

Clinically Applied Anthropology II: Ethnographic methods for mental health research and practice in India

Teaching faculty

Dr. Sumeet Jain
School of Social and Political Science
The University of Edinburgh

Course Coordinator

Dr. Shubha Ranganathan
Department of Liberal Arts
IIT Hyderabad

1. Overview

This active, skill-based course aims to provide participants with advanced understanding of and hands-on experience with the skills and techniques of qualitative and ethnographic methods for conducting culturally-sensitive mental health research. Mental health research and practice in India continues to be dominated by biomedical approaches, with limited engagement between social sciences and mental health disciplines. Clinical ethnography is particularly suited to understanding the interface between sites of healing (such as the clinic) and people's experiences of distress. This module on Clinically Applied Anthropology will provide hands-on training in applying these research methods, data analysis, and writing research results for public and academic audiences. This course will address this gap between theory and practice by developing participants' skills.

Sessions on qualitative research methods will cover ethnographic methods of data collection, analysis, ethics and documentation and dissemination of findings. The focus of the course will be on close engagement with specific projects that participants are involved in, whether as researchers or practitioners or development specialists. The course will include experiential elements to allow students to practice participant observation, semi-structured clinical ethnographic interviewing, writing of field notes and data analysis and exercises to effectively integrate ethnographic and qualitative methods into design of their own research. Key questions that will be addressed in the course are: 1) *How do we integrate academic engagement and applied work in mental health research and practice* 2) *Specifically, for those engaged in work with clinical populations and settings, how do we bridge the gap between 'culture' and the 'clinic'?* 3) *How can clinical ethnographic methods be applied for this purpose?* Readings will include contemporary research in transcultural psychiatry, medical anthropology, qualitative research methods, writing strategies, and public health.

2. Objectives:

The primary objectives of the course are as follows:

1. Enabling crucial linkages between theory and practice at the interface of mental health and social sciences through training on qualitative and ethnographic research methods.
2. Providing specific training in the use of clinical ethnographic methods in studying social suffering and mental health, by engaging with ongoing research projects of participants.

3. Developing participants' critical understanding of how to apply qualitative and clinical ethnographic methods in their own research and practice settings through supervisory sessions and peer learning
4. Enabling participants to develop a deeper awareness of the importance of reflexivity and the role of the researcher in qualitative and ethnographic research.
5. Build participants' confidence in applying specific methodological skills in relation to ethnographic research through specific exercises on research design, participant observation, writing field notes, data analysis and writing up research findings.

3. Teaching Faculty with Allotment of Lectures

Dr. Sumeet Jain: 16 hours

4. Course details

Tentative Lecture Schedule: December 16, 2019 to December 20, 2019

Day 1. MONDAY. 16-12-2019: 2 hours

Lecture : Anthropology and mental health: Introduction to clinical ethnographic methods

Exercise: Participants will undertake a practical group exercise on participant observation to learn the nitty-gritty of carrying out observation and writing field notes

Learning objectives:

1. Understand the relevance of clinical ethnographic and qualitative methods to the study of mental health and culture.
2. Understand the benefits and limitations of participant observation as a research method as well as the research contexts most useful for employing participant observation.
3. Gain practical experience in the skills involved in participant observation through group exercises
4. Practice the writing of field notes through learning from illustrative examples and homework assignments

Indicative Readings:

1. Kleinman, A. M. (1977). Depression, somatization and the "new cross-cultural psychiatry." *Social Science & Medicine*, 11(1), 3–9.
2. Kleinman, A. (1987). Anthropology and psychiatry. The role of culture in cross-cultural research on illness. *The British Journal of Psychiatry* , 151 (4), 447–454.
3. Littlewood, R. (1990). From categories to contexts: a decade of the "new cross-cultural psychiatry". *The British Journal of Psychiatry*, 156(3), 308–327.
4. Nichter, M. (2010). Idioms of distress revisited. *Culture, medicine and psychiatry*, 34(2), 401–16.
5. Ranganathan, S. (2014). Healing temples, the anti-superstition discourse and global mental health: Some questions from Mahanubhav temples in India. *South Asia: Journal of South Asian Studies*, 37 (4), 625-639.
6. Videos on ethnographic research will be screened to enable participants to watch research in action.

7. Hammersley, M. & Atkinson, P. (2007). *Ethnography: Principles in practice*, 3rd ed. London: Routledge.
8. Emerson, R.M., Fretz, R.I. & Shaw, L.L. (1995). *Writing Ethnographic Fieldnotes*. Chicago: University of Chicago Press.

Day 1. MONDAY. 16-12-2019: 3 hours

Lecture: Applying clinical ethnographic methods to understanding social suffering and mental health in India

Exercise: In small groups, participants will apply the technique of semantic network analysis to examining their own categories of ‘distress’.

Learning objectives:

1. Understand the particular relevance of *clinical ethnographic methods* for the study of mental health care in India and gain experience in applying this in their own research projects.
2. Develop an appreciation of the social and cultural context of mental health through the concept of ‘social suffering’
3. Critically appraise the use of semantic network analysis to understanding local categories of distress in different contexts.
5. Reflect on the relevance of these methods to their own research projects.

Indicative Readings:

1. Chowdhury, A. N., A. K. Chakraborty, and Mitchell Weiss. 2001. "Community mental health and concepts of mental illness in the Sundarban Delta of West Bengal, India". *Anthropology & Medicine*. 8 (1): 109-129.
2. Good, B. (1977). The Heart of What's the Matter: The Semantics of Illness in Iran. *Culture, medicine and psychiatry*, 1, 25–58.
3. Jain, S., Jadhav, S. (2009). Pills that swallow policy: clinical ethnography of a community mental health program in Northern India. *Transcultural Psychiatry* 46 (1), 60-85.
4. Halliburton, M. (2005). “Just Some Spirits”: The Erosion of Spirit Possession and the Rise of “Tension” in South India. *Medical Anthropology* 24: 111 - 144.
5. Keys, H. M., Kaiser, B. N., Kohrt, B. A., Khoury, N. M., & Brewster, A. R. T. (2012). ‘Idioms of distress, ethnopsychology, and the clinical encounter in Haiti's central plateau’ *Social Science & Medicine* 75: 555-564.
6. Kleinman, A., & Good, B. (1985). *Culture and depression: studies in the anthropology and cross-cultural psychiatry of affect and disorder* / edited by Arthur Kleinman and Byron Good. Berkeley: University of California Press.
7. Krause, I. B. (1989). Sinking heart: a Punjabi communication of distress. *Social Science & Medicine*, 29(4), 563-575.
8. Kohrt, B. A. (2005). “Somatization” and “Comorbidity”: A Study of Jhum-Jhum and Depression in Rural Nepal. *Ethos*, 33(1), 125–147. doi:10.1525/eth.2005.33.1.125
9. Ranganathan, S. (2015). Rethinking ‘Efficacy’: Ritual Healing and Trance in the Mahanubhav Shrines in India. *Culture, Medicine, and Psychiatry*, 39 (3), 361-379.

Day 2. TUESDAY. 17-12-2019: 3 hours

Lecture-cum-workshop: Conducting clinical ethnographic interviews for mental health

This lecture-cum-workshop will introduce participants to the use of clinical ethnographic interviews through involving them in a workshop on developing and piloting a semi-structured interview guide in small groups. Through exercises, they will gain practical experience in the skills of question-framing, listening, remembering and transcribing interviews.

Learning objectives:

1. Understand the steps of developing semi-structured clinical ethnographic interview guides.
2. Develop skills and training in conducting semi-structured ethnographic interview through in-class exercises.
3. Learn the basics of interview transcription through working with audio / video recorded material
4. Reflect on and learn to apply the role of clinical ethnographic interviews in their own research.

Indicative Readings:

1. Bernard, H. R. (2011). *Research methods in anthropology: Qualitative and quantitative approaches*. Rowman Altamira.
2. Weiss, M. (1997). Explanatory Model Interview Catalogue (EMIC): framework for comparative study of illness. *Transcultural psychiatry*, 34(2), 235-263.
3. Silverman, D. (2009). *Doing qualitative research: A practical handbook, 3rd ed.* London: Sage Publications.
4. Resources for Qualitative Research
<http://www.qualitative-research.net/index.php/fqs>
<http://www.qualitative-research.net/index.php/fqs>
5. Bailey, J. (2008). First steps in qualitative data analysis: transcribing. *Family Practice*, 25, 127–131.

Day 3. WEDNESDAY. 18-12-2019: 3 hours

Lecture: Working with self and others: cultural reflexivity in qualitative research

Exercise: Small group exercise in dyads/triads to engage with reflexivity.

Learning objectives:

1. Understand key debates in relation to reflexivity in qualitative research.
2. Develop skills to engage with cultural reflexivity in relation to their own research.
3. Develop a reflexive awareness of the role of the researcher in relation to their own research.

Indicative Readings

1. Coffey, A. (1999) *The Ethnographic Self: Fieldwork and the Representation of Identity*, London: Sage.
2. Finlay, L. and Gough, B. (eds) (2003) *Reflexivity. A Practical Guide for Researchers in Health and Social Sciences*, Oxford: Blackwell
3. Institute for Intersectionality Research and Policy, Simon Fraser University Vancouver,

Canada. Some good publications on intersectionality in research, see: <https://www.sfu.ca/iirp/resources.html>

4. Finlay, L. (2003) 'The reflexive journey: mapping multiple routes', in Finlay, L. and Gough, B. (eds) *Reflexivity. A Practical Guide for Researchers in Health and Social Sciences* Oxford: Blackwell, 3-20.
5. Moser, S. (2008) Personality: a new positionality? *Area* 40(3): 383-39.
6. Reinharz, S. (1997) 'Who am I? The need for a variety of selves in the field', in Hertz, R. (ed.) *Reflexivity and Voice*, London: Sage, 3-20.
7. Sultana, F. (2007) 'Reflexivity, positionality and participatory ethics: negotiating fieldwork dilemmas in international research', *ACME* 6(3): 374-385.

Day 4. THURSDAY. 19-12-2019: 2 hours

Lecture-cum-workshop: Analyzing ethnographic and qualitative data.

This lecture-cum-workshop will involve participants working in small groups to analyze ethnographic interview transcripts and/or field notes from previous class exercises and homework assignments. The workshop will also demonstrate analysis of mixed-methods data sets that combine ethnographic and quantitative data.

Learning objectives:

1. Understand the process of 'doing' thematic data analysis practically through working on interview transcripts.
2. Develop skills in undertaking thematic data analysis.
3. Understand the role of data analysis in their own research.

Indicative Readings

1. Braun, V. & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3, 77-101.
2. Davidson, J. (2001) "'Joking apart ...": a "processual" approach to research self-help groups', *Social and Cultural Geography* 2: 163-183.
3. Mauthner, N. and Doucet, A. (2003) 'Reflexive accounts and accounts of reflexivity in qualitative data analysis', *Sociology* 37: 413-431.
4. Nairn, K., Munro, J. and Smith A. B. (2005) 'A counter-narrative of a 'failed' interview', *Qualitative Research* 5: 221-244.
5. Siltanen, J., Willis, A. and Scobie, W. (2008) 'Separately together: working reflexively as a team', *International Journal of Social Research Methodology* 11(1): 45-61.
6. Weiss, M. (1997). Explanatory Model Interview Catalogue (EMIC): framework for comparative study of illness. *Transcultural psychiatry*, 34(2), 235-263.

Day 5. FRIDAY. 20-12-2019: 3 hours

Lecture: Writing and dissemination of findings; discussion, wrap-up and evaluation

This session will provide space for students to present short blog posts written prior to the class based on their own research. Students will receive feedback on these posts, with the option of posting these on the website: www.clinicallyappliedanthropology.com. The session will also discuss the mechanics and politics of academic publishing. The course will conclude with feedback, wrap-up and evaluation.

Learning objectives:

1. Understand the steps and mechanics of academic publishing including selecting appropriate journals and responding to reviewer comments.
2. Learn about writing strategies for non-academic audiences through exposure to illustrative examples.

Indicative readings

1. Graff, G. & Birkenstein, K. (2010). *They say / I say: The moves that matter in academic writing*. New York: W.W. Norton & Company.
2. Ecks, Stefan (2005) 'Pharmaceutical Citizenship: Antidepressant Marketing and the Promise of Demarginalization in India', *Anthropology & Medicine*, 12: 3, 239 - 254.
3. Halliburton, M. (2004). Finding a Fit: Psychiatric Pluralism in South India and Its Implications for WHO Studies of Mental Disorder. *Transcultural Psychiatry* 41: 80-98.

5. Who can attend

- a) M.Phil./ Ph.D. students of social science and mental health who are enrolled in research based masters or doctoral programs focussing on the interface of social science and mental health in India.
- b) Early career faculty members from academic institutions in India.
- c) Social scientists from other agencies or research institutes in India.
- d) Individuals working in the development sector in the field of public health, mental health, social policy.
- e) Mental health practitioners.

6. Fees

The participation fees for taking the course is as follows:

- Participants from abroad: USD 200
- Students from India and South Asia: 2000 INR
- Students from India belonging to the reservation category (SC/ST): 1000 INR [Note: Please send a soft copy of your community certificate]
- Participants from academic and government institutes: 6000 + 1080 (18% GST) = 7080 INR*
- Working professionals: 7000 + 1260 (18% GST) = 8260 INR*
- There is no registration fee for IIT Hyderabad students
- Participants from NGOs: 5000 INR Including GST*

Registration fee includes access to attend all lectures and tutorials, course materials, wi-fi, tea/coffee and water for all five days. For accommodation/food, separate charges will apply.

* Note: 18% GST taxes are applicable on registration fee

7. Teaching Faculty

Dr. Sumeet Jain

**School of Social and Political Science,
The University of Edinburgh**

Address

School of Social and Political Science,
The University of Edinburgh,
Chrystal Macmillan Building,
15a George Square,
Edinburgh, UK EH8 9LD

Tel: +44(0)131 651 1463

Email: sumeet.jain@ed.ac.uk

Web link: http://www.sps.ed.ac.uk/staff/social_work/jain_sumeet