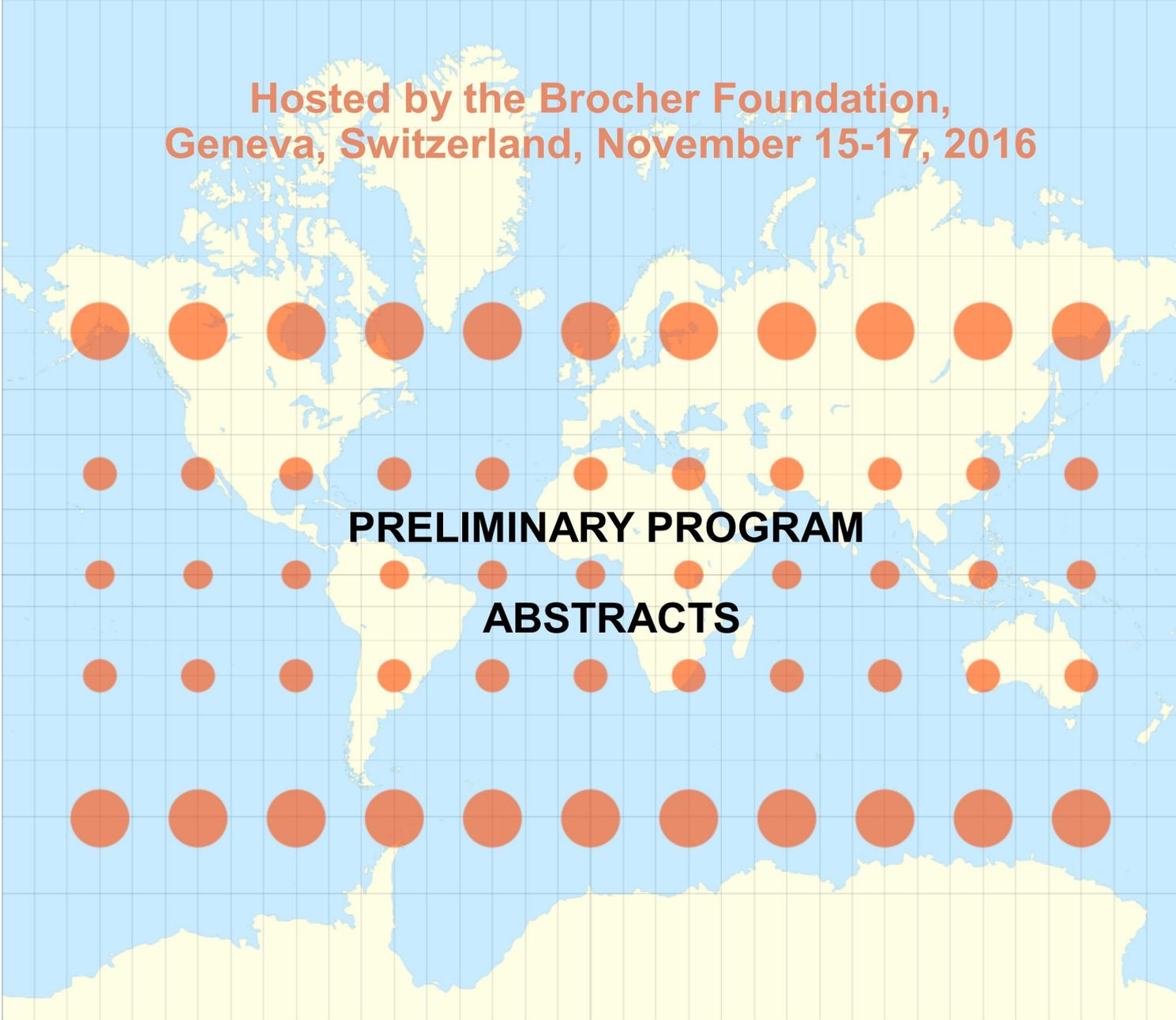


# From psychiatric epidemiology to psychiatric epidemiologies

Applying historical, epistemic and social perspectives to bridge research and public health

Hosted by the Brocher Foundation,  
Geneva, Switzerland, November 15-17, 2016



**PRELIMINARY PROGRAM  
ABSTRACTS**

Organizers: Anne M. Lovell , Steeves Demazeux, Gerald M. Oppenheimer

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**November 14, Evening : 19:00 Welcome reception at Brocher Center**

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**November 15, morning**

**Session 1.1: *Instrumentation in Psychiatric Epidemiology: Caseness and the Problem of Reification***

**Chair: Anne Lovell**

**9:00-9:30 Welcoming Remarks** : *Anne Lovell, Steeves Demazeux, and Gerald Oppenheimer*

**9:30-10:00 Steeves Demazeux**, Philosopher.

Associate Professor, Department of Philosophy, Université Bordeaux-Montaigne, Bordeaux

“The lay interviewer vs. the idealized clinician: some epistemological considerations on the NIMH Epidemiologic Catchment Area Study (ECA) (1980-1985)”

**10:00-10:10 Questions and Answers**

**10:10-10:40 Nancy Campbell**, Historian of science

Professor, Department of Science and Technology Studies, Rensselaer Polytechnic Institute, Troy, NY.

“Instruments and techniques used in psychiatric research, 1950-1970 to approach the ‘ineffable’” (Co-authored with Laura Stark).

**10:40-10:50 Questions and Answers**

**10:50-11:10 Coffee Break**

**11:10-11:40 Nicolas Henckes**, Sociologist

Research Scientist, Cermes3 – French Center for Scientific Research (CNRS), Paris.

“ Small numbers, big issues. Knowledge making in the field of psychosis risk between clinical and epidemiological evidences”

**11:40-11:50 Questions and Answers**

**11:50-12:00 General Discussion**

**12:00 – 2:00 Lunch**

## November 15, Afternoon

### **Session 1.2: *Instrumentation in Psychiatric Epidemiology: Caseness and the Problem of Reification***

**Chair: Martin Preisig**

**2:00–2:30 Gerald Oppenheimer, Historian**

Broeklundian Distinguished Professor, Public Health Program, CUNY Graduate Center; Clinical Professor, Department of Sociomedical Sciences, Columbia University, New York.

“When risk factor epidemiology met mental health: the narrative of cardiovascular disease, stress and mental health”

**2:30-2:40 Questions and Answers**

**2:40-3:10 Rhodri Hayward, Historian**

Senior Lecturer in the History of Medicine, School of History, Queen Mary University of London, London.

“Building Britain's New Towns: Psychiatric Utopianism and Psychiatric Epidemiology in Post-War Britain”

**3:10-3:20 Questions and Answers**

**3:20-3:50 Junko Kitanaka, Anthropologist**

Associate Professor, Department of Human Sciences, Keio University, Tokyo.

“Visualizing the Nation with Dementia: Psychiatric Epidemiology and the Rise of Smart Wellness City in Japan”

**3:50-4:00 Questions and Answers**

**4:00-4:30 Coffee Break**

**4:30-5:30 Discussants:**

**Dana March, Psychiatric Epidemiologist**

Assistant Professor, Epidemiology, Columbia University Medical Center, New York.

**George Weisz, Historian**

Cotton-Hannah Chair of the History of Medicine, McGill University, Montreal

**5:30-6:00 General Discussion**

## November 16, Morning

### **Session 2.1: *Vulnerable Groups, Low-income Countries and Context: Writing the History of Psychiatric Epidemiology from the Ground Up***

**Chair: George Weisz**

**9:30-10:00 Anne M. Lovell**, Anthropologist

Senior Research Scientist Emeritus, Cermes3- Inserm (National Institute of Health and Medical Research), Paris

“Psychiatric epidemiology in the ‘African laboratory’: from transcultural difference to the quest for universals”

**10:00-10:10 Questions and Answers**

**10:10-10:40 Matthew Heaton**, Historian

Associate Professor, Department of History, Virginia Tech, Blacksburg, VA.

“WHO and the Nigerian development of a psychiatric epidemiology”

**10:40-10:50 Questions and Answers**

**10:50-11:10 Coffee Break**

**11:10-11:40 Richard Neugebauer**, Epidemiologist and Historian.

Associate Professor, Clinical Epidemiology in Psychiatry, Mailman School of Public Health, Columbia University, New York.

“Historical and epidemiological perspectives on psychiatric epidemiology in Rwanda”\*

**11:40-11:50 Questions and Answers**

**11:50-12:00 General Discussion**

**12:00 – 2:00 Lunch**

## November 16, Afternoon

### **Session 2.2: *Vulnerable Groups, Low-income Countries and Context: Writing the History of Psychiatric Epidemiology from the Ground Up***

**Chair: Gerald Oppenheimer**

**2:00-2:30 Pratap Sharan, Psychiatrist**

Professor of Psychiatry. All India Institute of Medical Sciences, New Delhi

“India’s early community studies: psychiatric epidemiology in subaltern perspective”

**2:30-2:40 Questions and Answers**

**2:40-3:10: Naomar Almeida Filho, Psychiatrist and Epidemiologist**

Instituto de Saúde Coletiva, Universidad Fédéral da Bahia Salvador, Brasil

“Psychiatric epidemiology in Brazil: notes on the critical history of a postmodern research field in a contemporary peripheral society”

**3:10-3:20 Questions and Answers**

**3:20-3:50 Emmanuel Delille, Historian and Psychologist**

Researcher, Marc Bloch Institute, Humboldt University, Berlin.

“The first transcultural epidemiological studies in the post-war years at the department of transcultural psychiatry at McGill University”

**3:50-4:00 Questions and Answers**

**4:00-4:30 Coffee Break**

**4:30-5:30 Discussants:**

**Padmavati Ramachandran**, Schizophrenia Research Foundation (SCARF), Chennai, India

**Vincent Barras** , Historian, Université de Lausanne

**5:30-6:00 General Discussion**

## November 17, Morning

### **Session 3: *Psychiatric Epidemiology: One or Many?***

**Chair: Dana March**

**9:00-9:30: Bart Rutten**, Psychiatrist and Neuroscientist

Associate professor in Neuroscience of Mental Illness and Head, Division of Neuroscience, School for Mental Health and Neuroscience, Maastricht University

"Epigenetic Epidemiology and Translational Neuroscience"

**9:30-9:40 Questions and Answers**

**9:40-10:10: Luc Faucher**, Philosopher

Professor, Department of Philosophy, University of Quebec at Montreal (UQAM), Montreal, Canada.

"The place of epidemiology in translational psychiatry"

**10:10- 10:20 Questions and Answers**

**10:20-10:40 Coffee Break**

**10:40-11:20 Discussants:**

**John Cromby**, Reader in Psychology, ULSB, Leicester University UK

**Mathieu Arminjon**, Post-doctoral Fellow, University of Geneva

**11:20-12:00 Closing discussion** led by *Anne Lovell, Steeves Demazeux, and Gerald Oppenheimer*

**12:30 – 14:00 Lunch**

## ABSTRACTS & BIOS

### Arminjon Mathieu - Discussant

Bio:

Mathieu Arminjon is a scientific collaborator at the University of Geneva and the Agalma Foundation. His work focuses on the history and epistemology of science and medicine, especially on the intersection between neuroscience and humanities. His current research is concerned with the history and epistemology of bio-regulation and social epidemiology.

### Barras Vincent - Discussant

### Campbell Nancy - From psychiatric epidemiology to psychiatric epidemiologies: using historical, epistemic and social perspectives to bridge research and public health

Abstract:

Within the “epistemic niche” of the US federal research establishment during the 1950s, mental health researchers developed a great variety of instruments, tools, and techniques to chart and elucidate connections between brain and behavior. This paper discusses the growing division between methods of inquiry that delved into the subject’s interiority in order to establish empathy or other forms of affinity between researcher and researched, and “methods of extraction” designed to bring outside of a person evidence of interior perceptions and emotions. Central to these methods of inquiry was the question of how to approach the “ineffable”—experiences that neither subjects nor scientists found themselves able to fully express in words or quantifiable schemes. LSD and other compounds classified as hallucinogens were used to probe these dynamics in a variety of sites. However, they were also used in basic research into serotonin pathways that was suspended during the moratorium on hallucinogen research from the 1970s to the 1990s.

During the 1950s and 1960s, the US federal government conducted clinical mental health research at three sites: the NIH Clinical Center in Bethesda, Maryland; St. Elizabeth’s Hospital in Washington, DC; and the Addiction Research Center in Lexington, Kentucky. US Public Health Service physician-researchers staffed these government labs, carving them out of clinical facilities and institutions designed for custodial care of the mentally ill such as Spring Grove State Hospital in Maryland, the medical campus of The Johns Hopkins University, the University of Maryland at College Park, the Walter Reed Army Institute of Research, and Edgewood Arsenal Chemical Center. Everyone working in these laboratories faced the difficulty of reliably obtaining adequate numbers of “normal controls,” stabilizing diagnostic criteria, and standardizing research materials such as LSD and plant-based hallucinogens.

We estimate this epistemic niche included only around two hundred federal mind-brain scientists throughout the 1950s. Scientists and clinicians moved between posts at different facilities, collaborating across sites as part of government initiatives to study “brain and behaviour.” This paper engages with the themes of the conference: 1) The “reification problem” and the difficulties of reliable categorizations; 2) The “local psychiatric epidemiologies” problem; and 3) The problem of epistemological pluralism.

Bio:

Nancy D. Campbell is Professor of Science and Technology Studies in the School of Humanities, Arts, and Social Sciences at Rensselaer Polytechnic Institute in Troy, New York. She is a historian of science who focuses on addiction research in *Discovering Addiction: The Science and Politics of Substance Abuse Research* (University of Michigan Press, 2007); gender and drug policy in *Using Women: Gender, Drug Policy, and Social Justice* (Routledge, 2000) and with Elizabeth Ettorre, *Gendering Addiction: The Politics of Drug Treatment in a Neurochemical World* (Palgrave, 2011); and the history of treatment with co-authors JP Olsen and Luke Walden, *The Narcotic Farm: The Rise and Fall of America’s First Prison for Drug Addicts* (Harry N. Abrams, Inc., 2008). She is Associate Editor of the journal *Contemporary Drug Problems*.

### Cromby John - Discussant

Bio:

John Cromby is Reader in Psychology, ULSB, Leicester University UK. He has worked in the Universities of Bradford, Nottingham and Loughborough, and has conducted research in the areas of drug addiction, learning disability and mental health. He is the co-author of *Psychology Mental Health & Distress* (2013; a British Psychological Society ‘book of the year’) and the author of *Feeling Bodies: embodying psychology* (2015). His current projects include exploring the role of feelings in psychosis, and identifying associations between migration, epigenetic change and mental health.

**de Almeida Filho Naomar - Psychiatric epidemiology in Brazil: notes on the critical history of a postmodern research field in a contemporary peripheral society**

**Abstract:**

The author discusses historical aspects of psychiatric epidemiology in its relations with the development of scientific knowledge in Brazil, a contemporary social formation in Latin America. Initially, pre-epidemiological studies of mental illnesses, in the beginning of the past century, are reviewed. The post-II World War was a historical landmark in the growing of the discipline, with the realization of a first generation of community surveys, especially in Northeast Brazil. The second generation of epidemiological studies stressed social-cultural factors and more rigorous screening instruments. The third generation of studies converges to the current trend of psychiatric epidemiology in the direction of methodological improvement of research models, case identification techniques and, above all, diagnostic standardization. Finally, psychiatric epidemiology is analyzed as a postmodern research field that has evolved in a contemporary peripheral society in the the Southern hemisphere.

**Bio:**

Doctor of Science Honoris Causa at McGill University, Canada. PhD in Epidemiology at North Carolina University-USA, Visiting Professor at the following universities: University of North Carolina at Chapel Hill, University of California at Berkeley, University of Montreal and Harvard University. First Holder of the Chair Juan Cesar Garcia of Universidad de Guadalajara, Mexico; Visiting Professor of Epidemiology en mastery of Lanús National University, Argentina. Scientific activity: epidemiology of mental disorders, particularly the effect of race, racism, gender and social class on mental health. In his academic work, there is a series of textbooks on the epidemiological method: *Epidemiology & Health* (with Zelia Rouquayrol Rio: Guanabara-Koogan, 6. ed 2003); *Introduction to Epidemiology* (with Zelia Rouquayrol Rio: Guanabara-Koogan, 4. ed 2006); *Epidemiology & Health: Fundamentals, Methods, Applications* (with Mauricio Barreto Rio: Guanabara-Koogan, 2011); and on epistemological aspects of epidemiology and the field of Public Health: *Epidemiology without numbers* (in Portuguese Rio: Campus, 1989; translation into Spanish Buenos Aires? Paltex / PAHO, 1992); *Clinical and Epidemiology* (Rio: Abrasco / PACE, 2. ed 1997); *The Health Science* (São Paulo: Hucitec, 2000); *La shy science: Essays hacia la deconstrucción de la epidemiología* (Buenos Aires: Editorial Place, 2000); *What is Health?* (Rio: Fiocruz, 2011); *Public health: theory and practice* (with Jairnilson Silva Paim Rio de Janeiro: Medbook, 2014). He was Rector of the Federal University of Bahia from 2002 to 2010. Since then he has focused his academic research studies on the university and its relationship with society, highlighting the following books: *New University: Texts Critics and Hopeful* (Brasilia: Publisher UNB, 2007), the *New University Memorial: UFBA 2002-2010* (Salvador: Edufba, 2010), coauthored with Boaventura Sousa Santos, the *University in the Twenty-first Century: Towards a New University* (Coimbra: Almedina, 2008) and, co-authored with Fernando Seabra Santos, the *Fourth Mission University* (Coimbra: Publisher of the University of Coimbra, 2012). Dr Naomar Monteiro de Almeida Filho is currently Rector pro-tempore in the Federal University of South of Bahia in Brazil.

**Delille Emmanuel - The first epidemiological studies in the post-war years at the department of transcultural psychiatry at McGill University**

**Abstract:**

The Section of Transcultural Psychiatry at McGill University – the first of its kind in the academic landscape – was founded in 1955 and is one of the main research centers in the postwar period to produce knowledge at the intersection of cultural psychiatry (or ethnopsychiatry) and epidemiology. In the 1950s, before the creation of the Department of Epidemiology at McGill, the team led by Eric Wittkower had already embarked on a series of surveys on schizophrenia and depression. These early surveys differ from asylum statistics and the global programs developed by the WHO. They were based on a large network of correspondents created by means of the first international journal (*Transcultural Research in Mental Health Problems*). Thanks to this visibility, the group of Canadian researchers led by Wittkower played a central role in the organization of international meetings such as the panel at the World Congress of Psychiatry in Zurich (1957) and the meeting organized by Alexander Leighton in Montreal (1961), where he discussed his studies. In this paper I will explore the type of questionnaires used at McGill in the 1950s, and compare this early methodology with the one developed by the Cornell team led by Leighton. Next, I will turn to the evolution of the surveys after the arrival of the epidemiologist H.B.M. Murphy to McGill (1959), and focus on the standardization of techniques and the reproduction of results (discussions stirred by the Stirling County Study and the Cornell-Aro Project). Finally, by following the main actors' movements between different institutions I will track the shifting disciplinary boundaries of Social Psychiatry (Cornell), Transcultural Psychiatry (McGill) and Psychiatric Epidemiology (Harvard) in the 1950s and 1960s.

**Bio:**

Emmanuel Delille, PhD, is a French historian working at Centre Marc Bloch (CMB, Humboldt University, Berlin) and Centre d'Archives en Philosophie, Histoire et Édition des Sciences (CAPHÉS, École Normale Supérieure, Paris). One of his major interests is the history of psychiatry: the intellectual networks and comparative history between France, Germany, and North America. Within this field, he is currently researching the history of cultural psychiatry and the shared history ("histoire croisée") of medicine, anthropology, and epidemiology in the 20th century. Significant publications include: "On the History of Cultural Psychiatry: Georges Devereux, Henri Ellenberger, and the Psychological Treatment of Native Americans in the 1950's" (*Transcultural Psychiatry*, 2016) and "Le cours de Ian Hacking au Collège de France: la psychiatrie comme lieu d'observation privilégié de l'histoire des concepts scientifiques" (*Revue de Synthèse*, 2016). He is the winner of the Dimitrije Pivnicki Award (McGill University, 2014).

## **Demazeux Steeves - The idealized clinician vs. the lay interviewer: some epistemological considerations on the NIMH Epidemiologic Catchment Area Study (1980-1985)**

### **Abstract:**

The main goal of the NIMH Epidemiologic Catchment Area Study (ECA), conducted between 1980 and 1985, was to measure with a high precision the prevalence of specific mental disorders in the general US population. A new tool, the Diagnostic Interview Schedule (DIS), was developed in order to collect the clinical data in five large communities. Beside the purpose of limiting the costs of the study through the use of lay interviewers rather than of trained clinicians, one central concern for the construction of this standardized tool was to assure perfect objectivity in the process of collecting the data. In this presentation, I will examine the arguments put forward by the instigators during the elaboration of the DIS, which led them to consider that the strictest objectivity could be obtained if the clinical data were collected by lay interviewers without any clinical experience, specifically trained to assess the DIS, and following the clear and explicit requisite that they do not take any initiative of their own at any time during the conduct of the interviews. I will question this kind of "blind vision" (Daston & Gallison, 2007) in the collection of psychiatric epidemiological data, and I will try to show that it raises general theoretical issues about the meaning of the notion of "symptom" in American psychiatry at the beginning of the 1980s.

### **Bio:**

Steeves Demazeux is an associate professor of philosophy at the Université Bordeaux Montaigne (France). He received his doctoral degree at Paris Sorbonne University (IHPST laboratory) and spent 2 years as a postdoctoral fellow at the CERMES Institute (Paris Descartes University). His research interests include history and philosophy of psychiatry, philosophy of medicine and philosophy of science. He is the author of *Qu'est-ce que le DSM? Genèse et transformations de la bible américaine de la psychiatrie* (Ithaque 2013); the co-author, with Françoise Parot and Lionel Fouré, of *Psychothérapie, fondements et pratiques* (Belin 2011); the co-editor, with Patrick Singy, of the collective volume, *The DSM-5 in Perspective. Philosophical Reflections on the Psychiatric Babel* (Springer 2015), and the co-editor, with Jerome Wakefield, of the collective volume, *Sadness or depression?: International perspectives on the depression epidemic and its meaning* (Springer 2016).

## **Faucher Luc - The place of epidemiology in translational psychiatry**

### **Abstract:**

Translational psychiatry is gaining momentum under the initiatives of projects like the RDoC in the United States or ROAMER in Europe. Translational psychiatry, like its cousin, translational medicine, aims to bring basic sciences to the bedside (mainly by developing therapies more adapted to the peculiarities of the patients). In this context, epidemiology seems to be relegated to the backseats. In my presentation, I would like to examine a potentially more important role for epidemiology (one could therefore call this form of epidemiology "translational"; Weisman et al. 2011). More precisely, I will examine how epidemiology could crucially contribute to the explanation of the mechanisms isolated in basic sciences through its discovery of "epigenetic factors".

### **Bio:**

Luc Faucher is Full Professor in philosophy at the Université du Québec à Montréal. His research interests cover philosophy of cognitive sciences, philosophy of race, philosophy of emotions and philosophy of psychiatry. He published essays in journals such as *Philosophy of Science*, *Philosophy of Social Sciences*, *Emotion Review*, *Journal of Social Philosophy*, *Synthese* and the *Monist*.

## Hayward Rhodri - Building Britain's New Towns: Psychiatric Utopianism and Psychiatric Epidemiology in Post War Britain

### Abstract:

By the early 1930s it was a commonplace belief among British doctors that everyday illnesses could be seen as symptoms of social failure. Conditions ranging from ulcers to rheumatism, which has once been attributed to environmental factors such as diet or damp, were now read as coded social critiques: complaints incarnated in the sufferer through anxiety or stress. This form of interpretation transgressed the familiar boundaries between politics and medicine, opening up the possibility of a new kind of therapeutic intervention through social planning. This paper explores the life and work of a leading proponent of these ideas, Stephen Taylor (Lord Taylor of Harlow). Taylor, now largely remembered for his invention of the suburban neurosis, worked variously as a psychiatrist, Labour MP and advised on the design of the new towns. His career provides an insight into the postwar embrace of psychiatric utopianism with belief that emotional health could be achieved through urban planning while at the same time demonstrating the complex and mutually con-constitutive relationship between epidemiology and policy.

### Bio:

Rhodri Hayward is a Senior Lecturer in the History of Medicine at Queen Mary, University of London and a co-founder of the Queen Mary Centre for the History of the Emotions. He has published on the history of dreams, Pentecostalism, demonology, cybernetics, and the relations between psychiatry and primary care. His current research examines the rise and political implications of psychiatric epidemiology in modern Britain. His book *Resisting History: Popular Religion and the Invention of the Unconscious* was published by Manchester University Press in 2007 and *The Transformation of the Psyche in British Primary Care* by Bloomsbury in 2014

## Heaton Matthew - WHO and the Nigerian development of a psychiatric epidemiology

### Abstract:

This paper will examine the historical development of psychiatric epidemiology in Africa, with particular emphasis on Nigeria and its relationship with World Health Organization programs from the late 1950s through the late 1970s. Examining WHO archives, as well as the efforts of psychiatrists working in Nigeria to collect data on the form, content, and prevalence of psychiatric disorder in African populations, this paper will trace parallel historical trajectories in the development of psychiatric epidemiology at WHO and in Nigeria the late 1950s and early 1960s with convergence taking place most notably with the establishment of the University of Ibadan as a field research center for the International Pilot Study of Schizophrenia in the late 1960s. As a result, this paper argues that psychiatric epidemiology in Nigeria (and Africa more generally) has a multivalent history that complicates narratives of sources and origins at the same time that it recognizes the complex synergy between the "global" and "local" in the construction and dissemination of scientific knowledge. Concerns over the effective use of tools and methods, issues of translation and communication, and the ultimate value of cross-cultural comparisons are evident in Nigeria as in other contexts. The point is not to suggest that the Nigerian experience with psychiatric epidemiology is unique, but rather that it illuminates the systematic complications of conducting comparative work in psychiatric epidemiology both for psychiatric researchers in the field and for historians seeking to reconstruct an ethical and equitable history of global mental health programs.

### Bio:

Matthew M. Heaton is an Associate Professor in the Department of History at Virginia Tech. His research interests are in the history of health and illness in Africa with particular emphasis on Nigeria. He is the author of *Black Skin, White Coats: Nigerian Psychiatrists, Decolonization, and the Globalization of Psychiatry* and co-author of *A History of Nigeria*.

**Henckes Nicolas - Small numbers, big issues. Knowledge making in the field of psychosis risk between clinical and epidemiological evidences**

**Abstract:**

The paper will explore the current status of the concept of "at risk mental states" in global psychiatry. Created in the second half of the 1990s in order to diagnose and allow treatment for young adults with incipient schizophrenia, at risk mental states have since become a priority for both mental health policies and research in a number of countries. However the very nature of the phenomena targeted by the concept remains unclear. While most of its advocates recognize that at risk mental states should not be seen as constituting a category but merely refer to a set of criteria, the latter are widely used in clinical settings to create groupings of patients that are treated and conceived of within a categorical framework. A key dimension of the science and debates over these issues is the fact that the epidemiology of at risk mental states still remains based on small numbers – small numbers of studies, small numbers of patients in each study. As a result, at the local level, the objectification of at risk mental states oscillates between clinical and epidemiological approaches in a peculiar form of figure-ground reversal. Based on 2-year ethnography in a research and diagnosis center for at risk mental states as well as on a wider participation in the transnational and international world of psychosis risk the paper will focus on knowledge construction in the field of at risk mental state.

**Bio:**  
Nicolas Henckes is a sociologist and associate researcher at the Centre de Recherche Médecine, Sciences, Santé, Santé mentale et Sociétés (CERMES3/CNRS). He has been working on the changing landscape of mental health in France during the XXth century. His most recent project looks at the current status of psychosis risk in Europe in an ethnographical as well as historical perspective.

**Kitanaka Junko - Visualizing the Nation with Dementia: Psychiatric Epidemiology and the Rise of the Smart Wellness City in Japan**

**Abstract:**

In Japan, which is leading the global trend towards "super-aging society" with the highest proportion of older adults in the world, the sudden rise in the number of people with dementia has evoked an imminent sense of risk and national crisis. This is partly triggered by the fact that the Japanese government, in 2004, changed the official name of dementia from an older and stigmatizing term "chih?sh?" (literally meaning senile syndrome) to a more neutral and ambiguous sounding "nin-chish?" (cognitive syndrome). Redefined as such, dementia has suddenly become a ubiquitous illness among aging Japanese, many of whom were already concerned about their memory loss and cognitive decline. Their concerns have found a receptive soil in the form of gerontological experts leading the way towards early intervention, along with the government and industry helping develop health-tracking devices and an urban planning model called Smart Wellness City equipped with 24-hour surveillance technologies. An important factor for enabling such a large-scale reimagining and redesigning of the aging nation is the resurgence of psychiatric epidemiology (which was, in the antipsychiatry movement of the 1960s-80s, debunked as an insidious tool of psychiatric labeling). Coming out of the dark age of epidemiology, psychiatrists now claim that one in every four Japanese over 65 suffers either from dementia or MCI (mild cognitive impairment). Behind the cool and objective scientific rhetoric of epidemiology, however, lies a highly reflexive space of actual epidemiological fieldwork, where experts debate the diagnostic border between natural aging and pathological aging as well as what would constitute a caring form of epidemiological surveillance and intervention. Excavating these hidden layers of actual practice of psychiatric epidemiology on the ground through archival materials and oral history, this paper seeks to provide an anthropological perspective on what lies at the intersection of psychiatric epidemiology as a scientific tool of visualizing the nation at risk and the political debate about the nature of the emergent surveillance society.

**Bio:**  
Junko Kitanaka is a medical anthropologist and associate professor in the Department of Human Sciences, Keio University, Tokyo. For her McGill University doctoral dissertation on depression, she received a number of awards including the 2007 Dissertation Award from the American Anthropological Association's Society for Medical Anthropology. This has since been published by Princeton University Press as a book titled *Depression in Japan: Psychiatric Cures for a Society in Distress*, which won the American Anthropological Association's Francis Hsu Prize for Best Book in East Asian Anthropology in 2013. The book has been translated by Dr. Pierre-Henri Castel at the University of Paris-Descartes and published by D'Ithaque as *De la mort volontaire au suicide au travail: Histoire et anthropologie de la dépression au Japon* (2014). She is currently working on a new project on dementia, old age, and the psychiatrization of the life cycle.

## **Lovell Anne M.- Epidemiological knowledge production in and out of the margins: Senegal's 'living laboratory' and the early WHO mental health research programs**

### **Abstract:**

In post-Independence Senegal, the French military neuro-psychiatrist Henri Collomb combined psychoanalytic, biomedical, and ethnological perspectives in collaboration with traditional healers to produce a unique form of ethno-psychiatric practice, known as the Dakar (or Fann) School. Yet in the late 1960s and early 1970s, when French psychiatrists in the metropole were largely shunning psychiatric epidemiology, Collomb and his researchers embarked on a series of epidemiological field studies. These radiated out from Serer villages in Niakhar, the location of the French development agency's "living laboratory" (Tilley 2013), and the world's second oldest such statistical observatory. While the studies overlapped chronologically with the World Health Organization's schizophrenia studies, they connect up with its lesser-known research programs limited to developing countries. This paper traces how epidemiological knowledge was produced at and through circulation between numerous points of encounter between the Serer villagers and their chiefs, the Fann school researchers, the University of Dakar medical students, U.S. universities, the French development agency and the WHO. I examine the tensions underlying these studies, between "epidemiological primitivism" and the quest for a universal psychopathology, between epidemiology as generator of abstract knowledge and as justifier of nascent public mental health, between boot-strap epidemiology and the modernist epidemiology project. Finally, I show how the larger Senegalese post-independence movement to nationalize and appropriate psychiatry and science affected the ways and kinds of knowledge produced.

### **Bio:**

Anne M. Lovell received her PhD in medical anthropology at Columbia University, where she also an NIMH Fellow in psychiatric epidemiology. She is Senior Research Scientist Emeritus at France's National Institute for Health and Medical Research (INSERM) and member of the Doctoral School at the Ecole des Hautes Etudes en Sciences Sociales (EHESS). Dr. Lovell currently directs the mental health component of GLOBHEALTH, a European Research Council (ERC) funded research project at the Research Center for Medicine, Science, Health, Mental Health and Society (CERMES3). Her research concerns itself with how illness, health and notions of the "mental" are shaped within a nexus of material culture, kinship, moral and other economies; patient and carer's experience of illness; and how psychiatry and related disciplines come to know. Recent publications include a special issue of International Journal of Epidemiology on the history of psychiatric epidemiology, co-edited with Ezra Susser; and the book, *Face aux désastres: une conversation à quatre voix sur folie, le care et les grandes détresses collectives*. Dr. Lovell is a member of the International Advisory Group for the Revision of ICD-10 Mental and Behavioral Disorders.

**March Dana - Discussant**

## Neugebauer Richard - Prospects for an Historical Epidemiology of the Rwandan Genocide

### Abstract:

Rwanda is a small rain fed subsistence agricultural society in the Great Lakes Region of Africa. For decades, Rwandan political life was marked by conflict between the two major ethnic groups, the Hutu, comprising the great majority of the 1990 population of 7 million, and the Tutsi minority. In April 1994, the extremist arm of the government, a separate militia and Hutu civilians launched a genocidal war against the Tutsi, slaughtering 800,000 to 1,000,000 Tutsi in 100 days. The Genocide was halted only by a Tutsi army organized in exile, the UN Peace Keepers having withdrawn almost immediately. The Genocide creates a harrowing but strategic opportunity to assess whether psychiatric epidemiology can evolve to accommodate analytically these atrocious historical phenomena. A genocide should rightly transform the measures, analyses, rates and risk factors of classical epidemiology. We examine the psychiatric epidemiological literature from Rwanda to assess, for example, whether the dominant use of cross sectional studies in post-conflict societies has been challenged, reflecting a recognition that here the cross-sectional study can not be offered as a "snap shot" in time or of time since here time is not measured by the calendar day or the fictive "point prevalence day" of a survey but in Rwandan historical time that has been irreparably riven by 100 days in 1994. We ask whether socioeconomic status is measured by education and income or been replaced by more culturally appropriate metrics, e.g., possession of a radio and a community's pit latrine with a lid. Finally we consider whether to the litany of established disaster risk factors has been added agents that cause injury simply by their shadow.

### Bio:

Richard Neugebauer, trained as a Classical and Early Modern European social historian at the University of Chicago and Columbia University, has worked in the field of perinatal and psychiatric epidemiology for the past 35 years. His historical work include the application to historical archives of a capture-recapture method (the Bernoulli census) to address the problem of estimating the original size of historical populations for whom only incomplete enumerations survive. He also discovered the first reported case of mental illness in the British colonies in the New World dated to summer of 1637. His work in contemporary epidemiology has focused primarily on the psychiatric effects of violence and loss. He began with work on the effect of early pregnancy loss on women's risk for major and minor depression. Thereafter he turned his attention to the question of the mental health impact on children and adolescents of community violence in the US. Most recently his research interests center on the effect of the catastrophic violence of the Rwandan Genocide against the Tutsi, on posttraumatic stress, depressive symptoms, social functioning, prolonged grief and moral development. In an earlier foray into links between history and epidemiology, Neugebauer examined the impact of intrauterine exposure to maternal undernutrition during the Dutch famine on male offsprings' risk for antisocial personality disorder in early adulthood. His publications may be found in the American Journal of Epidemiology, Science, Journal of the American Medical Association, Archives of General Psychiatry, American Journal of Obstetrics and Gynecology and other medical and scientific journals. In the evenings he endeavors to understand Rilke's Tenth Duino Elegy and methods of representing "60" in Babylonian mathematics.

## Oppenheimer Gerald - The Type A Personality Disorder: Risk Factor à la Mode?

### Abstract:

The notion of stress, first clearly articulated in the 1930s by endocrinologist Hans Selye, refers to a non-specific biological response of the body to any demand for change; in particular, Selye studied the biochemical and hormonal responses of the body to stress, which he held could cause pathological outcomes. After WW II, researchers expanded stress research to psychiatric symptoms and disorders. In addition, the further extension of stress research to somatic diseases permitted the incorporation of subjective distress into the new risk factor epidemiology of chronic disease created after 1945. An example at hand is the relationship between uncontrollable stress and Type A behavior, which mediated the individual's responses to such stress, thereby potentially enhancing risk for coronary heart disease (CHD). The cluster of behaviors under the Type A rubric served as a hypothetical factor of added risk to the pantheon of variables like blood pressure and cholesterol. The Type A behavior pattern includes an intense drive to achieve goals, profound competitiveness, and an acute sense of time passing. In an era when the CHD patient profile was of a white middle-aged man, particularly a driven achiever in the best American tradition, the Type A risk factor logically fit expectations. Subsequently, surveys for personality type were added to CHD cohort studies and randomized clinical trials, despite the past commitment of epidemiologists to proximal, strictly clinical variables. This paper will trace the biography of stress and Type A research by CHD investigations, their eventual dismissal by mainstream American epidemiologists, but their continued usefulness to social epidemiologists seeking greater understanding of the inverse relationship between SES and coronary mortality.

### Bio:

Gerald M. Oppenheimer, Ph.D., MPH, is Professor at the School of Public Health, City University of New York and Professor of Clinical Public Health at the Mailman School of Public Health, Columbia University; he was the Broeklundian Distinguished Professor at Brooklyn College and is Professor in the Department of History, CUNY Graduate Center. Since the mid-1980s, he has published extensively on the AIDS epidemic and on the history of public health and the history of chronic disease. With Ronald Bayer of Columbia University, he has co-edited *Confronting Drug Policy: Illicit Drugs in a Free Society* (1993) and co-authored *AIDS Doctors: Voices From the Epidemic* (2000) and *Shattered Dreams? An Oral History of the South African Epidemic* (2007). His articles have appeared in the *New England Journal of Medicine*, *American Journal of Public Health*, the *International Journal of Epidemiology* and other professional journals of medicine, public health, ethics and law. He is currently writing a social and scientific history of coronary heart disease epidemiology in the United States.

## Ramachandran Padmavati - Discussant

**Bio:**  
Padmavati Ramachandran completed her Postgraduate Psychiatry degree at the University of Bombay, India and since then has been with the Schizophrenia Research Foundation, (SCARF) Chennai, India. She has been involved in several research areas like epidemiological studies, drug trials, untreated schizophrenia, culture and psychoses, metabolic disorders in mental illness. She has been closely involved in SCARF's community mental health programs and the telepsychiatry project. Her key interests have been in socio-cultural aspects of Mental illnesses. She is currently working on Stigma in mental illness and in physical comorbidities in schizophrenia. She has published a large number of publications in peer reviewed national and international journals. She is a reviewer of many national and international psychiatric journals and serves on several Scientific advisory committees and Institutional Review Boards. Padmavati currently holds the position of Additional Director at SCARF, India .

## Rutten Bart - Epigenetic Epidemiology and Translational Neuroscience

**Abstract:**  
The scientific frontiers in neuroepigenetic research are currently challenged by difficulties in capturing robust and relevant environmental exposures in a longitudinal manner, which would allow for investigations of changes over time. Neuroepigenetic research is furthermore challenged by the very limited accessibility of the primary tissue type of interest, i.e. the brain, as well as by the complexity of the numerous and dynamic cell populations that are present in a given brain region. The field is therefore in search for innovative ways that enable scientists to tap into the epigenetic mechanisms underlying brain (dys) functioning. Our recent research has focussed on prospective human studies on longitudinal changes in epigenetic profiles as measured in blood samples over the period of exposure to robust environmental factors, i.e. i) the administration of (therapeutic) seizures to the brain for patients with treatment-resistant depression, and ii) combat trauma exposure during military deployment, and in relation to longitudinal exposure-related alterations in mental health. Through a multistep validation and replication cycle consisting of methylation-mRNA analyses, human blood-brain correlations, cross-species validation and replication in an independent cohort, the results of the studies may be informative for enhancing our understanding on how epigenetic epidemiology can possibly advance our understanding of epigenetic mechanisms involved in (dys)functioning of the brain,  $\text{C}\text{E}\text{mind-body}^1$  interplay, and in mental health.

**Bio:**  
Driven by his combined background as neuroscientist and clinical psychiatrist, dr. Rutten has initiated, performed, coordinated and steered translational and multidisciplinary research projects on Neuroepigenetics in relation to Mental Health and Illness. His research approach is characterised by combining human observational studies (longitudinal epidemiological cohorts as well as post-mortem brain studies) with in-vivo and ex-vivo experimental animal studies as well as molecular biological analyses, focusing on the neurobiological underpinnings of differential susceptibility to environmental stressors. His research has resulted into a range of successful research projects and highly cited publications in high-impact journals such as Nature, Molecular Psychiatry, Schizophrenia Bulletin, Nature Neuroscience amongst others, and into roles as vice-coordinator of large collaborative projects funded by the EU funding scheme FP-7 and Horizon2020 on the theme of gene-environment interactions and neuroepigenetics in psychosis and dementia. In addition dr. Rutten chairs a large group of translational neuroscientists of the division Neuroscience, School for Mental Health and Neuroscience at Maastrich University and is part-time active as clinical psychiatrist in the field of psychotrauma.

## **Sharan Pratap - Evolution of community psychiatric epidemiology in India: a subaltern critique**

### **Abstract:**

**Objective:** Epidemiological research in India has evolved from simple general surveys to more targeted and specific insights over the years. However it is not clear whether epidemiological studies conducted in India have affected other research domains in fundamental ways or had significant impact on policy making. In spite of the increasing number of epidemiological studies undertaken over the years in various socio-cultural settings, there has been a lack of focus on marginalised and minority sections of the society. Our study reviews critically, the existing community epidemiological studies in India and attempts to describe the evolving trends in this research, the factors that contribute to these trends, and their contribution to policy making.

**Methods:** Extensive search of PubMed, Indian Journal of Psychiatry website and Google Scholar using search terms “psychiatry” “prevalence”, “community”, and “epidemiology” was done along with the manual search of journals and cross-references. Individual studies were reviewed with focus on sample population and methodology used.

**Results:** Since the first epidemiological study conducted by Dr Govindaswamy in 1958-59, various studies have been undertaken. However the prevalence rates obtained from these epidemiological studies in India show wide variations and have been generally lower than international figures. Significant methodological differences pose difficulty in comparability of the studies. Further analysis of, whether the needs of the population have been assessed effectively through these epidemiological studies and subsequently addressed in mental health related policies will be discussed in the paper.

**Conclusion:** Epidemiological data form a basic prerequisite in chalking areas of unmet need, assessing risk and protective factors and formulating preventive and outcome measures. These in turn can play an important role in informing policy. The review will highlight the need to improve the methodological rigour of future epidemiological studies conducted in India, so that they can effectively contribute to policy making.

### **Bio:**

Dr. Pratap Sharan is a professor in the Department of Psychiatry, All India Institute of Medical Sciences (AIIMS) in New Delhi. In addition to his MD, he holds a PhD from Postgraduate Institute of Medical Education and Research, Chandigarh, India. He has conducted research on mental health research in low- and middle-income countries, classification of mental disorders, and identification of depression in primary health care in collaboration with the World Health Organization; Global Forum for Health Research, Geneva; World Health Organization – South East Asia Regional Office, New Delhi, and has authored many papers, monographs, books and chapters. Dr. Sharan is a member of the WHO International Advisory Group for the revision of the ICD-10 Mental and Behavioural Disorders. I strongly feel that there are multiple ways to recognize different lived realities of suffering worldwide and to respond to distress. I also support development that is owned and sustained by people in the South.

## **Weisz George - Discussant**

### **Bio:**

George Weisz is the Cotton-Hannah Chair of the History of Medicine at McGill University, Montreal. His two most recent books are *Chronic Disease in the Twentieth Century: A History* (2014) and *Divide and Conquer: A Comparative History of Medical Specialization, 1830-1950* (2006). He has also written books about the creation of French universities during the Third Republic and the history of the Paris Academy of Medicine in the 19th century. He has edited five collective volume including *The History and Sociology of Quantification in Medicine* (2006) and *Greater than the Parts: Holism in Biomedicine 1920-1950* (1998). He has written articles on mineral waters, national differences in gynecological practices, and efforts at international standardization notably through practice guidelines. He is currently working on institutions of global health.

# Useful information

## ▪ Accommodation

**Brocher Foundation, 471 route d'Hermance CP 21**

**1248 Hermance – Switzerland**

Tel. +41 22 751 93 93, Fax. +41 22 751 93 91

**Checkin 2 pm to 8 pm / Checkout 9 am.**

On your arrival on the domain of the foundation, go to the Villa Brocher, mansion house (from 2 pm to 8 pm).

Please call us to inform us of your situation in case of delay (lost luggage or flight delay).

## ▪ Ground transportation: Geneva airport / Brocher Foundation

The airport is located at nearly 4 km from Geneva downtown.

► **Bus:** The easiest way to get into Hermance is to take the **bus 10** from the airport and stop at “Rive”. Then, change in Rive to take the **bus E** heading for Hermance (bus stop just in front of the “Starbucks coffee”) going straight away to the foundation and stop at “Triaz”, right in front of the foundation.

► **Train and Bus:** Departs on the bottom level of the terminal. There are 4 – 6 trains per hour and the journey to Geneva main station, Cornavin, takes 5 minutes; then take **bus 8** heading for “VeyrierDouane”.

Change in Rive to take the **bus E** heading for Hermance (bus stop just in front of the “Starbucks coffee”) going straight away to the foundation and stop at “Triaz”, right in front of the foundation.

► **Taxi:** 45 minutes. It costs around 90 CHF (not covered by the foundation).

**Please note** that the Geneva public transportation is free for all incoming passengers. At the airport, take a free ticket from the machine, valid 90 minutes (located in the luggage collection hall, just on the left of the customs ); the bus driver requires both your free bus ticket and flight ticket. *This concerns all the public transportation (bus and train).*

## ▪ Additional information about ground transportation

Direct links to Google maps:

► Airport to Brocher foundation: <https://goo.gl/maps/wnPHg>

► Bus, trams: <http://www.tpg.ch/>

► Train: <http://www.gva.ch/fr/desktopdefault.aspx/tabid67/>

## ▪ Meals

Breakfasts, lunches, coffee breaks and dinners are provided as part of the workshop.

► Breakfasts on 15 16 and 17 November are served at the mansion house, from 7.30 am to 8.45 am.

► Lunches on 15 16 and 17 November are served as a light buffet at the Brocher Centre (please refer to the program).

► Dinners on 14 15 and 16 November are served at the Brocher centre, 7.00 pm.

## ▪ WiFi password

► **wifibrocher** (works on the entire domain)