both examine a US missionary hospital in Guangzhou (Canton) known as the John Kerr Refuge for the Insane. While Szto is concerned with the architectural design of the Refuge, Ma’s essay centres on the psychiatric discourses employed by its missionaries. In a clever reading of her sources, Ma shows how these missionaries condemned the Chinese family as an ‘iron cage’ of confinement and domestic cruelty, yet simultaneously overlooked the fact that their own institutions and treatment methods had become ‘iron cages’ of control unto themselves. Wen-Ji Wang’s essay on ‘tropical neurasthenia’ cogently describes the diversity of opinions on why foreigners were often struck with nervous illnesses upon venturing abroad, and Hugh Shapiro’s look into female mental disorders argues that new psychiatric discourses traced the origins of women’s insanity back to the misery of the patrilineal household, rather than to the patient’s physiology or gender.

The final three essays move into the second half of the twentieth century, and together show the range of approaches adopted by state authorities and medical practitioners to address the problem of mental illness. Geoffrey Blowers and Shelley Wang discuss how psychotherapy flourished briefly in China in the 1930s, but was then attacked and excised under Mao in the 1960s; Harry Yi-Jui Wu’s interesting study of a psychiatric hospital in post-World War II Taiwan shows how physicians attributed psychic suffering to specific sociopolitical events in a ‘veiled social criticism’ of contemporary Taiwanese politics (p. 181); and Hsuan-Ying Huang’s extremely well-written essay on the so-called ‘psycho-boom’ in contemporary China argues that the recent popularity of Chinese psychotherapy can largely be attributed to state initiatives that have turned therapeutic training into a middle class commodity.

Due to the relative paucity of scholarship on this topic, Chiang’s selection of essays naturally covers a wide range of subjects, approaches and time periods. However, the overall volume could have benefited from a closer integration between the various chapters and an increased effort at dialogue between the different authors. Although Chiang’s clearly written introduction and Nancy Chen’s brief afterword do a nice job of putting the essays into conversation with one another, the individual authors do not take up this task themselves. When combined with the unevenness in the quality of the essays – both in terms of their theoretical contributions and in terms of their general readability – the result is that the volume can sometimes read more like a collection of standalone essays than a coherent whole.

Shortcomings aside, however, this volume adds much-needed insights into a sorely understudied subject in Chinese history. Although probably best suited to readers with at least a modicum of familiarity with Chinese history, this compendium will also be useful to medical anthropologists and historians of medicine in general. Scholars will certainly build on these essays as the field continues to advance.


Reviewed by: Elizabeth Ann Danto, Hunter College – City University of New York

‘Freud is Not Dead’ proclaimed the cover of Newsweek, 27 March 2006. Actually, ‘Freud is not dead; he’s just hard to find’ said Psychology Today six years later (Whitbourne, 2012). Is Freud the object of Oedipal desire and, as such, responsible for ceaseless internecine conflict within the genealogy he birthed? No, the object of desire is psychoanalysis itself says Kate Schechter, a Chicago medical anthropologist, psychoanalyst and clinical social worker on the psychiatry faculty at Rush Medical College. Schechter has focused her interpretive exploration of twentieth-century
history on the role of Chicago’s psychoanalytic establishment, a complex place whose organizational malaise projects an image of chronic crisis arguably emblematic of the whole of US psychoanalysis.

Schechter, who critiques organized psychoanalysis through the postmodern lenses of Michel Foucault and Jacques Derrida, structures her book around one large but particular narrative: how ‘the relationship between the patient and the analyst becomes the consummate biopolitical object’ where market forces, and resistance to them, threatens the very core of the profession. In Chicago of the early 1930s, Franz Alexander founded the Chicago Institute for Psychoanalysis, in part to replicate Berlin’s pre-Nazi treatment and training centre, and also to extend Freud’s classical, if foreign, methodology to Americans. In the 1970s, Heinz Kohut countered the traditionalists with a psychology of unique selfhood consonant with the culture of American capitalism. As a result, today’s analysts find themselves so caught up in the dual disputes of Kohutian vs. Freudian and standardization vs. independence that they question, endlessly, whether or not what they do is actually psychoanalysis. Hence this book.

The categories used by the analysts to describe their anguished identity seem to fit less well into Foucault’s 1975 archaeology *Surveiller et punir* than, arguably, Derrida’s deconstruction of dialectical im/possibilities in his 1967 *De La Grammatologie*. The workings of power and modernity leave them in a muddle. Schechter, in her ethnographically-driven interviews with a selection of Chicago psychoanalysts, vividly portrays their sense of capture, trapped in the neo-liberal language of ‘standards and scarcity’ (p. 128) without the relief expected from Kohut’s school. They are virtually immobilized by a sort of ego implosion brought on by images of risk, accountability and standardization, however shallow. Yet their struggle is all interior, and if they are searching for a more palatable alternative to their own exceptionalism, a more satisfying outcome of their desire, neither the aim nor the object shows up in this book.

Schechter’s analysts seem to have introjected people like Frederick Crews whose conservative rhetoric endlessly discredits psychoanalysis as unscientific, an idea that has been promoted equally by mainstream academia and sensationalist media for the last hundred years. How sad. They should be revelling in their profound uncertainty! That is what it is all about. They should be turning for inspiration to the very conflicts and contradictions that illuminated Foucault’s writing. In fact, this is what is happening outside most International Psychoanalytic Association institutes. In Europe of the 1920s, psychoanalysis was as progressive a sociocultural movement as the art, music and architecture of the era. Today we can reclaim the original psychoanalysts’ urban, clinical and social justice legacy. Thousands of licensed social workers and psychologists use psychoanalysis as a treatment of choice in social service agencies (where many exiled analysts settled in the 1930s) and in private practice. The question more important than the paralysing ‘Is it really psychoanalysis?’ should be ‘Does this form of treatment help people?’ In helping people, the spectre of market regulation falls away.

I am not sure if Kate Schechter intended to write such a grim book. She has produced a study (at least a third of the book is notes and references) which, though replete with signature postmodern words, is methodologically sound. She has advanced a critical and accurate representation of discussions we hear prevailing in mainstream psychoanalytic institutes. But does she portray the actual breadth of contemporary practice? Despite the neo-liberal claim to inevitable standardization, most psychoanalytic activity remains quite creative and, it seems to me, no more conformist today than when Freud first outlined his criteria for the treatment. As if to confirm this impression, the psychoanalyst Deborah Leupnitz (personal communication, 22 Oct. 2014) wrote to me, ‘My project with the homeless people in Philadelphia [Leupnitz, 2015] carries on apace. I love my current homeless patient – in treatment for 4 years already. He said the other day: “You know, Dr. L., I really hate my father – but not in a bad way.” Isn’t that great! Clearly he has been reading Winnicott who taught us to “objectively hate” the other. No jouissance needed.’
The paradox of health today is that the UK population is increasingly long-lived, and workplaces have never been safer. The average number of working days per employee lost through sickness has fallen from 7.2 in 1993 to 4.4 in 2013 and yet record numbers are claiming disability benefits for psychosomatic illnesses. This is because the time lost by UK workers as a result of stress, anxiety and depression has risen steadily over the last decade to reach a total of 15.2 million days in 2013. This in-depth collection of essays on stress is, therefore, a timely contribution.

Of course, stress did not originate in the 1950s when the term first rose to prominence. It was then, as Mark Jackson explains, that Hans Selye offered a neurobiological model designed to tie stress to chronic illnesses such as hypertension, peptic ulcer and asthma. Although the ‘general adaptation syndrome’ proposed by Selye has not survived the rigours of evidence-based medicine, his discussion of the relationship between emotion and disease proved pivotal and, as Elizabeth Siegel Watkins argues, it prepared the ground for a flood of new drugs introduced in the 1950s and 1960s. Tranquillisers and anxiolytics became top sellers as pharmacology appeared to offer an instant cure for stress at home and in the workplace.

The armed forces have an enduring occupational interest in stress, and in the aftermath of World War II psychiatrists in the US Army began to measure its impact using records of units exposed to prolonged combat. Theodore M. Brown argues that this conflict saw stress promoted to the role of primary agent in the cause of breakdown, supplanting the traditional emphasis on personality factors. While this process undoubtedly began then, it is far from clear that a paradigm shift had occurred by 1945. Rather, it was not until the recognition of post-traumatic stress disorder (PTSD) in 1980 that the about-turn in causality had achieved widespread support. During World War II the majority of battlefield breakdowns were considered the result of inherited or acquired psychological vulnerability triggered by combat, while servicemen without such vulnerabilities exposed to extreme trauma were expected to recover with no long-term effects. Indeed, the chapter by Tulley Long on military research into combat stress during the Cold War era shows that the emphasis was increasingly away from a generalized neuro-biological construct towards greater understanding of an individual soldier’s psychology and situational context.

Chapters explore the manifestation and interpretation of stress in particular environments. These include: in the workplace (Joseph Melling and Junko Kitanaka), the science of animal welfare (Robert G.W. Kirk), the cancer patient (David Cantor) and urban planning (Edmund Ramsden). Allan Young argues that the impact of 9/11 and formulation of PTSD led to a re-definition of resilience as mastery over stress, while Otniel Dror proposes that the phenomenon of sudden unexpected death was reframed as a consequence of constitutions weakened by the stress of modern civilization.