

**Extraordinary Conditions: Culture and Experience in Mental Illness. Janis Jenkins.
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Extraordinary Conditions, a new book by Janis Jenkins, in many ways encapsulates her life's work as an internationally recognized psychological and medical anthropologist who has made substantial contributions to the disciplines of psychiatry, anthropology, and public/global health. The book focuses on *extraordinary conditions* and the struggle that people often undergo to make sense of and live with such experiences. Here, *extraordinary conditions* "carries double meanings" (1). It refers both to conditions "culturally defined as mental illness," as well as to conditions "constituted by social situations and forces of adversity" (1). Jenkins guides the reader to understand that such conditions are categorical, not continuous, serve as an entry point for "deciphering the processes of what it means to be human" and that "rather than being dismissed as marginal or abnormal, the extraordinary can be recognized as integral and vital" (12). Culture, Jenkins makes plain, influences people's lived experiences of extraordinary conditions at every stage, from onset to recovery, and should not be ignored by the increasingly neuroscience-focused field of psychiatric research. Moreover, running through the chapters is an insistence on (and demonstration of) the importance of close, longitudinal ethnographic attention for shedding light on the role of culture in people's everyday experiences of psychosis, trauma and depression.

Having so much of her research accessible in a centralized place with clear linkages across multiple, culturally and topically diverse research studies makes this work a much-needed one-stop resource for an in-depth look at the arc of Jenkins' scholarly thought. As with her volume of collected essays, *Culture, Subjectivity, and Schizophrenia*, this book is essential reading for any scholar who studies extraordinary conditions. In this single-authored work, Jenkins crucially demonstrates that extraordinary conditions do not "render people incapable of either struggle or strategy, of endurance or expression" (262). It offers a model to scholars seeking to do sensitive ethnographic and qualitative work at the margins of society, for how to design and undertake such studies, and for how to successfully write up their findings. Examples of this kind of work, and the important collaborations that brought it to fruition, abound in the book.

The Introduction of the book offers insights into Jenkins' overarching scholarly vision and mission, and how it has come together over the years to inform other scholars. As she points out, "anthropology has a crucial role to play in making sense of mental illness as a feature of contemporary life...[and] in sorting out biochemical, political, economic, spiritual and cultural dimensions of the phenomenon." Jenkins argues that people who are living at the "edge of experience" are engaged in an existential struggle that is a fundamental human process (2). Her work encourages us to recognize that culture shapes our ordinary everyday lives and capacities for subjectivity (7), and it insists that the jumping-off point for inquiry into extraordinary conditions is the "phenomenological immediacy" of lives and the first-person narratives of people so afflicted (12).

Section I details Jenkins' work on psychosis, psychopharmacology, and families. The first chapter is an analysis of research Jenkins conducted from 1998 to 2004 (funded by the National Institute of Mental Health) on the lived experience of a new class of antipsychotic treatments, particularly clozapine. This piece adds to contemporary scholarship around diagnostic controversies, psychiatric treatment, and the ways North American culture conceptualizes chemical imbalances, pharmaceutical selves, and the subjectivities of people taking atypical antipsychotic drugs. Chapter 2 makes a substantial contribution to literature on methods of clinical ethnography, especially ethnographic home visits, which is an important topic for researchers of many stripes. More and more, anthropologists are being funded to follow people home from the clinic, so to speak, so that we can observe how people manage treatment in real-world settings. Here, Jenkins offers an excellent roadmap of what to consider in undertaking this method before one begins. In addition, the story of Sergio that she shares in this chapter adds to the humanistic perspectives of people "struggling" with psychosis. While Chapter 3 gives us an overview of Jenkins' earlier work on Expressed Emotion, it also engages with a variety of cross-cultural studies on the subject. Here Jenkins underscores the importance of the sociocultural milieu on shaping individual subjectivity by examining the effects of different styles of family responses to extraordinary conditions (e.g., emotional overinvolvement). Her message is also compassionate and pragmatic as she insists on the importance of offering assistance and support to families.

In Section II, Jenkins highlights her work on Violence, Trauma and Depression. Chapter 4 contributes to anthropological thinking on political ethos, or "the culturally standardized organization of feeling and sentiment pertaining to social domains of power and interest" (143). In this chapter, she builds on ethnographic research undertaken at the height of a civil war in El Salvador (1987-1990) with Salvadoran refugee women in Boston. She powerfully illustrates the traumatic experiences Salvadoran refugees endured and insists on their relevance for thinking about mental health, as made manifest in their descriptions of how their distress is embodied as "el calor." Her work considers the importance of lived experience and trauma in psychopathology and adds to the literature around gender and mental health, forced migration and the psychological impacts of war. Chapter 5 is about the role of religion in mental health, and highlights the little-explored role of magic/spiritism in enhancing resilience in the face of serious mental illness among Salvadoran women being treated at a Latino clinic. Indeed, here and elsewhere, her insistence on bringing religion, spirituality, and existential crises to the forefront of our thinking about mental illness and treatment cross-culturally, is a much-needed addition to the literature. In Chapter 6, we move on to her recent NIMH-funded work among Navajo youth where she reflects on the inadequacy of PTSD to describe the "psychic trauma" endured by the youth with whom she is working. She argues that we should discard PTSD as a category for these youth, as well as for Salvadoran women, and instead use the concept of "trauma" more broadly in order to better understand the "patterns of abandonment that shape the raw existence of young people at both the personal and collective levels" (215). She argues that diagnostic labels are confusing and off-putting for youth, and confer "a degree of complexity that is dizzying if not an outright muddle" (227), especially when it is unlikely that youth—who are still developing—actually present a coherent and unchanging clinical picture. Moreover, she suggests that "co-morbidities" are better understood as "a mirror of the severity of the charred social, economic, political and psychological realities of lived experience" (227).

These are just a few examples of the provocative and ethnographically rich questions and arguments Jenkins poses and some of the bright and concise answers that she offers in this work. Her book and her arguments are of paramount importance for anthropology, psychiatry and public health as we struggle to improve care for people facing extraordinary conditions, and its encapsulation in a single volume offers an unmatched resource for teaching and research design in these areas.

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