

<http://somatosphere.net/2019/ethos-special-thematic-collection-extraordinary-conditions-global-psychiatric-care-and-moral-subjectivity.html/>

***Ethos* Special Thematic Collection: "Extraordinary Conditions, Global Psychiatric Care, and Moral Subjectivity"**

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By Anna Zogas

The March 2019 issue of [Ethos](#), organized by Neely Myers and Kristin E. Yarris, focuses on "Extraordinary Conditions, Global Psychiatric Care, and Moral Subjectivity." The collection closes with commentary by Elizabeth Bromley and Cheryl Mattingly.

[Beyond the "Crazy House": Mental/Moral Breakdowns and Moral Agency in First?Episode Psychosis](#)

Neely Myers

This paper draws on a two-year, longitudinal, prospective study of 38 young people diagnosed with early psychosis. It focuses on one young Mexican-American woman, Ariana, over a five month period during and after her initial hospitalization for a psychotic break. I trace Ariana's moral experiences as she goes through a process of "moral breakdown" and moral rejuvenation (Zigon 2007). Ariana uses moral experiments and "ordinary ethics" to re-imagine herself as a good person living a good life beyond the limitations of her diagnosis, prescriptions for her treatment, and the reaction of her broader community to her experience (Lambek 2010; Robbins 2013; Mattingly 2014). Her work exposes the importance and potential of intersubjective moral experimentation for healing. This paper also looks closely at the moral entanglements of the ethnographer and interlocutor to re-imagine the ways ethnographic work can help us all mutually repair moral wounds.

[Moral Matters: Schizophrenia and Masculinity in Mexico](#)

Kristin Elizabeth Yarris, Carolyn Ponting

[Excerpt] We met Israel, a neatly-dressed, well-groomed man in his forties, during a recent summer of fieldwork at the outpatient clinic of a large, public psychiatric hospital in Central Mexico. That

summer, the interviews we were conducting, alongside a team of researchers in clinical psychology, were focused on the elusive psychological concept of “duration of untreated psychosis,” or DUP, and what seemed to be causing relatively long periods of DUP in Mexico. Research from our field site in Mexico has shown how stigma and lack of mental health literacy are barriers to psychiatric care, especially for those living in rural communities (De Snyder, de Jesus Diaz-Perez, and Ojeda 2000). However, what we found interesting across many interviews was the key importance that gender norms, roles, and expectations seemed to hold for shaping the response to, and course of, a diagnosis of schizophrenia. In particular, gender influenced how schizophrenia was viewed and received by individuals and families, how family care giving arrangements changed in response to symptoms, how gender influenced pathways into formal psychiatric treatment, and how people’s explanatory models (Kleinman 1978, 1988) of schizophrenia were filtered by their gendered identities and role expectations. That is to say, we came to think of the lived experience of schizophrenia as fundamentally gendered, having particular significance for women and men given the shifting social meanings of gender in contemporary Mexico.

[“The Kids Were My Drive”: Shattered Families, Moral Striving, and the Loss of Parental Selves in the Wake of Homelessness](#)

Elizabeth Carpenter?Song

In this article, I theorize a form of madness induced by state intervention to terminate parental rights in the wake of homelessness and mental illness in Vermont. This argument is grounded in the experiences of two families unfolding over the course of five years, when they were participants in a longitudinal study of rural homelessness. Homelessness renders families vulnerable to the gaze of social workers, health professionals, law enforcement, and other “helping” professions. As parents interface with professionals to meet survival needs, they risk having their economic insecurity and often fragile mental health call into question their adequacy as parents. Through close ethnographic attention to two families, I trace the devastating subjective effects of losing children to state custody. The traumatic rupture of intersubjective familial ties produces tectonic shifts in parents’ needs and ways of being in the world. The unraveling of family life results in the gradual erosion, and eventual loss, of parental selves.

[Substance?Induced Psychosis: Clinical?Racial Subjectivities and Capital in Diagnostic Apartheid](#)

Helena Hansen

This article examines the ways in which psychiatrists differentially deploy schizophrenia and addiction diagnoses among white, privately insured patients in comparison with black and Latino patients in a public psychiatric unit. Drawing on critical race theory and the anthropology of moral agency, the article tracks the ways in which the overlapping and competing diagnostic frames of schizophrenia and addiction are structured by, and structure, the personhood and political position of those who are subjected to them. It ends by identifying and tracking these logics of diagnosis and treatment, and their racially stratifying influence, in recent calls for integration of mental health with physical health care. Enhancing the agency of people who are subject to psychiatric diagnoses, and dampening the racializing and segregating impulse of diagnoses, ultimately requires clinical rejection of codified “evidence?based medicine” in favor of spaces that serve, following Cheryl Mattingly, as moral laboratories for creating social selves.

[“It Tastes Like Order”: Psychotic Evidence for Antipsychotic Efficacy and Medicated Subjectivity](#)

Michael D’Arcy

What counts as evidence in contemporary debates about antipsychotic efficacy? Current research in the fields of psychiatry, public health, and the social sciences continues to cast doubt upon the efficacy of antipsychotic medications, but patient testimonies illuminating the intersection of psychotic experience and the psychiatric injunction to adhere are largely missing from research about psychotropic medications’ intended and actually reported effects. Drawing on ethnographic fieldwork in an inpatient psychiatric ward and the community mental health network of Dublin, Ireland, this article explores the ways in which mental health patients are actively engaged in an ongoing process of experimenting with their psychopharmaceuticals, often in the pursuit of an idiosyncratically medicated subjectivity. Joining larger debates about the epistemologically plural nature of evidentiary claims regarding psychopharmaceutical efficacy, this article seeks to foreground the dialogue between clinicians and patients, the latter of whom offer invaluable insights regarding the experience of living with psychosis.

AMA citation

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