

LETTERS TO THE EDITORS

Yanomami humanitarian tragedy: an urgent colonial heritage issue

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Nearly 10% of the original Amazon rainforest has been deforested between 1985 and 2021, totaling 72 million lost hectares. In the Brazilian portion of the forest, the destruction has been caused by urban infrastructure, mining, agriculture, and forestry.¹

Of these factors, mining has been the most intrusive, with a 766% increase in forest destruction over the last 37 years. *Garimpo* is an illegal mining practice that involves the use of heavy metals and water and soil pollutants to extract ores and precious metals, mainly gold. Although this activity occurs throughout Brazil, 93% of such mines are located in the Amazon.¹

Between 2010 and 2020, the area consumed by *garimpo* in indigenous lands increased by 495%.¹ This advance has led to an ongoing humanitarian tragedy among the Yanomami tribe. In 2011, the total population of Yanomami was 26,000 people residing in traditional territory in the northernmost region of the Amazon. Contact with Brazilian society is recent, dating from the 1940s, and on some reservations the Yanomami still live in isolation from the national society with minimal acculturation.² *Garimpo* in Yanomami lands directly affects more than 56% of their population.¹

The impact of *garimpo* goes beyond what can be observed in forests and rivers. The affected areas involve sexual violence against women and children, exacerbated conflict and violence, food insecurity and child malnutrition, mercury contamination, increased rates of malaria, and the destruction of indigenous health care services. What is happening now among the Yanomami has already occurred in other contexts with other peoples in Brazilian history.

Historically, indigenous peoples have been the target of numerous forms of violence through colonization and interethnic contact with society. The effects of colonial violence resonate throughout contemporary indigenous communities in stereotypes, stigma, and prejudice. These attitudes have created a permissive environment for the predation of traditional indigenous lands and subjugation of their traditional cultures.

The impact of this activity on the mental health of the Yanomami has not been reported in the literature, but other examples can serve as a comparison for the coming scenario. Although each indigenous people is unique,

they share common challenges and threats, such as their struggle to exist, maintain their territories, and preserve their traditional knowledge and ways of life.

The transformation of the Yanomami's sociocultural universe due to interethnic contact, deforestation, and degradation of the land has impacted their well-being, increasing their vulnerability, especially to suicide and substance abuse. In 2017, the suicide mortality rate among indigenous Brazilians (15/100,000) was almost three times higher than that of non-indigenous Brazilians (5/100,000). The suicide mortality rate among indigenous children is 18 times higher than among non-indigenous children.4 Suicide has become an epidemic in the last decade, including multiple attempts in short periods by the same individual. Data in the literature suggest that many indigenous youth have not adopted the values passed down from generation to generation by shamans, traditional chiefs, healers, and elders.4 These values are considered important protective factors against suicide for indigenous people.

Alcohol and other drug abuse among indigenous peoples is complex and contemporary, resulting from biological, psychological, historical, social, and cultural factors. This harmful use of drugs among indigenous peoples is associated with illness and injury. These problems have arisen due to precarious living conditions brought about through the colonization process. The indigenous peoples with the most significant problems are those with the most intimate and unequal relationships with Europeans.

In confluence with national data indicating increased rates of suicide and alcohol and drug consumption among indigenous people, the Yanomami face current and impending difficulties. Changes to the natural environment of indigenous areas by invaders who exploit the land and contaminate rivers, as well as the encroachment of "civilization" for economic exploitation, pose fundamental challenges to mental health, resilience, and recovery of indigenous populations, especially that of the Yanomami.

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110 years of Karl Jaspers's Allgemeine Psychopathologie: is there still a role for Jaspers's phenomenological approach to psychopathology in the DSM era?

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Karl Jaspers had accomplished no more than a few years of psychiatric practice in Heidelberg University Clinic when *General Psychopathology* (*Allgemeine Psychopathologie*) was first published in 1913, in a personal journey that would later lead the young author and physician to become a famous philosopher – a profession he embraced intensively until his death.^{1,2}

Jaspers applied Husserl's phenomenological method to develop an innovative way of clinically assessing a patient's inner psychic states.² While the sophistication of his proposal was unequivocal, it also caused resistance and divergence. In fact, acceptance of Jaspers's method differed from place to place, apparently greater in Europe and lower in the U.S.² Later, when Jaspers was supposedly trying to evade the Nazi regime, the complexity of his philosophical work would have led Albert Einstein to oppose his hiring by Princeton University in 1945, declaring Jaspers to be as obscure as Hegel.³

More than a century since its first edition, *General Psychopathology* has undoubtedly influenced several generations of psychiatrists worldwide, although the neo-kraepelinian nosological model of the DSM took on dominant status in clinical practice in recent decades.² Thus, today, one might inquire as to the remaining relevance of Jaspers's phenomenological approach to psychopathology for psychiatry; more specifically, whether it should be taught in psychiatry residencies.

Obviously, this inquiry may have more than one answer depending on the ontological and clinical perspectives of the respondent. We shall offer one possible answer by pointing out some of Jaspers's core conceptual features for advocating the use of the phenomenological approach to assess psychiatric patients. First, it was his intention to create a method to assess psychic states in an aprioristic manner, thus freeing psychiatrists from both a priori physicalist and psychic determinisms of human mind and behavior. Second, it was his belief that psychiatry was a hybrid field of knowledge, straddling the natural and social sciences. Thus, adequate assessment of psychic phenomena required a different approach, which should involve using empathy to understand another person's perspectives. Third, by doing so, Jaspers's intention was eminently scientific, although a distinct method was demanded due to the specific nature of the object to be studied - namely, man in his uniqueness. Fourth, while aiming to describe as precisely as possible the patient's conscious psychic phenomenon, Jaspers achieved some of the most comprehensive and systematic knowledge of psychopathological phenomenon manifestations, which still serves as a relevant theoretical reference for current Brazilian psychopathology manuals. 4,5

Finally, and perhaps most importantly, Jaspers wanted to elevate psychopathology as a science to access first-person experience, a method he pointed out (in the seventh edition, revised by Kurt Schneider) as more comprehensive even though his peers often described it as phenomenological. In our opinion, alongside other fundamental disciplines for the training of psychiatrists, Jaspers' psychopathology remains essential, whether because of its historical relevance or its unique descriptive psychopathological framework, but mainly because Jaspers's belief in the irreducibility of conscious experience places first-person experience as an object of interest for psychiatrists. As some have stated, "put the person back into psychiatry."

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