, India, the number of hospital births has increased significantly since the 1980s, biomedical Medical Aid Centres are established in rural areas and the central government is pushing biomedical interventions with public campaigns and financial bonuses. In this paper, I will illustrate how biomedical treatments of childbirth are perceived and used in a village in rural Ladakh: do women use biomedical facilities for deliveries? Why do people decide to deliver at home or at the hospital? How do they experience their deliveries and assess their treatment at biomedical facilities? And how are ‘local’ and biomedical practices intermingled and negotiated in this particular setting? [sandbaer@gmx.de](mailto:sandbaer@gmx.de)

Bernd BRABEC de MORI, Ethnomusikologe (Graz, EMLAAK):

Indigenous Rituals for Social Corrections vs Psychotherapeutic-Spiritual Happenings:

About the Effects of Western Amazonian "Medical Songs"

Since Western Amazonian indigenous people and their music have been object to ethnographic research, it is evident that ritual songs have been ever considered an important element. The few historical sources available suggest that the songs did not change significantly in their musical form or the wording during the last 50 years. The contexts of the musical performance, however, has changed completely: in former times the medical songs were performed in closed sessions by ritual specialists (*yobé*) in order to solve medical or sociocultural problems of kinspeople. This was achieved by communicating with non-human beings through the ritual songs. In a modern setting, the songs are performed, when visitors from Western societies are accompanied in identification processes, in order to affirm their individual identity. In this setting, the ingestion of the hallucinogenic *ayawaska* plays the most important role. It can be shown that similar or the same songs have different effects, depending on different expectancies and especially on different socio-cultural prerequisites of the people involved. [leukozyt@gmx.at](mailto:leukozyt@gmx.at)

Ralf HILPERT, Psychiatrist (Bern):

„Quality of Life / Mental Health and Female Genital Mutilation“

*Objectives:* The current study deals with Female Genital Mutilation (FGM). The hypothesis was that intact girls have less emotional and physical problems and a higher quality of life. *Materials and Methods:* 100 female students age 16 – 18 from Khartoum, Sudan, were asked with two questionnaires (LKJ-J and YSR) and a series of closed questions about FGM, territorial origin, diseases and critical life events (CLE). *Results:* The prevalence of FGM was 65% (rural), 45% (urban) and 22% (foreign with Sudanese origin). The number of CLE in Khartoum was 13%, in the countryside 43%. Intact rural girls showed less aggressive behaviour, intact urban girls more faith/spirituality. *Conclusions:* Different reasons for the results are discussed. They should be used in the education process. [ralf.hilpert@gef.be.ch](mailto:ralf.hilpert@gef.be.ch)

Barbara KAZIANKA, anthropologist, M.A. (Wien, EMLAAK): The Role of Traditional Medicine in Constructing Indigenous Identities of the Maya in the Frame of Globalization

The changes of society which take place through the exchange processes, understood under the term „globalization“, were recognized from the members of that society as conflicts of generations. For that reason it is necessary to discuss and negotiate “identity” frequently. “New” concepts of health and illness/disease/sickness-healing, which result from the interactions of different medical systems, are modifying the medical space for manoeuvres of the local inhabitants. Because of that situation and the strong presence of the topics “identity”, “culture” and “change” inside the medical dialogue, I decided to investigate about the role of traditional medicine in the construction of indigenous identities within the frame of globalization. Thereby two questions are in the focus: (1) How identity is negotiated within the medical dialog, and (2) how traditional medicine is discussed within the identity discourse?

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Ronny KRÜGER, psychologist (Berlin) & Ulrike KLUGE, psychologist (Berlin, AGEM): The Downfall of a Civilization? What actually Happened to the GRD? Annotations to the Development of the East German Culture after the German Reunification.

In reference to ethno-psychoanalytic concepts of Georges Devereux the lecturers attend to the development of the East German culture and the psychological implications of the social, the political as well as the cultural changes both starting with and following the German reunification (“Wende”) 1989. Relating to an essay of Jonathan Lear (2007), in which he analyzes the downfall of an indigenous civilization in Northern America, they try to identify parallels to the East German context both on the individual-psychological and the collective-cultural level. The analysis of the authors’ own personal reminiscence of their encounters with the foreign and the familiar during the reunification, and the associated anxieties and irritations closes up the article. Here-upon they particularly make use of the tool of counter-transference to gain insight, thereby following Devereux’s suggestion. Instead of searching hastily for an explanation for the “Phenomenon DDR”, they suggest to rather focus on *bearing a transiently non-comprehension*. They consequently demand giving space to and accepting the tension, ambivalence and irritation (as introduced by Winnicott) in contrast to an immediate rejection.

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Claudia LANG, anthropologist, PhD (München, AG Medical Anthropology): Depression and the Re-vitalisation of an Ayurvedic Psychiatry in Kerala, India

More and more people in Kerala are diagnosed as „depressive“. Alongside allopathic psychiatry, modern psychology, religious therapies, astrological counselling and naturopathy patients are also treated in āyurvedic clinics. This raises the question how the biomedically and psychologically defined disease entity “depression” is negotiated within the āyurvedic discourse. In this paper I will show how the appropriation of depression is related to the (re)invention of āyurvedic psychiatry as an ancient and as well as a modern science. For revitalizing *bhūt vidya* or *graha cikitsa* as an ancient as well as a modern science, notions that originally denote possession or a disturbance of the *doshas* are being reinterpreted in the light of allopathic-psychiatric notions like “depression”. This process shows on the one side how modern institutionalized āyurveda is forced to engage in the hegemonic allopathic-psychiatric discourse. On the other side it proves once again the creativity to appropriate and integrate biomedical categories into redefined āyurvedic concepts.

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Natalia PICARONI SOBRIDO, anthropologist, M.A. (Wien, EMLAAK):  
“Practices of Difference” within Latin-America’s Health Care Systems: Insights from an Anthropological Study about the Latin American Medical School Project (ELAM)

Through a special national fellowship program young people from whole Latin America are studying medicine at several universities in Cuba. The students come from various origins and represent the different ethno-social groups of the Americas. Their political, religious, ideological and cultural background is as well quite different the one from the other. To be in accordance with regional social formations, most of these students come from marginal social sectors and/or belong to underprivileged ethno-social groups. After completing their study most of them return to their country of origin. Currently there are about 6.000 health care professionals. In the present social and political context of Latin America this scholarship program plays an important roll in order to answer to the critical question on social justice within the field of medical care and attempts to promote the multicultural and intercultural advocacy in this field. This lecture discusses different aspects of the *praxes* in medical work of these young graduates and the meaning of this as *practices of difference/prácticas de diferencia* (Arturo Escobar) from an anthropological perspective. [natalia.picaroni@gmail.com](mailto:natalia.picaroni@gmail.com)

Evelyne PUCHEGGER-EBNER, anthropologist, PhD (Wien, EMLAAK, AGEM):  
Basic research and/or applied anthropology: EMLAAK as an example

This presentation describes the structure and scientific goals of EMLAAK, the ethno-medical working group for Latin America, which was set up in 2006 in Vienna. The research focuses of the individual members reflect the interdisciplinarity of the group on the one hand and the common methodological denominator –visual anthropology – on the other. This presentation thus aims to especially address the range of topics and methods of visual anthropology, i.e. its practicability as well as advantages and disadvantages in a medical-anthropological/ethno-medical context. It also touches on the issue of whether and by which audio-visual methods the ideologies, belief concepts and ethics being inherent in the respectively cultural traditions and worldviews can be 'translated' into 'western' vision or how spiritual concepts, ideational views, social norms and values can be made 'visible', can be represented and realized by photographic or audio-visual media. Moreover, the question will be posed what meaning basic research has today, if any at all. [Evelyne.Puchegger-Ebner@univie.ac.at](mailto:Evelyne.Puchegger-Ebner@univie.ac.at)

Karin RICHTER, psychotherapist (Remscheid, AGEM): A Trip to the Goddess Tanit (Ibiza): Bridging the Gap between Indigenous and Western Medicine

Indigenous medicines and Western psychotherapies can learn much from each other. A major barrier for the "Learning Exchange" is that cultural practices are embedded into a coherent worldview. They can not been transferred one to one. It requires a special bridge to incorporate healing treatments from one culture into the concept of another one. This is to some extent difficult, because most of the indigenous societies can work with one single *meta-narrative* within their performance in contrast to Western psychotherapies. A meta-narrative will mean an integrating element of a culture bound world view. Western psychotherapies and their users possess a variety of these meta-narratives with mostly lower reliability. Treatments are performed and confirm in the same time these coherent world views. In the contribution we will present an approach "bridging" shamanistic and Western therapeutic procedures. In the course of our daily work as psychotherapists we have developed a bridge between the performance of a trance ritual in connection with archetypical body postures and Western therapeutic practice, using the concept of the goddess Tanit and her visual representation. In an early preparatory phase of the therapeutic performance the meta-narrative of this ancient goddess of the isle of Ibiza is introduced to and incorporated by the therapy group. [KFRichter@aol.com](mailto:KFRichter@aol.com)

Yvonne SCHAFFLER, anthropologist, PhD (Wien, EMLAAK, AGEM): Dramatic Aspects of Healing in Rites of Possession in the Dominican Republic

Rites of possession as conducted in the Dominican Republic are functioning as reinforcement of one's spiritual power and serve to give advice to clients, or they are organized to thank the spirits for received benefits. They are performed either in private or as group rituals. The contribution aims at analyzing the interaction between the healer and his/her client(s) under the aspect of *performance*, which involves a symbolism that creates authority and thus the ability to heal (keyword: bedside manner). In the course of such ritual performances the healer not only advises his/her clients and helps them with their problems, but also displays his/her spiritual power and thereby advertises his/her own competence. Since everything that is said and done within a ritual requires legitimization on the part of the spirits, the contribution exposes possible criteria for a successful performance of possession. What is needed in order to perform a successful diagnostic and healing? What are further goals of ritual performance, and when is it considered as a success? [yvonne.schaffler@gmail.com](mailto:yvonne.schaffler@gmail.com)

Maria VIVOD, anthropologist, PhD (Novi Sad/Serbia, AGEM):  
Rethinking Ethnopsychiatry – a Case Study from Serbia

I intend to picture a cultural case study inspired by the article of Tobie Nathan and Cathérine Grandsard 'PTSD and fright disorders: rethinking trauma from an ethno-psychiatric perspective', a paper presented at the Third International Trauma Research Net Conference, September 2006. Their article analyzes the trauma and the traumatic experience through the looking glass of ethno-psychiatry. The traumatic experience which is a "methodological challenge to psychopathology research and theory" (*idem*) is treated in many cultures as 'fright'. The cultural case I intend to depict is an illustration which gives an additional example to the upper mentioned problem; it is a study of a popular healeress, who treats an illness known in the South-Slavic cultural therapy as the *strava*. The concept of the *strava* – or fright – is deeply rooted in the popular belief about the supra-natural creatures, the fairies. A particular cultural therapy used by the healer – the fairy-clairvoyant – is a response to this disorder. According to the mentioned authors, individuals who suffered a traumatic event can develop post-traumatic symptoms. The ones who develop these symptoms are the patients. Those who don't are using the trauma as a "tool for a transformation" (*idem*). The study aims to describe in ethnographical manner the conditions of transformation of the individual, here taken as an example, who embraced a role of a healer and the settings of this act of hers. [vivod@hotmail.com](mailto:vivod@hotmail.com)

Constanze WEIGL, anthropologist, M.A., Dr. des. (Heidelberg, SAI, AG Medical Anthropology): Challenges during a Medical Anthropological Field Research on Fertility Behaviour of Muslim Women living in New Delhi, India

Researching fertility behavior and contraception of Muslim women in India is a hazardous enterprise due to a number of reasons. Discussions about the growth of the Muslim population often were motivated by political interests, and the so called Muslim fertility is especially used by Hindu-nationalist parties in their battle for political power. In addition, the topic of reproductive health behavior is an intimate one and talking about it is regarded in many parts of the patriarchal Indian society as a taboo. In this presentation it will be further examined if and how the biographical background of the researcher influences the data collection process. What are the challenges for a non-native researcher doing fieldwork on reproductive health issues among Muslim women in India? [w.constanze@gmail.com](mailto:w.constanze@gmail.com)

Nicole WEYDMANN, social work researcher (Jacobs University Bremen):

Concepts of Health, Illness and Healing in Science –

A Journey through Multifarious Disciplinary Perspectives (Poster)

Various cultures and disciplines differ with respect to their concepts of health, illness, and the treatment of illness. In *medical anthropology*, the focus is on the totality of the cultural framework; in *traditional medicine*, this focus is on the prevention, alleviation, or cure of disease; in *sociology*, societal aspects are of prime importance; and *psychology* concentrates on the subjective experience of, on the actions concerning, as well as on the psychosocial foundations of disease and disease management. Concepts of health, illness, and treatment in turn are closely related to patients' expectations concerning medical treatment. The present poster will illustrate the various disciplinary approaches to health, illness, and healing, and how these are related to patients' subjective theories concerning treatment and cure.

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Wolfgang KRAHL, psychiatrist MD, psychologist (München, AGEM): Subramaniam Temple Feast in a Community with Hinduistic Tamils in Batu Gajah, Malaysia (film, 29 min)

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Martin BAER, anthropologist, films (Berlin). Film with discussion: "Befreien Sie Afrika! = Free Africa" (83 min) <http://www.baerfilm.de/frameseiten2/impresum-frame.htm>

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**Program: Friday, 4th December 2009 // 15: 00 – 18:15; Film 19: 30**

15: 00 – 18: 15 Grußworte // **(1) Curare-Panel Ethnopsychiatrie.** Moderation Senganata MÜNST, Ethnologin (Freiburg, AGEM) // 15: 15 – 16: 00 Claudia LANG: Depression und die Revitalisierung ayurvedischer Psychiatrie in Kerala, Indien // 16: 00 – 16: 45 Maria VIVOD: Re-thinking Ethnopsychiatry – A Case Study from Serbia.

**Georges-Devereux-Lecture:** Moderation Ekkehard SCHRÖDER; Nervenarzt (Potsdam, AGEM) // 17: 15 – 18: 15 Ronny KRÜGER & Ulrike KLUGE: Untergang einer Kultur? Oder: Was ist eigentlich aus der DDR geworden? Anmerkungen zur ostdeutschen kulturellen Entwicklung nach der Wende. // 19: 30 Film: Free Africa (Martin BAER, 83 min)

**Saturday, 5th Dec: Morning 9: 00 – 12: 30 // Afternoon 14: 00 – 17: 30**

**(2) Frauengesundheit als Thema im Dialog Kultur, Medizin & Psychologie.**

Moderation Katarina GREIFELD, Ethnologin (Frankfurt, AGEM)

09: 00 – 09: 45 Sandra BÄRNREUTHER: Zwischen Haus- und Krankenhausgeburt. Ethnologische Perspektiven auf Geburt in Ladakh // 09: 45 – 10: 30 Constanze WEIGL: Herausforderungen bei einer medizinethnologischen Untersuchung des Fertilitätsverhaltens muslimischer Frauen in Neu Delhi, Indien // 11: 00 – 11: 45 Ralf HILPERT: Lebensqualität / Seelische Gesundheit und weibliche Genitalverstümmelung // 11: 45 – 12: 30 (Poster) Nicole WEYDMANN, Sozialarbeitswissenschaftlerin (Bremen): Gesundheits-, Krankheits- und Heilungskonzeptionen im Spiegel der wissenschaftlichen Kulturen – ein Streifzug durch die vielfältigen Perspektiven des Heilsamen. // and others.

### **(3) Ritualdiskurse im interdisziplinären Arbeitsfeld Kultur, Medizin & Psychologie**

Moderation: Claudia LANG, Ethnologin (München, AG Med. Anth.)

14: 15 – 15: 00 Yvonne SCHAFFLER: Dramatische Aspekte von Heilung in Besessenheitsriten in der Dominikanischen Republik // 15: 00 – 15: 45 Karin RICHTER: Vom Brückenschlag zwischen indigenen und westlichen Heilverfahren. Eine Reise zur Göttin Tanit (Ibiza) // 16: 15 – 17: 00 Bernd BRABEC de MORI: Von indigenen Ritualen für soziale Korrekturen zu psychotherapeutisch-spirituellen Happenings: über die Wirkung "medizinischer Lieder" in Westamazonien // 17: 00 – 17: 45 Wolfgang KRAHL: (Film, 27') Subramaniam-Tempelfest in einer Kommune hinduistischer Tamilen in Batu Gajah, Malaysia.

**Sunday, 6th December 2009 // 9: 15 – 13: 00 Uhr**

### **(4) Angewandte Medizinethnologie: Aspekte im interdisziplinären Arbeitsfeld Kultur, Medizin & Psychologie.** Moderation: Yvonne SCHAFFLER u. Ekkehard SCHRÖDER

09: 15 – 10: 00 Barbara KAZIANKA: Die Rolle der traditionellen Medizin in der Konstruktion von indigenen Identitäten der Maya im Spannungsfeld der Globalisierung  
10: 00 – 10: 45 Natalia PICARONI SOBRIDO: Differente Praktiken des Denkens und Handelns in medizinischen Versorgungssystemen Lateinamerikas. Bericht über eine kultur- und sozialanthropologische Studie zum Projekt *ESCUELA LATINOAMERICANA DE MEDICINA*  
11: 15 – 12: 00 Evelyne PUCHEGGER-EBNER: Grundlagenforschung und / oder „Applied“ Anthropology“ // 12: 00 – 13: 00 Schlussdiskussion. Moderation Wolfgang KRAHL.

**Organized by AGEM = Arbeitsgemeinschaft Ethnomedizin // ÖEG = Österreichische Ethnomedizinische Gesellschaft // EMLAAK = Ethnomedizinischer Lateinamerika-Arbeitskreis, Wien // AG Med. Anth. = AG Medical Anthropology and AGMA Heidelberg Programm Design: Ekkehard Schröder – 12 CME Punkte (LAEK-BW).**

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