

# Claudia Lang, *Depression in Kerala: Ayurveda and Mental Health Care in 21st Century India*

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This book is about the journey of 'Depression' from a metropolitan space to other locales. The researcher has done intensive fieldwork across Kerala for about seventeen months and it needs indubitable appreciation. The book is the result of nine years' painstaking enquiry of the scholar. It covers two Ayurvedic institutes for mental health and a private Ayurvedic clinic that offers treatment for psychological issues. Interviews with biomedical doctors having specialization in psychiatry have also been done along with interaction and interviews with a range of patients suffering from psychosomatic issues.

With an introduction and four chapters, the book elaborates the journey of a concept – 'Depression' – from its point of origin to a region called Kerala. The way people, psychiatrists, patients and Ayurvedic doctors perceive this concept and create multiple meanings is examined. The introduction of the concept into a local world and its interaction with new institutions initiates novel clinical practices, knowledge and subjectivities. This transition multiplies the ontology of Depression which Lang names 'depression multiple'. Lang claims that she challenges the dichotomy of the west and the rest of the world through demonstrating the movement of Depression, a globalized category, into a place called Kerala and the way it is 'appropriated and stabilized in the local reality of Kerala' as a 'glocal' category. Glocalization includes the dual process of globalization and localization.

The subjective expressions of Depression in patients and their interpretation by doctors in Kerala often manifest through physical and psychological symptoms; and they are not purely marked out as mental illness. In other words, Depression is hidden behind somatic symptoms. While a psychological category is appropriated in a local context, its meaning and interpretation get multiplied by the complications of the discourses around it. Lang

is well aware that the mind-body dichotomy is not a dominant idea in many of the 'non-metropolitan' life worlds. Ayurveda also shares a non-separate idea of the mind and the body and a specialized stream – *bhutavidya* – is used in Ayurveda to specifically look into the problems of the *bhudhi* (intellect) and *manas* (mind). Many Ayurvedic institutes now use the term *manovinjaaneeyam* for *bhutavidya* as a part of the process of incorporating the nearest meaning in psychiatry and psychology. However, understanding whether a patient's problem is somatic or psychic depends upon the humoural principle in Ayurveda. So, when a patient describes her problem as bodily pain and lethargy, the doctor has no compulsion to identify it as a psychic problem.

Lang has sketched out the historical vantage points in the field of Psychiatry from diagnosing unexplained pains and aches as hysteria to the introduction of electromagnetic convulsive therapy, and to the innovation of anti-depressants through which Depression is considered as a pharmacologically treatable condition. This process was parallel to the struggle of the discipline of Psychiatry to be recognized as a scientific discipline. Lang has succinctly pointed out that the socio-economic reasons of psychological problems are relocated in the brain of an individual.

However, some preconceived assumptions seem to have determined the perspective of the scholar and an ethnographic gaze from above is working in a subtle way. Firstly, the title of the book gives the reader an impression that a region called Kerala is marked in world history as a place where Depression is a grave issue. The second chapter's title is '*Kerala: a society in distress*'. Such a sweeping statement seems unwarranted and raises methodological and ethical questions regarding this research. According to the latest mental health

survey report released by the former health minister K. K. Shailaja, 11.36% of the total population is affected by mental disorders. But this sample survey was conducted in six selected *taluks* of three districts, Thrissur, Palakkad and Pathanamthitta.<sup>1</sup> Can one assess the condition of the whole state through these kinds of random sample surveys, newspaper reports and articles, and through the narratives of celebrities who have managed their Depression through treatment and by publicly exposing their condition? The book uses similar surveys, newspaper reports and celebrity endorsement to study and establish that Kerala is a society in distress. Though the exotic title of the book may attract publicity and visibility for the book, this title, and the title of one chapter, raise serious ethical questions. They hint that a whole region and its society are suffering from Depression and distress. Whether a scholar can make such sweeping statements about a whole region and its society by studying selective institutions and practices is an equally ethical question. It also reveals that the age-old criticism of the Oriental ethnographers and their gaze in studying the colonies by looking from above with an element of awe, is still valid.

Secondly, after studying a small region called Kerala, the book title seems to claim that the model is applicable to the whole of India even though the region studied, Kerala, is marked for its diverse culture, corresponding varied life worlds, and distinctiveness. The scholar has not pointed out any valid reason for her subtitle in the main title, viz., '*Ayurveda and Mental Health Care in 21<sup>st</sup> Century India*'. The many parts of India do not share even the experience of the Ayurveda practice uniformly. In many states of India, Ayurveda is not at all an important medical practice. There are regional health practices across India which may or may not be identical with Ayurveda.

Thirdly, the scholar has not substantiated how the concept of Depression is stabilized through Ayurvedic practice. Stabilization is a concept taken from actor-network theory and Lang describes it as local engagement with discourses and practices around Depression through which Depression gains 'coherence and consistence'. Depression is a universal concept, no doubt about it. Concepts like modernity, slavery, etc., are also universal. The author tersely points out that the concept of 'Depression' evolved from the west within a highly westernized discipline, Psychiatry. When concepts travel from their point of origin to other contexts, the

essential meanings they carry also changes and they may get suffused with locally interpreted meanings and experiences. This is applicable to all concepts including 'Depression'. It will be interpreted in heterogeneous ways using local experiences and knowledge about similar or distant ideas, experiences and concepts.

Kerala is a place over-studied by Social Anthropologists because of its many peculiar aspects like high literacy rate and the acclaimed and correspondingly criticized 'Kerala Development Model'. All kinds of universal concepts are easily available to the people of Kerala, not only because of the state's high literacy, but also because of the information explosion through social media, newspaper, internet and governmental programmes. So, the wonder of an ethnographer in understanding the transformation of a concept called Depression in a local context has no importance in the view of an internal scholar. However, at any point of time, the author has not mentioned that the actual meaning derives from the west and it is reinterpreted in the non-western countries.

The term Ayurvedic Psychiatry is a distant and convenient translation of the term '*bhutavidya*', which is one of the eight specialized streams in Ayurveda. The meanings of most of the concepts in Ayurveda are changed when they are translated into English by the indigenous practitioners, the modern state or the academic scholars. The term Ayurvedic Psychiatry does not carry the complexity of '*bhutavidya*'. Ayurveda does not have a distinct mind-body duality while giving treatment for a person, irrespective of whether the disease is somatic or psychic. While Lang is aware about these complexities and claims that she challenges the dichotomy of the west and the rest, she reproduces the same by naming a region in terms of a particular concept, 'Depression,' and establishing that there is a stabilization of the concept through appropriation by patients, Ayurvedic practitioners and institutions. Without doubt, the work is multifaceted and fascinating. Yet, a bit of caution might have increased its credibility.

#### Note

1. <https://www.newindianexpress.com/states/kerala/2017/nov/05/kerala-mental-health-report-1136-percent-people-in-the-state-of-unsound-mind-1692356.html> accessed on 02.11.2021.