

Fadiman – The Spirit Catches You and You Fall Down – Ch. 16-19, pp. 225-288

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- Chapter 16: Why did they pick Merced? p. 225-249
 - Psychological effects of removal from one's culture
 - Dang Moua, early immigrant and promoter of Merced
 - He and his family first settled in Richmond, Virginia with aid from a church group
 - Working 18 hrs/day for \$2.90/hr, figured he would be dead in 3 years
 - bought a \$550 used car
 - told his sponsors he is leaving the next day
 - they offered him a better car
 - "I say, thank you for that but if I take your car I owe you something. They were so mad!"
 - gift creates social obligations
 - proof of this is that they were angry that he did not accept!
 - They want his gratitude
 - That is, they want the social obligations created by the gift
 - Next day, he burned joss sticks, prayed to ancestors for a safe trip
 - Sponsor was furious again; he should pray to the Lord
 - "I never cry in my life, not even going to Thailand, and that was hell, but now I cry"
 - now he did not even have his identity anymore
 - no one but his own family could understand who he is in the way that other Hmong would
 - in a way, harder to take than the hell of war in an environment and culture that he knew
 - similar to Lees, who said that Lia's illness was more sad than the horror of war and death of several other children escaping Laos
 - at least those things were known and comprehensible
 - "I'm small but I am an adult person. I have to pursue now my plan."
 - Again: he feels that his identity is being withheld from him
 - Remember Foua saying that she felt she had become stupid and helpless
 - He is asserting that he is an adult, autonomous, not helpless
 - Conflict with locals
 - Arrival of Hmong in Merced coincided with economic downturn
 - Problem: 79% of Hmong were on welfare
 - 50% federal, 47.5% state, 2.5% county – but that added up to a lot to the county
 - had to close libraries, stop maintaining parks, leave 5 sheriff posts vacant, etc. p. 233
 - also high unemployment generally due to changing farming
 - Closing of the nearby Air Force base
 - Changes in distribution of sales and property taxes, with more taken by the state
 - Hmong were the most visible of these irritants
 - Resented as freeloaders

- Conflict due to different understanding of social obligations
 - Hmong expected Americans to be grateful to them for their service
 - Americans expected Hmong to be grateful to them for their welfare
- “differently ethical”: different constructions of legitimacy
 - Cheating on DMV test by sewing crib sheets
 - *Paj ntaub*
 - why be ethical towards the government, when you have never been treated fairly by any government?
 - Why be ethical towards the government, if that would conflict with your *real* obligations to your clan?
 - Hmong myths full of characters who lie to authority figures to help their families or friends
 - Hmong lied about ages of children and old people in Thai camps in order to get them into the US or get larger food allotments
 - why would you NOT do that?
- What IS legitimate to the Hmong
 - Very strong obligation to help and stay with clan relatives p 244
 - Stress on community leaders, leads to burnout
 - “For the Hmong, it is *never* everyone for himself.” p 247
 - identity is social; one’s identity necessarily involves social obligations
- More on psychological effects of being removed from one’s culture (continuing from previous notes)
 - Jonas Vangay: “I am the chameleon animal. You can place me anyplace, and I will survive, but I will not *belong*. I must tell you that I do not really belong anywhere.” 247-249
- Chapter 17: The eight questions p 250-261
 - Lia’s case confirms Hmong distrust of American medicine, and American low opinion of Hmong parents
 - “true” (western medical) cause of Lia’s brain death:
 - Lia’s brain destroyed by septic shock due to blood infection, not seizures p 254
 - The only treatment connection might have been Depakene, which can lower white cell count and make one more susceptible to infection
 - Lee’s claim that too much medicine caused it may have been true
 - “tell those people at MCMC that the family didn’t do this to the kid. We did.” p 255
 - ...but does the “truth” really matter?
 - is this a bit of a writer’s trick, seeking irony or a twist
 - but really in something that is not particularly significant?
 - or that would be significant to western readers who have not internalized the message that “consensual reality” is what really matters?
 - that is, this part is striking mostly if you did not really get the point of the book...
 - “Lia’s case ended my idealistic way of looking at the world.” 259
 - we could have done anything and they would still have thought that their way was right and ours was wrong.

- that is a basic feature of culture: it is naturalized
- Arthur Kleinman’s (medical anthro and psychologist) 8 questions to elicit the patient’s “explanatory model” 260
 - 1. What do you call the problem?
 - 2. What do you think has caused the problem?
 - 3. Why do you think it started when it did?
 - 4. What do you think the sickness does? How does it work?
 - 5. How severe is the sickness? Will it have a short or long course?
 - 6. What kind of treatment do you think the patient should receive? What are the most important results you hope she receives from this treatment?
 - 7. What are the the chief problems the sickness has caused?
 - 8. What do you fear most about the sickness?
- Kleinman’s response to Fadiman’s estimated answers
 - 1. “Get rid of the term “compliance”. It’s a lousy term. It implies moral hegemony.”
 - **Hegemony**: dominance, preeminence of one person or group over another; preponderant authority or control over one group by another
 - how does this relate to cultural hegemony? What is the difference?
 - 2. “Instead of looking at a model of coercion, look at a model of mediation... find a Hmong... or medical anthropologist, who can help you negotiate. ... requires compromise on both sides. Decide what’s critical and be willing to compromise on everything else.”
 - Would that have been feasible?
 - If Lia isn’t getting the right drug dosages, then what should a doctor, nurse, or social worker do?
 - 3. “...as powerful an influence as the culture of the Hmong patient and her family is on this case, the culture of biomedicine is equally powerful. If you can’t see that your own culture has its own set of interests, emotions and biases, how can you expect to deal successfully with someone else’s culture?”
 - culture of biomedicine
 - Culture of biomedicine 273 (Chapter 18)
 - “But diseases aren’t caused by spirits”
 - “I’m not an anthropologist, I’m a gastroenterologist”
 - encourages dissociation, lack of emotional involvement
 - interests, emotions, biases...
 - what *are* some?
 - Point: You are just as immersed in and guided by a culture as they are.
 - And much of that culture is arbitrarily constructed
- Chapter 18: The Life or the Soul p. 262-277
 - List of cases in which Hmong medical treatment turned out badly
 - A few that turned out better
 - Successful case of getting Hmong man to agree to have his wife take isoniazid while pregnant
 - Francesca Farr
 - Made a house call

- Worked with an assertive cultural broker who had her start with appropriate topics, talk to husband, not wife, etc.
- Worked within their belief system, not hers (including feminism)
- Bruce Thowpaou Bliatout, Hmong medical administrator, suggestions:
 - Use same-sex doctors
 - Involve families
 - Use bicultural interpreter/consultants
 - Enlist family and community leaders to help persuade
 - Minimize blood-drawing
 - Allow relatives and friends in room around the clock
 - Allow shamans to practice in the hospital
 - Encourage traditional arts for mental health reasons
 - Weaving, music, dance, silversmithing
 - Acknowledge Hmong military contributions
 - Promote clan reunification through resettlement
 - Don't undercut father's authority
 - Allow them to help themselves more
 - Integrate western and Hmong medical practices
 - provides psychological and psychosomatic benefits
 - Especially *tsiv neeb*
 - They are threshold crossers
 - Mediators
 - They give external explanations for psychological problems: that imposes no guilt on the patient
 - If *tsiv neeg* fails to cure using his methods, patient may accept that problem is physical and accept surgery, etc.
- what is more important, the life or the soul? 277
 - Bill Selvidge, doctor: the life
 - Sukey Waller, “fixer of hearts”, psychologist: the soul
- Chapter 19: The Sacrifice p. 278-288
 - Fadiman describes the ceremony as factual, just as she did the medical treatment
 - does she believe that the *tsiv neeb* is flying around, negotiating and fighting with *dabs*, etc.?
 - does it matter?