

Symposium | CFI : [Symposium 20] How to make the real critical transcultural psychiatry in japan today

📅 Thu. Sep 25, 2025 4:25 PM - 5:55 PM JST | Thu. Sep 25, 2025 7:25 AM - 8:55 AM UTC 🏢 Session Room 7
(Conference Room C)

[Symposium 20] How to make the real critical transcultural psychiatry in japan today

Moderator: Yasuo Miwaki (Jinai University)

[SY-20]

How to make the real critical transcultural psychiatry in japan today

Miwaki Yasuo¹, Hidemoto Makise², Hidehiko Kurita³, Daisuke Nakamura⁴, Ioannis Gaitanidis⁵ (1. Kyoto university (Japan), 2. Chubu university (Japan), 3. independent (Japan), 4. Toyohasikagakugijutsu university (Japan), 5. Chiba university (Japan))

[SY-20-01]

Religion1 in japanese psychiatry when it was occidentalized and Riligion2 out of japanese psychiatry which overpasses always the occidentalisation

*Miwaki Yasuo¹ (1. Kyoto university (Japan))

[SY-20-02]

'The clinical practice of topology' and Cultural psychiatry

*Hidemoto Makise¹ (1. Chubu University (Japan))

[SY-20-03]

Why Does Cultural Psychiatry Not Adopt an Emperor-Centered Ideology?: Healing and Politics in the History of Folk Psychotherapy in Early 20th-Century Japan

*Hidehiko Kurita¹ (1. Bukkyo University (Japan))

[SY-20-04]

Electroshock Therapy through the Lens of French Epistemology: Insights from Bachelard and Canguilhem

*Daisuke Nakamura¹ (1. Toyohashi University of Technology (Japan))

[SY-20-05]

Beyond Perspectivalism: Problems (and Solutions) to the Study of "Spiritual Therapies"

*Ioannis Gaitanidis¹ (1. Chiba University (Japan))

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Keywords : history of psychiatry、 manner of critic、 antipsychiatry、 culturalpsychiatry

The history of Japanese psychiatry. The first period: Followers of Kraepelin. The second period: The colonial psychiatry cannot be trusted. Anti-psychiatry and cultural psychiatry emerge, and the above two are in conflicts. The third period: Groups of people imitate dialogue-centered therapy. The fourth period: Here we are now. How we can decide our manner?

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[SY-20-01] Religion1 in japanese psychiatry when it was occidentalized and
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occidentalisation

*Miwaki Yasuo¹ (1. Kyoto university (Japan))

Keywords : occidentalisation、 cultural psychiatry、 anti-psychiatry、 religion1、 religion2

Western psychiatry was adopted by Japan during the Meiji period, following the colonialist model of Western psychiatry and pushing out Kampo (traditional medicine). However, folk religions did not disappear. Western psychiatry functions by categorising certain conditions as "culture-bound syndromes." By reversing this categorisation, cultural psychiatry influenced by the New Left emerges. This is referred to here as "Religion 1." Furthermore, Japanese psychiatry adopts various other intellectual trends, but it also contemplates whether it can treat a disease that is severed from its context—a kind of reverse religion that could be called "Religion 2" or "amnesiac religion."

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[SY-20-02] 'The clinical practice of topology' and Cultural psychiatry

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Keywords : Cultural psychiatry、Lacanian psychoanalysis、Japanese literature and folklore

'Man's desire is the desire of the Other'. Jacques Lacan defines human desire as something that is structured in relation to language, and encourages us to imagine a topological place, a 'place that is both inside and outside' in which the desire of the Other can be aligned with one's own desire, using the image of a Kleinian bottle or the interior eight. In order to live as linguistic beings, human beings need to create a relationship with such a 'place that is both inside and outside', an impossible place, or the Real, and the way in which this is created determines the subject's way of life. Then it can also be said that the place is where psychiatric and cultural issues intersect. In order to change one's previous way of living and being, it is necessary to make the necessary interpretation listening to the unconscious pulsation that occurs in such a place, and make the 'object a' float, or create a 'process in which the subject subjectifies what should be subjectified by the subject'. In this presentation, I would like to examine the relationship between 'the clinical practice of topology' and cultural psychiatry, focusing on the intersection between Lacanian psychoanalysis and the knowledge of Shinobu Orikuchi, a renowned Japanese scholar of Japanese literature and folklore, and consider the future of cultural psychiatry in Japan.

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[SY-20-03] Why Does Cultural Psychiatry Not Adopt an Emperor-Centered Ideology?: Healing and Politics in the History of Folk Psychotherapy in Early 20th-Century Japan

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Keywords : Folk psychoterapy、 Politics、 Japan、 The modern Emperor (Tenno) system、 The New Left

Influenced by the New Left movement, modern psychiatry was criticized as colonialist by the anti-psychiatry movement from the late 1960s onward, subsequently leading to the development of cultural psychiatry through its focus on culture-bound syndromes. Under the premise that different cultures have distinct complexes of illness and healing practices, cultural psychiatry in its most simplified form has sought to extract cultural elements irreducible to Western modern medicine through anthropological or folkloristic approaches. However, it has long been pointed out by postcolonialism that such a binary approach itself is a product of modernism and colonialism. As exemplified by Gauri Viswanathan, recent postcolonial studies and anthropology have daringly focused on Orientalist phenomena such as the Theosophical Society and Buddhist modernism, precisely because they confront the limits of dichotomy while still seeking elements that do not fully assimilate into modernist-colonialist paradigms. In early 20th-century Japan, a folk therapeutic culture known as *seishin ryōhō* (folk psychotherapy or mind-cure) emerged in a nested contact zone between Western modernity and the specific historical context of Japan. Stimulated by hypnosis and mesmerism imported alongside Western biomedicine, this culture reinterpreted and reconfigured indigenous traditions such as Buddhism, Shinto, and folk belief, while criticizing expensive mechanistic modern medicine and spreading across a wide social spectrum, including the intellectual middle class. As seen in *seishin ryōhō* groups including Seichō-no-ie and Tenohira-Ryōji (palm healing), which flourished during the 1930s, folk psychotherapies pursued the essence of Japanese identity, eventually converging on Japanese mythology and the modern Emperor (Tenno) system, aligning themselves with “proto-fascist” movements such as the National Polity Clarification Movement and wartime total mobilization. This paper elucidates this pre-WWII trajectory to critically examine how cultural psychiatry should analyze the interplay between medical culture and politics in contemporary Japan and what medical practices might emerge from this historical reflection.

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[SY-20-04] Electroshock Therapy through the Lens of French Epistemology: Insights from Bachelard and Canguilhem

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Keywords : French Epistemology、Gaston Bachelard、Georges Canguilhem、Electroshock Therapy

The purpose of this presentation is to revisit the historical debate concerning "electroshock" therapy in the history of medicine through the lens of French epistemology. In particular, I aim to explore the relationship between the image surrounding the concept of electroshock and its medical practice. To this end, I will draw on the ideas of two French epistemologists, Gaston Bachelard and Georges Canguilhem.

Bachelard, in *La formation de l'esprit scientifique* (1938), argued that prior to the 19th century, the physical stimulus of electricity was accompanied by a host of imaginative representations that functioned as "epistemological obstacles," delaying the emergence of rigorous scientific concepts. Importantly, these images are not simply hindrances to be eliminated, but rather constitute indispensable moments in the development of scientific thought. Similarly, Bachelard's successor Canguilhem emphasized the epistemological role of "error" in living organisms in *Le normal et le pathologique* (1943), and later addressed the role of "ideology" in scientific thought in *Idéologie et rationalité* (1977).

How might concepts such as "obstacle," "error," and "ideology"—typically viewed as impediments to scientific development—be reinterpreted as essential elements within the scientific inquiry? Framed by this epistemological question, this presentation will reconsider the case of electroshock therapy to explore the manifestation of these tensions.

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[SY-20-05] Beyond Perspectivalism: Problems (and Solutions) to the Study of “Spiritual Therapies”

*Ioannis Gaitanidis¹ (1. Chiba University (Japan))

Keywords : alternative therapies、spirituality、perspectivalism

In 2024, a medical anthropologist published a book-length study of the coronavirus pandemic in Japan, focusing particularly on the government’s strategies to curb the spread of the virus. While the author makes insightful arguments, the book’s conclusion calls for a reappraisal of the culture and personality school of thought, claiming that it is necessary to understand the ‘Japanese habit of thinking’, because any action plans devised in times of emergency need to reflect the underlying habits of thought of the targeted peoples. This trend to return to an essentialist perspective in understanding the relationship between culture and the practice of medicine has also been seen in studies of the “alternative” – folk, shamanistic or spiritual – therapies practised in contemporary Japan, and which I will critique in this paper. My argument is that, from Annemarie Mol’s warning that our understanding of disease should not be confined to the realm of meaning, ‘something relative to the specific perspective of the person talking’ (Mol, 2002, 12), to Anne Harrington’s anti-culturalist history (Harrington 2019) of how American psychiatry came to define a biological mission for itself, a return to the idea that there exists something called a ‘Japanese way of thinking’ risks bringing back the perspectivalism that 21st century studies of disease have strongly criticized. I instead suggest that we rethink the connection between psychiatry and culture by taking into account the quintessential strive of all therapies to be *particularly holistic*, namely to present a simple cure for as wide an array of ailments as possible.

Harrington, Anne. 2019. *Mind Fixers: Psychiatry’s Troubled Search for the Biology of Mental Illness*. W.W. Norton.

Mol, Annemarie. 2002. *The Body Multiple: Ontology in Medical Practice*. Duke University Press.