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Roberto Beneduce, *Archeologie del Trauma. Un'Antropologia del Sottosuolo*

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movement itself. This book makes a significant contribution to the recovery literature and provides an interesting descriptive history of recovery within the wider discipline of mental healing. For these latter reasons, it is likely to become recommended reading for those interested in recovery.

Roberto Beneduce, *Archeologie del Trauma. Un'Antropologia del Sottosuolo*. Bari: Laterza, 2010. 216 pp. €20.00 (pb), ISBN 9788842092490.

Reviewed by: Cristiana Giordano, UC Davis, USA

Archeologie del trauma. Un'antropologia del sottosuolo (Archaeologies of Trauma: An Anthropology of the Underworld) is a complex and in-depth reflection on the various histories of the category of trauma and their therapeutic implications. It is a much-needed contribution to ongoing debates in transcultural psychiatry and medical anthropology on issues of mental health and difference, one that questions the genealogy of the concept of trauma while showing its contradictory effectiveness in various contemporary contexts. Although the book is written in Italian, its content and arguments are broadly relevant and in rigorous conversation with a vast and eclectic body of international literature and debates.

Beneduce's reflections are informed by his different intellectual and professional positions. He writes both as an anthropologist who has done extensive research on mental health and healing practices in Africa (with an interest in the politics of trauma and intervention in conflict zones), and as one of the leading figures in contemporary Italian ethnopsychiatry, who has devoted a considerable part of his clinical effort to the treatment of migrants, political refugees, and victims of torture and human trafficking. In *Archeologie del trauma*, Beneduce is in line with a critique of diagnostic categories initiated by Frantz Fanon. In the context of colonial psychiatry, Fanon denounced psychiatric diagnoses as institutional instruments that disguise and erase the role of history, and thus turn individual suffering into a homogenized biography. Beneduce refers to diagnoses as masks that conceal the sense of suffering, violence, and horror (p. 27). When we engage with the language of trauma we risk focusing on the wounded body and the psychic consequences of it, rather than on the origins and cause of that pain (p. 32). The author argues that the more we think about trauma as a reality – both psychological and social – the more History (which he capitalizes) becomes invisible (p. 36). In order to account for experience and its multiple dimensions (psychological, political, cultural, etc.), History must find a place to resonate in individual fragmented biographies and the way in which people make sense of violence and suffering.

The category of trauma is grounded in the assumption of a universalistic idea of the subject, of what it means to be human and a victim. Humanitarian discourse embodies these universals and translates them into projects of intervention, rehabilitation, and reconciliation. This book asks what is lost in the deployment of these homogenizing concepts and the representations of trauma that characterize

contemporary forms of psychological and humanitarian endeavors (p. 125). Beneduce proposes a critical reading of trauma that rejects the naturalization of this concept. In this effort, he is in conversation with other scholars who have challenged the construction of the discourses around trauma and its treatment (Kirmayer, Lemelson, & Barad, 2007; Fassin & Rechtman, 2009; Summerfield, 1999; Young, 1995).

The book is organized in seven chapters. After setting the stage of the central questions around which the book revolves in the Introduction and Chapter 1, Chapter 2 explores the ways in which the politics of memory have been broached in psychological debates in the nineteenth and twentieth centuries. This effort is inscribed in the larger project of outlining an archaeology of trauma in the Foucauldian sense of the term. This chapter guides the reader through the different theories of trauma, starting from the more somatic definitions of the term (trauma as a “wound” or a “nervous shock”) that dominated the social and medical scene of the second half of the nineteenth century, until the term started to take on a more psychological connotation at the turn of the century thanks to the work of Janet and Freud. Every definition of trauma, the author reminds us, presupposes different forms of forgetfulness and memory that can fall under the categories of “dissociation” or “repression,” depending on the model of trauma invoked and the treatment envisioned.

In Chapter 3, Beneduce questions the aptness of psychological theories of trauma to grasp the challenges posed by the madness of history in different contexts of war and violence. In these theories, History appears to be foreclosed and can only manifest itself in the form of symptoms, behaviors, and beliefs. Psychoanalysis provides a different understanding of temporality and memory that disrupts the ways in which historical time organizes events in a chronological rhythm. The repressed time of trauma is seen and heard in the broken narratives of patients, in their dreams and repetitions. Through the well-known debate between Mannoni and Fanon about the impact of colonization on the psyches of the colonizers and the colonized, Beneduce reclaims the space of History in the stories of immigrant patients, asylum seekers, and victims of torture that he encounters as a clinician and in which he hears the echo of events that categories such as that of PTSD relegate to a standardized understanding of trauma. He reminds the reader that trauma cannot be located exclusively within the unconscious, and that the social, cultural, and political relationships within which the subject is positioned represent crucial elements of its history, memory, and modalities of existence and suffering.

Chapter 4 opens by pointing to the usefulness of PTSD. Beneduce explains that this category, although problematic, has re-introduced the concrete historical reality of the events at the origins of trauma, preventing us from seeing them only through the lens of psychoanalysis as the mere triggers of the unconscious and the original trauma. The figure of the victim emerges as central to this debate about history and trauma. As others have pointed out, we live in a time that is obsessed with this issue, to the point that we can talk about an “empire of trauma” (Fassin & Rechtman, 2009; Watters, 2010) made of experts and techniques aimed at

addressing the psychological dimensions of conflicts, while overshadowing their political dimension. Unlike Fanon, who was not concerned with outlining a general theory of trauma but rather with providing an historical analysis of the psychological consequences of colonial violence, the contemporary critique is characterized by psychiatric and psychological interventions aimed at reparation and, at the same time, redefining what counts as suffering. Today, we are more inclined to talk about resilience among victims of disasters than of political resistance of the oppressed. The political is overshadowed by the psychological and, in some cases, by the cultural.

In Chapters 5 and 6, Beneduce grounds the reflections developed in the first four chapters in his long-term clinical experience with victims of political violence and torture. One of the strengths of the book is its fundamental relationship with the author's experience as a clinician. The clinical cases point to the relationship between history and memory, and what it means to bear witness to violence, both on the part of those who have experienced it in person, and those who listen to its account in patients' broken narratives and wounded bodies. A testimony made of memories that one masters is radically different from the testimony made of memories that possess and overwhelm us. The clinician is more concerned with this second kind of account, which can only be heard in the silences and omissions of narrative and in the interstices of discrepant stories. How can our theories of trauma do justice to what they inevitably obscure? Beneduce has broached these questions in other writings, where he has provided ample and nuanced ethnographic and clinical material to support his theoretical position on trauma, care, and the ethics of intervention (Beneduce, 1998, 2007, 2008a, 2008b). In this part of the book, Beneduce also turns to the Palestinian case to show what Fanon identified as the structural intertwining of History and the unconscious, self and the world, auto-representation and historical alienation (p. 179).

The last chapter brings these reflections to a close – or better, to a different opening – by asking the question of what kind of therapeutic techniques and multiplicity of categories are necessary in order to explain the complexities of difference, the intricacies of history, and the modalities of silence. Beneduce's skepticism vis-à-vis discourses of emergency and humanitarian intervention is a reminder that institutions often speak on behalf of the marginalized and those who suffer by ignoring the political, cultural, and moral dimensions of their condition.

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Uwe P. Gielen, Juris G. Draguns, & Jefferson Fish (Eds.), *Principles of Multicultural Counseling and Therapy*. New York: Routledge, 2008. 488 pp. CDN\$39.95 (pb), ISBN 9780805862041

Reviewed by: Andrew G. Ryder and Tomas Jurcik, *Concordia University, Canada*

“There is more to counseling and therapy than exists in the United States” (p. xv). No great revelation to *Transcultural Psychiatry* readers, to be sure, but a refreshing admission for a multicultural therapy book aimed primarily at American psychologists. This opening sentence to the editors’ preface sets the tone for this volume. More pleasing still, by the third paragraph the editors are critiquing the tendency for American work on culture and mental health to remain focused on the major U.S. ethnic blocs. By contrast, this book aims to emphasize general principles, using numerous and varied examples to flesh out the meanings of these principles. Following up on their earlier handbook, *Culture, Therapy, and Healing* (Gielen, Fish, & Draguns, 2004), the editors set out to develop a briefer volume for non-specialists; specifically, to develop a text that “may profitably be assigned together with other reading materials reviewing interventions with specific cultural groups” (p. xvi). We will evaluate the book with this overarching goal in mind.

The five chapters that make up Part I (“Conceptual Foundations and Ethical Considerations”) cover a range of perspectives on how best to conceptualize the cultural shaping of mental disorders and therapeutic interventions. Coverage ranges from the anthropology of illness interpretation and a biopsychosocial approach to healing practices, reviews of cultural relativism, emics and etics, the social construction of race, and ethical issues. If we include the general conclusion chapter and the annotated bibliography that make up Part V, we have a well-written and largely cohesive mini-text that provides at least introductory exposure to important concepts. In contrast, Parts II through IV taken together read more like a collection of interesting papers rather than an integrated work. Part II (“Models of Multicultural Counseling”) does begin with a solid review of the evidence-based literature in the area, a nice overview that fits well with the “textbook” goal and with previous chapters. The other two chapters are much more specific, however, tackling school counseling and group therapy