Course Overview

Clinical ethnography is the ethnographic study of distress and healing within their practical and epistemological contexts. Focusing on matters of the psyche – belief, interpretation, intention, desire – clinical ethnography often explores disturbances that fall into the realm of the “psychiatric”.

A fundamental premise of clinical ethnography is that subjectivity and negotiations of meaning are deeply shaped by the social and cultural surroundings of both patient and healer. Clinical ethnographers therefore pay close attention to these surroundings, and what participants learn from participating in them. Sometimes that means following a group of medical students as they learn to be psychiatrists in American hospitals, as Tanya Luhrmann did; other times it means following a group of women experiencing spirit possession as they learn to become priestesses in a Sri Lankan religious community, as Gananath Obeysekere did. In addition to showing the way culture shapes healing processes, clinical ethnography can also shed light on the ways our social world can cause us harm, as Nancy Scheper-Hughes argues in her ethnography of young men driven mad by crumbling social structures in rural Ireland. As such, clinical ethnography illuminates the porous boundaries between intervening on (and perhaps healing) patients and intervening upon (and perhaps healing) the world around us.

The changes in people’s lives that arise out of attempts to remedy their distress can be complex and sometimes unexpected. Clinical ethnography often acknowledges the unintended consequence of such attempts, as Sue Estroff does when she observes how recipients of community mental health treatment learn to think of themselves as “crazies”. By exploring practices that lie both within and outside spaces typically thought of as “medical”, clinical ethnography can also illuminate productive new approaches outside of the medical mainstream. Through all these routes, clinical ethnography can help ground therapeutic practice in an appreciation of subjectivity, justice, and social context.

Course Goals

This course will help you understand the benefits and challenges of clinical ethnographic work. We will focus a great deal on methodological decisions made by the authors and consequences for the work they have produced. You will therefore learn about a range of approaches that could, if you so chose, inform your own research projects on the lived
experience of psychological distress and its resolution. You will also learn about how to use this literature to gain a deeper awareness of the socio-cultural context of both your clients and your own clinical work.

Course Readings
Each week for this course, we will read a different text or set of texts. Most weeks we will focus on a single book, which you should read in its entirety; on a few weeks, we will instead focus on a collection of articles that focus on a single issue. Books will be available for purchase at the bookstore; articles will be available for download on Blackboard. Please let me know ASAP if you have any difficulty locating or accessing any of the readings and we will problem-solve together. Prior to the first week of class, please read the first three chapters of Jerome and Julia Frank’s “Persuasion and Healing”; while not itself a clinical ethnography, this book will lay theoretical groundwork that we will draw on throughout the semester.

Course Requirements
Attendance/Participation:
You should come to class each week prepared to participate actively in discussion. We will ask questions such as: what did this author do, and what did we learn from it? How does the author organize the argument? What is the phenomenon being described? What evidence does the author present, and what are the benefits and drawbacks of addressing the phenomenon in this way? In addition to attending to specifics within texts, we will explore comparisons across texts: in what ways does this piece differ from others we have read? What are areas of commonality? Finally, our discussions will address the broader implications of each work: for treatment, for our understanding of distress, for our own clinical practice and our own research endeavors.

This class meets only once per week, so we must make the most of the time we have. Missing more than one class session will have a negative impact on both your course grade and on your experience of the class, as will frequent lateness.

Discussion Leadership:
Each week, one of the students in the class will lead discussion during the second half of the seminar. During the weeks that you are leading discussion, you should prepare by picking out about four significant themes or intriguing questions from the readings that you feel would stimulate a productive discussion. During the first half of class, you should also note down any issues that come up that you feel would benefit from more focused discussion. You can then raise these issues and use them as a frame for discussion.

Final Paper:
You are required to write a final paper for this course that is between ten and fifteen pages in length and addresses some aspect of the course material or course topics. Your final paper could be any number of things, including:
A comparison of several texts we have read in class
A deeper discussion of a single issue in the field of clinical ethnography
A proposal for clinical ethnographic research project
A review of the clinical ethnographic literature of a topic not covered in this class
A writeup of a clinical ethnographic experience of your own: attending a conference, going to a doctor’s appointment, working at a clinic

**Final Presentation:**
On the last day of class, you will give a 15 minute presentation of the material in your final paper. This presentation should be in the format of a conference talk, one that might take place at the sort of conference that you would attend. You should prepare a series of slides to go with your presentation. These can contain anything from relevant text and bullet-point outlines to illustrations that visually complement the points you make in your talk.

**Final grades for the course will be assigned as follows:**
Attendance/participation: 50%
Discussion leadership: 10%
Final paper: 20%
Final presentation: 20%

**Policies**

**Academic Integrity:**
Students at Duquesne University are expected to adhere to the highest standards of academic integrity and honesty. The University policy on academic integrity can be found at: http://www.duq.edu/documents/academic-affairs/_pdf/academic-integrity-5-1-12.pdf.

**Technology:**
Laptop computers and mobile electronic devices cannot be used in class without permission from me. Permission will be granted only in unusual circumstances or as a matter of accommodation for disability. Please bring readings to class on paper so that you can refer to them throughout the class.

**Disability Support:**
Students with documented disabilities are often entitled to accommodations in the classroom. If you require such accommodations, please contact the Office of Freshman Development and Special Student Services in 309 Duquesne Union (412-396-6657), and then speak with me, as soon as possible, so that we can get them set up for you in this class. **Regardless of whether you have a documented disability, please come talk to me if you feel that something about the classroom environment is getting in the way of your active participation or learning process.**

**Office Hours:**
Tuesday and Wednesday office hours are a drop-in time when I will be in my office, and available to answer questions about the course, briefly address concerns, or chat about anything related to the course.
If there is anything you would like to discuss at greater length or in greater privacy than is possible at drop-in office hours, or if the scheduled office hours don't work with your schedule, please feel free to email me to schedule an alternate meeting time.

Please see me if you are having a problem with some aspect of the course, but also keep in mind that office hours are not only a time to address problems. I'd be happy to talk with you about your areas of special interest, help you find further readings, discuss longer-term goals, et cetera.

**Course Schedule:**

**Week One, August 27th:**
Chapter One: “Psychotherapy in America Today”
Chapter Two: “A Conceptual Framework for Psychotherapy”
Chapter Three: “Psychotherapy, The Transformation of Meanings”

**Week Two, September 3rd:**

**Week Three, September 10th: Schizophrenia, Culture and Etiology**


**Week Four, September 17th:**
Week Five, September 24th:


Week Six, October 1st: The Ethnography of Autism Project


Week Seven, October 8th:

Note: Be sure to read the 2001 edition, with the new preface

Week Eight, October 15th:

Week Nine, October 22nd:

Note: Be sure to read the 2013 edition, with the new afterword “Return to Vita”.
Week Ten, October 29th: Pharmacological and Neurological Selfhoods


Week Eleven, November 5th:

Week Twelve, November 12th:

Week Thirteen, November 19th:

Week Fourteen, Thanksgiving Week (no class)

Week Fifteen: Final Presentations (TIME AND DATE TBA)

Final papers due December 9th