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## STUDY QUESTIONS ON FAVRET-SAADA, WIKAN, and DAVIS

Sept. 24, 2008

1. In what ways do beliefs in witchcraft in the Bocage resemble your own understanding of beliefs in witchcraft (if you're familiar with such beliefs)? In what ways do they differ?
2. In theory, anyone can be victim of a witch in the Bocage. What categories of person, in fact, become victims? Why?
3. In the Bocage, when is witchcraft likely to be suspected?
4. Favret-Saada says "It is very likely that no one in the Bocage throws spells, which does not prevent people from being hit by them." Such a statement does not appear logical. What does she mean?
5. How is the "unbewitcher" like a physician? How not? How is he like someone who practices alternative medicine?
6. Favret-Saada says that what the unbewitcher does is equivalent to a therapy of the farmer family collective. What does she mean by this?
7. What are the features of this "family therapy?" How does it resemble, and how does it differ from, family therapy practices in the West, both psychotherapeutic and medical?
8. What in the unbewitching reminds you of our conventional assumptions about magic?
9. Why does the "therapy" work, according to Favret-Saada?
10. Favret-Saada's explanation contains a reference to scapegoating. What is this?
11. What, in the absence of a cure "working," maintains the belief in the efficacy of unbewitching?
12. What, from a functionalist analytic perspective, are some possible *positive* functions of witchcraft beliefs in the Bocage?
13. What has replaced this kind of "family therapy" in our own society?
14. Wikan says that the Balinese say "who can think but with their feelings?" and that the Balinese do not distinguish between the two in their language. What do we say about the links between thinking and feeling?
15. Do we see feeling as shapable by expression (behavior)?

16. Do you believe that one person's expressed feeling can spread easily to others? If so, provide 2 examples.
17. "Anger eats away at the heart, destroys the intestines, makes you grow old, ruins your life...better not to care...for we want health." To what degree are such sentiments subscribed to in the West? Subscribed to in the traditions you international students come from?
18. Do we try to let our feelings "free-float" for the most part, or do we try to control them?
19. Wikan says that in Bali health care is embedded in other activities and only rarely singled out. To what degree is this true in your life?
20. To what degree are we concerned with "harmony between oneself and cosmological forces"? With having a mind "that predicates good action, good expression and proper moral judgment"?
21. "...if you are sad, it may spread to another." Give some examples of the notion of "'pull yourself together' for the sake of others" in our own society.
22. Wikan said that prior to her field research she had thought that affective expression has some invariant biological base—is transculturally universal—"so that even though laughter need not signify a positive response, it cannot be the accompaniment of—far less express—deep-felt sorrow or sympathy at death." Do you think that laughter is highly flexible cross-culturally with respect to the meaning underlying it? Or that someone who laughs at a death is either unfeeling or a hypocrite?
23. "The power in healing is the person himself, his *bayu*. If the person *feels* sick, who can make him well?" To what degree do we believe this? To what degree do Western physicians believe this, do you think? Do you? Compare this notion to the article by Barnes with respect to how acupuncture works.
24. "With a strong *bayu* one feels energetic and brave. With a weak *bayu*, one feels fatigued, anxious and trembling." Compare this belief to the situation Ong describes for the multinational factory in Malaysia. Does this notion occur in the West at all?
25. How have the readings we've had so far on symbolic illness and curing changed the way you see sickness and health, if in fact they have?
26. International students: in what ways do the discussions of sorcery and witchcraft in the readings resonate with similar beliefs in your own country?
27. What problems have arisen with the medicalization of PMS in the West?

28. What is a “culture-bound syndrome?”
29. List the reasons given by those who are in favor of including PMS as a DSM-IV category.
30. Describe the cross-cultural evidence for, and against the universality of PMS.