

SIR: There are conceptual and methodological problems with Littlewood's 'new cross-cultural psychiatry' (*Journal*, March 1990, 156, 308–327), just as there are with the more traditional cross-cultural psychiatry (Haldipur, 1979). I shall adumbrate an epistemological approach to the new cross-cultural psychiatry similar to that taken by Dr Littlewood to psychiatry.

(a) Culture is difficult to define without tautology, as Dr Littlewood himself acknowledges (Appendix, point 3). Not only are there trans-Atlantic differences in the approach, but there may be over a hundred definitions of culture. It is often a blanket term used to designate a variety of environmental factors.

(b) Although cultural and societal norms and values exist, conformity or non-conformity to these by individuals usually calls for psychological explanations (Homans, 1967).

(c) There is a 'category error' in stating that culture *influences* or *causes* us to consider certain types of behaviour as normal or abnormal: among other ideas, those about what is normal behaviour *is*, by most definitions, culture. It is difficult then, to separate ideas about behaviour from culture of which it is a part.

(d) We are told that if the new cross-cultural psychiatrists had their way, research in various communities would be done by anthropologists and not psychiatrists in order to obviate any influence of Western psychiatric education in perceptions of abnormality. However, anthropologists cited by Dr Littlewood appear to focus their interest on larger groups such as ethnic communities, tribes or even nations. Surely, individuals live in families. And might it not be safe to assume that the norms and values inculcated by families may be equally important? On occasions, these norms and values may run counter to those of the larger group, such as in the case of ethnic minorities. An anthropologist truly interested in carrying out Leff's mandate (*Journal*, March 1990, 156, 305–307), while studying the larger community, may have to acknowledge that individuals belong to various concentric groups or organisations, and that it is difficult to separate and weigh the relative importance of these.

(e) A perusal of references cited by the two authors shows that a number of them are studies in non-Western countries or of ethnic minorities living in the West. It makes one wonder if for new cross-cultural psychiatrists, 'culture' stopped somewhere this side of Suez. What is even more troubling is the predilection for the non-literate sections of those societies. This could have been a relatively harmless preoccupation, except that sweeping generalisations

are often based on observations of a small section of the community. It is as if one were to write about healing practices in north-eastern United States by observing Christian Scientists in Boston, without any reference to practices of the majority. The description of Mahanubhav healing centres of western India reveal interesting practices and rituals; but they exist side by side with Ayurvedic (Obeyeskere, 1977) and allopathic medical practices. The former, indigenous to the region, has a sophisticated classificatory system, not too dissimilar from our own (Haldipur, 1989). Thus, to characterise the more scientific modern system of biomedicine as entirely Western, and its adoption by the Third World as 'psychiatric imperialism', is probably unjustified.

Finally, it may be worth recalling the words of the well known anthropologist Claude Levi-Strauss in *Tristes Tropiques*: "I had looked for a society reduced to its simplest expression. That of Nambikwara was so far reduced that I found only men there".

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References

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SIR: Dr Haldipur conflates my paper (*Journal*, March 1990, 156, 308–327) with that of Leff (*Journal*, March 1990, 156, 305–307) who is, on the substantive points, saying the opposite of myself.

In as much as I can grasp the comments made on my own paper, I agree about the problem of defining culture: indeed, I refrain from attempting such a task, merely citing Geertz' not unuseful statement. To Cisatlantic anthropologists, 'culture' and 'society' are synonymous. The new psychiatry would deny, however, that conformity to social norms is best approached through the procedures of individual psychology, for the norm and its inversion both have their social meaning, as legitimate from the scientific perspective as any other, as simply elements in a complex web of interactions in a society. I