Fall 2005


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In Revenge of the Windigo, James Waldram provides an incisive critique of the use and abuse of culture in mental health theory and practice. In my view, one of the most important contributions of this book relates to Waldram's notice of the often unexamined and sometimes cavalier use of “Aboriginality” and related research methodological practices, including the uncritical appropriation of terminology in the field of Aboriginal mental health. I was particularly drawn to Waldram's attention to ideological positioning in which complex ideas
are reduced to simplistic binary forms, for example, the use of the concepts of “traditional” and “holism,” and their respective counterparts “biomedical” and “western dualism.” In their paper titled “The Problematic Allure of the Binary in Nursing Theoretical Discourse,” Thorne, Henderson, McPherson and Pesut make the claim that in some cases, the “adoption of a binary position [in nursing] has led to a passionately held form of ‘othering’ that prohibits healthy and critical engagement with ideas” (Nursing Philosophy, 2004, 5:208-15). Instead, they argue that the tension produced by binary positions ought to provide researchers and practitioners with an opportunity for stimulating dialogue and critique to deal with the social and moral complexity of nursing.

In a similar vein, Waldram proposes that the uncritical use of simplistic binary forms, for example, the notion of “traditional,” leads to ambiguities that challenge our ability to know much about reality—scholarly discussion and activity is thwarted when one rigid construct is simply replaced with another. Waldram is not suggesting that these constructs do not exist, but rather that the lack of critical examination of their use may inadvertently support a “primitivist discourse” and its attendant dichotomies, increasing the inherent risk posed by essentializing and stereotyping. When “culture” is privileged as an explanatory tool for knowing matters of social difference—that is, when used indiscriminately to explain issues in colonial contexts, for example, mental health—we run the risk of conflating the culture of Aboriginal peoples with the cultures of poverty, substance use, and dependency. When images such as this are discussed as cultural attributes or differences, we risk rearticulating colonial images of Other and reinforcing unequal power relations.

Importantly, Waldram’s critique pricks our critical consciousness regarding the use of “culture” as a point of analysis and challenges us to engage with perspectives that reveal the full spectrum of human variations—to open the dialogic space. Vicki Smye, School of Nursing, Faculty of Human and Social Development, University of Victoria.