

## **Review:** [Untitled]

Reviewed Work(s):

Cultural and Sociological Aspects of Alcoholism and Substance Abuse by Barry Stimmel The Substance Abuse Problems by Sidney Cohen
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abortifacients, and concludes that menstrual regulation, not prevention of conception, is emphasized in these communities. A pervasive theme throughout the book is the implications of ethnophysiology for fertility regulation. Thus, Hunte presents explanatory models of reproduction in Afghanistan, where multiple IFRMs are in evidence, some derived from past centuries. Most methods enhance fertility, reflecting the perceived value of children in this region, and Hunte speculates on a possible physiological basis for the efficacy of herbal methods. Again, humoral theory emerges as an influence on current fertility regulation.

In two Egyptian villages studied by Sukkay-Stolba, women favored large families and used IFRMs primarily as a spacing, rather than a limiting, device. IFRMs were favored due to "tradition" and noninterference with lactation, while flexibility and reversibility of these methods also enhanced their popularity. Browner's research in Colombia emphasizes the relationship between women's understanding of physiology and attitudes regarding contraception. She relates beliefs concerning reproductive functions to general concepts of health maintenance and effectively analyzes cultural belief in its institutional and idealogical framework. She includes a substantial analysis of herbal preparations. Berlin's article also provides a particularly comprehensive description of herbal preparations for the Jivaro of Peru, who display a well-developed plant-derived system for fertility regulation. The Aguaruna Jivaro are shown to have a sophisticated understanding of reproduction and demonstrate an interest in contraception, although access to family-planning programs is currently limited.

Contrastingly, Low reports for Costa Rica that both IFRMs and modern methods are employed. Women focus on encouraging the healthy functioning of body processes, rather than on limiting pregnancy, although abortion appears as a common method of fertility regulation. Working-class Kingston (Jamaica) women studied by Brody are exposed to intense propaganda for availability of familyplanning programs but do not use their services. Brody analyzes both male-female and mother-daughter relationships and their implications for reproductive behavior. He suggests that although few women claimed to use IFRMs themselves, shared knowledge of herbal methods operates to maintain female networks, express a fantasy of control over external forces, and maintain cultural boundaries. Finally, Newman concludes with a synthesis of anthropological contributions to fertility studies and sketches cultural determinants of fertility, intended to extend demographic models by accounting for the social context of fertility decisions. Overall, these studies describe perceptions of physiological functioning in relation to fertility regulation. Menstrual regularity emerges as a widespread concern of women cross-culturally, and general confusion regarding time of conception is reported. Perceptions of risk appear to influence decisions to regulate fertility, as do definitions of when life begins—an important consideration in intervening in the reproductive process.

This book includes an appendix, containing research protocol for this collection of studies and a botanical index, with classifications of plants, their common names, preparation, use, and geographical area. In general, *Women's Medicine* will be valuable and intriguing for anthropologists, clinicians, public-health personnel, and others concerned with the delivery of safe, culturally acceptable fertility-regulating methods and for those specializing in the cross-cultural study of human reproduction. Although the book would be especially appropriate for advanced courses in medical anthropology or seminars on reproduction, it is overly specialized for routine use in undergraduate anthropology classes.

Cultural and Sociological Aspects of Alcoholism and Substance Abuse. *Barry Stimmel*, ed. New York: The Haworth Press, 1984. Pp. 84 (tables, annotated reference list). \$19.95 (hardcover).

The Substance Abuse Problems. Sidney Cohen. New York: The Haworth Press, 1981. Pp. xv + 392 (index, tables). \$34.95 (hard-cover); \$19.95 (paperback).

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Because these volumes were produced by physicians, there are diagnostic and therapeutic hues to the information that each contains. The traditional reluctance of physicians to deal directly with the intractable problem of chemical dependency, which may stem as much from the dearth of professionally positioned champions doing advocacy work in medical schools as from the socially constructed problem itself, will be overcome in part through fifth-column efforts of authors like Stimmel and Cohen. Regardless of the reader's position on the disease metaphor of substance abuse, or on the relationship of DSM III to social reality, each of these volumes makes a significant symbolic statement in the rhetoric of drug abuse. Both books provide us with a clue to what physicians ought to know about one of the most significant sociopolitical challenges to the contemporary medical imagination. Further, they give social scientists a sense not only of the kind of action research that will be needed to improve clinical diagnosis and intervention, but also of the way such research might be positioned to accelerate its diffusion through the medical community.

The Stimmel volume, while more likely to find its way onto the social scientist's bookshelf than the Cohen work, is the less satisfying of the two books. Because it appeared originally as an issue of Advances in Alcohol and Substance Abuse, the problem of balanced coverage, continuity, and tone characteristic of edited works are magnified only if the volume is treated as a conventional book. While it explores the relationship of such factors as ethnicity, family, religion, and gender to chemical abuse, the volume adopts psychological and sociological perspectives to the neglect of an anthropological viewpoint, a cavil I raise less in the service of territoriality than out of curiosity, given the allusion to aspects cultural in the title.

In his editorial comments that introduce the articles, Stimmel criticizes the simplistic theories and stereotypes that clutter the literature and hamper the management of chemical dependency, and calls for the truly eclectic approach to treatment that our inability to resolve the epidemiological nature-vs-nurture controversy appears to demand. Ethnography, while less susceptible to controlled hypothesis-testing and more liable to mask biological factors—assertions nowhere effectively considered—is a source of information Stimmel finds to be essential. A shortcoming of such conviction is the editor's failure to include a specific article on the promise and perils of ethnography in clinical diagnosis and intervention, an increasingly popular topic in chemical dependency treatment.

The articles themselves, devoted primarily to alcohol abuse, are of uneven quality and variable interest. Among the stronger contributions is Westermeyer's essay on ethnicity and substance abuse, a deceptively simple piece that fails to explore creatively the fascinating implications of ethnicity for treatment that the author discerns. The erosion of traditional ethnicity, its transmogrification into a subculture of chemical dependence, and its reconstitution in the face of post-treatment anomie—a process insightfully tracked by Westermeyer-virtually demands that clinicians incorporate the dynamics of ethnicity into treatment modalities, but they are given no substantive direction. A related article on causal attribution and ethnicity with regard to problem drinking, a replication study using college-student respondents, makes the standard case for multiple causal schema, but is ineffective and unpersuasive in its discussion of the cultural dimension of observed differences and similarities. An article on opioid addiction laments the neglect of family and religion in DARP studies, confirming as it does most expected relationships in proclaiming that well-being is tied to social competence. Another of the stronger contributions, an article by Covington and Kohen on gender, sexuality, and alcohol, emphasizes the male bias in alcohology, and suggests that sexual dysfunction may precipitate problem drinking. The most intriguing result of the study is essentially a lead for further research (on the mediation by female belief systems and alcohol use of sexual coping) and a plea for addressing sexuality in treatment. A related article on gender bias of clinicians makes use of labelling theory to demonstrate the ways in which clinical judgment can be distorted. The concluding article, a very helpful guide to current literature on topics covered in the book, ignores with very few exceptions the contributions of anthropologists, a curious omission given the editor's approval of ethnography.

The Cohen volume, itself a compendium of updated essays written by the author in the 1970s, and hence more unified in voice than the Stimmel book, is a practical handbook of personal prescriptions, proscriptions, and predictions distilled from the author's understanding of historical, medical, pharmacological, sociological, and legal issues in chemical dependency. It is written in a delightfully avuncular tone and covers topics of interest to clinician, researcher, layperson, parent, abuser, and nonabuser alike. The author, a former Director of the Division of Narcotic Addiction and Drug Abuse of NIMH, and current Clinical Professor of Psychiatry at UCLA, has imposed a passable framework on a decade of ruminations, discussing legal and illegal drugs, epidemiology and trend analysis, diagnosis, treatment, and special groups and situations. His is a personal discussion, beginning with an ingratiating account of his work as an adolescent in an apothecary shop and informed with a professional knowledge acquired during the transformation of therapeutics from an essentially "medieval materia medica to the fairly scientific pharmacology of today." Although the scholarly apparatus of the book is casual, even erratic—we are given at turns references with no footnotes, suggestions for additional reading in lieu of references, and selected references—the organization within individual essays is rarely assailable. Because of its encyclopedic nature, it is not a book easily read in one sitting.

Cohen attempts to embed many of his psychological and pharmacological observations in a cultural matrix. Early in the book he advocates discovery of culturally appropriate ("safe") euphoriants and discouraging use of all others. His discussion of behavioral tolerance, of the biosocial dimensions of amotivational syndrome, of the perverse halo effect of government misinformation upon much valid contemporary drug abuse research, and of the impact of cultural change upon diazepam (Valium, Roche) abuse are just a few instances of his cultural acuity. Occasionally, the reader wishes some of the cultural criticisms were less oblique. We are becoming a "nation of preponderant girl and women filter-tip cigarette smokers" even as tobacco-related diseases rank among the most preventable. Despite the association between sugar intake and childhood dental caries, we fluoridate our water rather than decrease our sucrose consumption. Yet, Cohen offers few of the kinds of prescriptions so desperately needed at the cultural level. Even so, his inclusion of cross-cultural data (on the British system of methadone maintenance), his discussion of age sets, geriatrics, gender, sport, and paraplegia as they relate to substance abuse, and his brief, global survey of addiction problems, are steps in the right direction.

The eclectic coverage of the handbook is at once maddening and stimulating. We are introduced to drug argot, coached in the art of conducting a valid urine drop, and invited to compare and contrast volitional disorders. The book in effect is a multidimensional primer. Combined with this eclecticism is a sense of fair play which prevents Cohen from equating abuse with social use; such balance is not characteristic of the intervention genre. A case in point is his discussion of "Drug X" (a pseudonym for alcohol), alleged in his essay to be the most dangerous drug on earth. Counterposed to this amusing, and persuasive, rhetorical conceit is a contributed essay on the benefits of alcohol consumption. His concern to contrast selective recruitment and causality in discussing the behavior of those with chemical dependency is also fair-minded. Similarly, alcohol is treated as merely one of the host of other drugs of abuse in our contemporary pharmacopoeia.

Cohen's book is not without its flaws. In aspiring to be encyclopedic, it is occasionally shallow. Some of his predictions are not well founded, and some of his historical observations (e.g., on the rise of the therapeutic community) are a bit distorted. The shifting style of the essays—sometimes straightforwardly expository, sometimes question-and-answer format—is a mild irritant. Occasional typographical errors are annoying. Finally, the essays require more scrupulous updating in such areas as trend analysis, chemical assays, and flashback etiology. As with the Stimmel volume, few resources of distinctly anthropological cast are in evidence.

These minor quibbles aside, the Cohen volume is a useful introduction to the immense literature of substance abuse. The Table of Contents and Index are sufficiently detailed to provide a casual browser or harried reader with direct access to specific topics, and the references provide ample points of departure for continued research. It covers most of the same bases as the Stimmel volume, and many others as well.

A different set of adoption recommendations is in order for each book. The Stimmel volume contains distinct articles that might be appropriate for courses in medical anthropology, urban anthropology, or ethnicity. Because of its diffuse utility, it is more appropriately a suggested rather than required reading, at both undergraduate and graduate levels. The Cohen volume has broader appeal, and could be used effectively in courses on medical anthropology, comparative substance use, American communities and problems, mental health, and applied anthropology (where field practica are employed). Cohen's book is quite compatible with those written by Weil, Szasz, Harner, Brecher, Furst, and Marshall. It could be used as a required reading in conjunction with these, with problem-specific ethnographies, or with a traditional text, at both undergraduate and graduate levels.

Each of these volumes should be considered by anthropologists responsible for training professional and preprofessional students in any of the disciplines of medicine, nursing, social work, health and human services management or public, nonprofit, or services marketing. The ultimate impact of such books is likely to be the validation of chemical dependency as a primary problem amenable to specific treatment by local physicians. Such books may also help catalyze the innovative, effective treatment regimens toward which anthropologists are uniquely suited to contribute. Just as substance use has become an accepted field of study within general anthropology, so also must clinical intervention in abusive disorders become a focus of study within medical anthropology.

Medicine in China: A History of Ideas. Paul U. Unschuld. Berkeley: University of California Press, 1985. Pp. xi + 423 (index, bibliography, appendix, list of Chinese characters). \$40.00 (hard-cover).

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[This review was submitted by Dr. New prior to his death in December 1985 (see obituary in MAQ 17[3]:83)—Ed.]

Paul Unschuld, a medical historian in the Institute of History of Medicine, University of Munich, has taken on a most formidable task. In this volume, he attempts to cover the development of Chinese medicine from the Shang Dynasty (18th century B.C.) to the present. His main purpose is to see why different, and even antagonistic, systems of therapy appeared in China during these long epochs. To do this, the author focuses his attention on the systems of ideas that were developed.