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[Aller au sommaire du numéro](#)

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# Book Review

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**Larchanché, Stéphanie. *Cultural Anxieties: Managing Migrant Suffering in France*. Rutgers University Press, 2020, 240 pages.**

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**C***ultural Anxieties: Managing Migrant Suffering in France* is a critical examination of the institutional and social dimensions of migrant care. It is also a reflexive piece on the positionality of clinical medical anthropology as a field of study and an agent for systematic change. Stéphanie Larchanché presents an ethnography of her decade-long work in Centre Minkowska, a transcultural psychiatric clinic. The centre is a backdrop to outline structural challenges and issues of access that various migrant groups encounter when interacting with the institutional framework of France, particularly in cases of healthcare.

Larchanché's writing displays a great deal of reflexivity in her position as the Centre's Medical Anthropologist and through the theoretical approaches of the Centre as a whole. She identifies this potential conflict early on to reframe her perceived lack of objectivity as a strength in her critical praxis examination. This allows her to move between the spaces of observer and participant with ease. She writes this book not as a systematic ethnography of the staff and patients of Centre Minkowska, but as a complex and nuanced analysis of the greater context in which the centre finds itself: a clinic in France and an employer of the cultural competence approach.

The naming of this book, *Cultural Anxieties*, serves to reflect the multiple perspectives that this ethnography examines. It discusses the cultural anxieties of the French population and how they seek to inform the structural factors that affect or even cause the migrants' anxieties and access to the care needed to quell such problems. It also discusses the anxieties facing the healthcare practitioner in addressing complex cultural issues that are beneficial to their patients while complying with the French notions of universality expected of them.

There are three sections in this book that are intentionally crafted to give the reader a strong historical and theoretical foundation to advocate the need for the approach the centre subscribes to. The first part, “The Context”, provides some background on the social construction of the migrant and their health needs, and well as the academic discourse surrounding the management of the aforementioned through the francophone lens. Chapter One offers a genealogy of migrant suffering to provide the imperial history of the social attitudes towards the communities that make up much of France’s current migrant population, before their widespread immigration through to the present. Larchanché shows how this shaped many of the immigration policies, and in turn, the infrastructure in which these communities find themselves today. France’s republican paradigm is focused on the ideas of universality, which have contributed to much of the attitudes towards migrants and their needs, attributing any issues, even those due to social inequalities, as a failure of the individual’s behaviour in need of correction (46).

Larchanché draws parallels between the public and academic discourse concerning migrant care and suffering, particularly in the fields of anthropology and psychology as ethnopsychiatry. There is particular attention given to and much criticism levied against Tobie Nathan’s initial contributions to the discipline, due to its heavy emphasis on cultural relativism, but with acknowledgement of the useful concepts that still hold relevance. In the analysis of the development of ethnopsychiatry, the chapter arrives at transcultural psychiatric care focused on the individual as the basis of care at Centre Minkowska. This cultural competence approach is said to provide a holistic examination of the culture, psychological distress, and social issues of the individual in its practice. Larchanché is aware of the imperfections of this approach, offering her reflexive approach as a vehicle to allow her team to be intentional about mitigating such gaps in their care.

The next chapter, “Transcultural Practise at Centre Minkowska”, serves to detail the development of the transcultural approach to care that the centre adopts concerning its creation and its position in the French healthcare system. The clinic lies in a liminal space between the public health system and a social justice institution to aid migrant suffering. Larchanché is reflexive about this work in a “moralized workplace” (69) where the staff are personally engaged with issues of immigration.

The chapters “Referral Narratives” and “Ethnic Double Binds” comprise the fieldwork section of this book. Both chapters discuss the access to care

and the current attitudes of the wider French institutions regarding migrant suffering. Larchanché provides illness narratives from both patients and other healthcare facilities, which refer patients, to explain the difficulties faced by the centre and highlight the problems with France's universalist approach to integration. Logistical problems discussed in this section, such as language barriers, stigmatization, housing problems, visa issues, and the like, speak to the ways in which the medical system is removed from the larger institutional gaps in France's immigration policies and should be viewed separately. The centre often finds itself reflecting on being in a double bind as part of the aforementioned institutional gaps that reaffirm the stigmatization of migrant groups but also a place of hospitality to mitigate and advocate for them.

The final section consolidates the experiences in the clinic to legitimize the approach taken by the staff and situate it in the broader landscape of anthropological explanatory models of health and the socio-economic structures in France, and by extension, Western democracies. Larchanché refers back to the liminal space, dubbed the borderland, that the centre finds itself, where it is part of the institution structures it criticizes and also a humanitarian mediator for migrant suffering and the mental health system. The chapter identifies its limitations in the complexities of clinical work, and how its reflexive approach is important for addressing such issues. The book ends with a critical but hopeful discussion of the future of caregiving and how the work in Centre Minkowska can help inform other healthcare centres from a practical standpoint.

Larchanché identifies herself as an applied anthropologist, yet this does not fully encapsulate her credentials. Larchanché is partaking in a field of public anthropology, but as the instructor of cultural competence approaches, she is also the face of anthropological practices to the referring health institutions and their patients, as well as through the clinic's role in advocating social justice change in the larger political and economic structures that hinder access to effective and adequate care for migrant suffering. This book offers an eloquent presentation of the impacts of social and economic inequities in mental healthcare, highlighted in the treatment of migrants. By grounding these conclusions in her fieldwork, Larchanché presents an approachable starting point in transforming anthropological-based caregiving practises that extend beyond culture and provide a framework for recognizing how "stigmatizing representations and ... unequal access to resources negatively affects both patients and providers" (178). *Cultural Anxieties* is a landmark piece

in the literature of medical anthropology, illustrating the need for constant critical reflexivity in caregiving, which may become one of the most distinctive elements of medical anthropology praxis, as it continues to develop into a more robust field.