

HEALTH AS FRAGILE BALANCE

between Mind Body and Soul

An anthropological gaze upon intercultural health

If we can learn something from immigrants from non-Western cultures, it is the attention to body mind and soul. Not as separates domains, but as a coherent wholes. Care for our health is then also ensuring the balance between them says Dirck van Bekkum.

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Abstract

In six decades our Dutch society has become more cultural divers, but also more complex, than ever. Even without migrant groups, illegal immigrants and asylum seekers. On the one hand high levels of 'migrations' within the Netherlands (social mobility) and the 60% increase in its population after WW2, together with secularization, sexual revolution and individualization changed our lives deeply.

On the other hand came after the liberation of our colonies in the East and in the West, more than 700,000 people forced or voluntarily migrated to our country.

Our need for additional labor/manpower to increase our prosperity brought in the sixties and seventies some 500,000 people from southern Europe and North Africa to The Netherlands.

In the eighties and nineties we took in more than 100,000 involuntary migrants, refugees/asylum seekers. At this moment our larger cities inhabit more than 100 nationalities and even more ethnicities.

More than half of the children in these cities originate from migrant families.

With these major intranational changes and migration flows multiplying our cultural diversity former 'self-evidence' disappeared in many situations. In schools, neighborhoods, in shops, in businesses and also in health care, children and adults with many languages and different lifestyles and values appeared. The inflow of this multiplicity of cultures in all areas of society we are forced to become slowly aware of our own national culture anew.

An old coat

The current influx into our country of 'foreign cultures forces us to 'cultural self-reflection' of who we are. We all, as individuals, families, communities, nationalities, have culture but in confrontation with other cultures we are reluctant to think about culture we own ourselves. Anthropologist coined this as ethnocentrism: the deep-seated tendency to perceive (members of) other cultures from our own 'self-evident' values. We have old familiar habits that we take so for granted that we are unaware of them. Culture is like an old coat to which you are at the same so attached and not aware of. You have become so used to it that you no longer can or want to take off him. You are culture, you cannot get rid of it, it is glued into your personality.

It takes sharp, trained, eyes to see those assumptions and to put them into words. I coined it elsewhere as the skill of 'cultural self-reflection' (Van Bekkum 1992; 1999). How we humans got our cultural jackets is largely shrouded in mystery. When we follow Darwin's basic principle that evolution produces diversity we come closer. What we know is that we humans share culture (learned patterns) with other mammals. We grow up in it and share our culture with people we coin as 'we' like family members and 'them' against the neighbors. We say 'us' against our schoolmates and 'them' against those of other schools. Culture is about many things, but especially about loyalty, inclusion and exclusion. It compels us 'to belong' while at the same time 'to be different' (Van Bekkum, 1999). It is a paradox that we solve every day without thinking about it. As a man, woman, in our profession, in the neighborhood, as a family, as a school, as a football club, as close and so on. We do not at all a bad job, but it has become more complicated because of all these intranational changes and migration flows.

Distorted Balance

Healthcare, besides education, religion and nightlife, is one of those social domains where our cultural jacket became very visible and tangible. The anthropologist Edward T. Hall, in his wonderful book in 1966 about

‘the hidden dimension’ of our ‘old coat’, analyses the interaction between culture, health and disease from the concept of ‘out of cultural awareness’ (1979). Hence he demonstrates how non-Western forms of illness perceptions and symptoms can be perceived from Western medical systems.

Annemiek Richters, physician-anthropologist and professor in the field of culture and health, in her publications closely marks and analyzes cultural blind spots in different medical systems. A widespread image of disease/illness in non-western cultures appears to be ‘out balance’. Many non-Western medical systems explain disease ‘based on events both in and outside of the body take place’ (1991, 105). Many cultures have their own images, conceptions and words for health as a balance between the soul, the mind (psyche) and of course the body. Often these beliefs are not as individual as in the Netherlands. When you are sick in Africa or Asia, and goes to the traditional healer or doctor take your family with you often. If you’re sick your family is sick. Or the other way around: if your family is sick you can become sick.

From various studies on the genesis of humanity an everyday core notion emerges: you lose your health when your unity of body-mind-soul decreases. Unification of body, mind and soul is the remedy to restore the imbalance; to cure the illness. The number of cultural traditions to unify body, mind and soul again are numerous. Hindu Tantra takes lingam-yoni (sexual orgasm) union as a form of eternal now and fusion with the divine. African and Asian dance and movement ceremonies are focused on ‘revitalization’, ‘reweaving life’, ‘transformation’ and ‘proximity to the gods’ (Chavers 1984, 175-210; Devisch 1996). Deeply social gatherings, celebrations, energetic prayer services and alcohol use, enjoyment and hallucinogens in collective rituals reinforce the sense of temporary unity with the sacred.

Literary and other artistic forms of expression are also ways to create in body-mind-soul balance in order to make human life more bearable. Death is the final (individual) disintegration, no longer able to keep mind and soul house our body. In Christian mythology the expulsion from Paradise and the hence the original sin express the actual unbearable aspect of human existence. Fusion with the divine in Christianity reserved almost solely for Saints. The ordinary believer can only pray and wait until (s)he can enter the Kingdom of Heaven.

Blind Spot

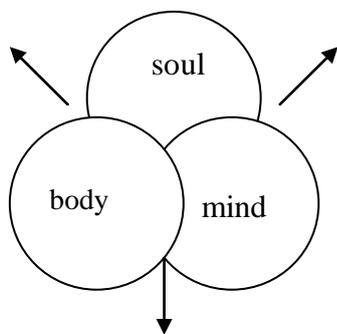
In our Western health care systems is the human soul one big blind spot. From medical anthropology we know that illness perceptions/questions are group- and culture-bound. In my years fieldworking in clinical psychiatry and as a trainer for various professional groups in the (mental) health I learned a lot from patients/clients. Mr. Mohir, a Kurdish-Turkish man, told me the following story. He had been working in a metal factory. It was hard work and he damaged his back. After GP, physiotherapy and various specialists his pains continued and after a year, he became unable to work. The shame no longer able to work and lose his destination as breadwinner broke him. Mr. Mohir became depressed and sat apathic for days in his chair. Via his GP he was transferred to our psychiatric department where he was diagnosed with reactive depression got prescribed with anti-depressants. But to no avail, Mr. Mohir still could not work. He showed both physical and psychological symptoms which both were considered. As a faithful Muslim, he went several times a week to the mosque to pray. The Imam gave him an amulet with a text from the Koran, but this too didn’t help Mr. Mohir.

As an occupational group therapist in a psychiatric hospital, I met Mr. Mohir when he was admitted for a period because his depression increased. After several weeks of work therapy his mood brightened somewhat. During the hours he worked in the metal workshop he manufactured, as an experienced craftsman, valuable and beautiful objects. That strengthened his self-confidence. During a tea break suddenly he told me the following. ‘Sir,’ he said, ‘*it’s a bit strange in such a rich country like the Netherlands. My parents still live in the countryside, 200 kilometers from Dyabakir, in eastern Turkey. If they were sick, they went to a Hodja, a traditional healer: with a sprained ankle, a prolonged mourning after the death of a family member or suffering from spirits. He always treated our souls too. Here in the Netherlands this is not the case. Doctors have helped me very well with my back pains, but I remained sick in my head and heart. The imam says I should go back to my hometown, because my soul is weak and becomes weaker.*’ Mr. Mohir was fired after a recording of six weeks from the clinic, and later I heard that he had gone to Eastern Turkey for a while. After his return, I have not heard how he was doing, but that he had found a Hodja in the Netherlands. Mr. Mohir’s story gave me, as a therapist and as a clinical anthropologist a lot to think of.

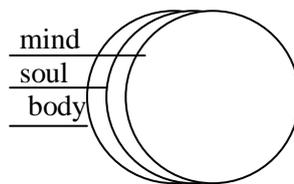
Rich Variations

Our western health care has a high level, but also leads to a growing confusion about healing of body, mind and soul. For pain in your body, we go to the doctor for pain in your mind we consult a psychiatrist or psychologist, and pain in your soul you go, if you are a believer, a clergyman, pastor, minister, humanistic counselor, imam or pandit. The providers of mental health care and pastoral (humanistic and christian) workers for decades have professional boundary conflicts which have been won by the former specialists (Hoffer 1994, De Jong 1996). The growing need for meaning among 'secularists' and by the influx of clients from cultures with different systems of meaning seems to turn the tables for the second group. If you do not have religious faith you have, in our country, to look elsewhere for your salvation: nature, acupuncture, reiki, meditation, tai chi, yoga and so on. Also poetry, sculpture, music, dance and other art forms can offer food for the soul. In all of this the case remains that we have to go to different places with different professionals for our physical, psychological and spiritual problems (Van Bekkum, 1998). It seems a lot of people as we say in The Netherlands: 'are with their souls under their arms'.

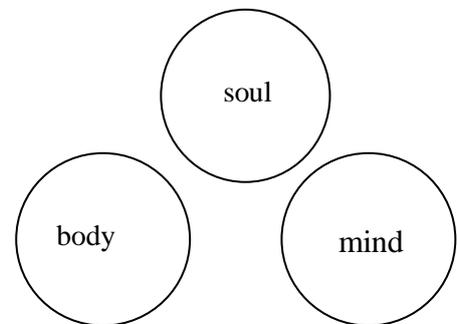
Starting from the simple wisdom of Mr. Mohir I think the idea of a cosmological trinity mind-body-soul can be of major value for medical and meaning making systems in our rich, culturally diverse, Netherlands. Could we organize in the near future joint sessions with Mr. Mohir's Imam, Hodja, Psychiatrist, insurance physician and GP? Various healing methods and explanations of his symptoms and disease could then be exchanged and integrated in a care program for his mind-body and soul. Then other Mr. Mohirs walks through our healthcare system less long with their souls under their arms. The soul of his and my grandchildren will be taken better care of. And perhaps mine too.



dispersing
mind-body and soul
unhappiness-ill-unbalanced



medical systems
which try to restore
balance of mind-body-soul



(western) medical systems
which mostly treat
mind-body-soul separately

Dirck van Bekkum's is a self-employed clinical anthropologist working independently as a researcher/trainer/facilitator in healthcare. Thanks to Inge Mans and Karel van Buuren for making this text easy reading.

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