
It's Madness: The Politics of Mental Health in Colonial Korea

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It is not easy to historicize mental illness. As Jacalyn Duffin puts it, “no blood tests, biopsies, ultrasounds, scans, or electro dynamics studies can objectively confirm a psychiatric diagnosis” (Duffin 2010, 312). Although illnesses of the mind have been successfully reclassified as diseases of the brain, some illnesses such as depression, anxiety, and stress still rely on patients’ reports of their symptoms. Mental illness remains elusive as an object of historical analysis. Contextualizing mental illness in colonial Korea (1910–1945) is challenging. Political vicissitude, competing modes of rationalizing health and disease, and manifold interactions among actors and institutions complicate experiences of illness in colonial Korea. In particular, Korean records of asylums, legal and medical cases, or academic debates around madness are rare. Tackling these hurdles, Theodore Jun Yoo colorfully portrays the psycho boom in Korea in both local and global settings.

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The greatest strength of *It's Madness* lies in the author's strenuous exploration of insanity-related discourses found in court records, novels, medical texts, professional journals, popular magazines, and police reports. In addition to his own examination of primary sources, Yoo recognizes the latest research on mental health by South Korean scholars, such as Jeong Chang-gwon's *How Did People with Disabilities in Korean History Live?*, Shin Dong-won's *Cholera Invades Joseon*, Yi Bu-young's and Yi Na-mi's studies on the history of Korean psychiatry, and Min Sung-gil's and Kim Jong-u's research on fire-illness (*hwabyeong*), to name a few. Furthermore, the author crosses disciplinary boundaries by synthesizing works by literary critics and by physicians of traditional medicine. All those efforts to document madness across time and discipline enrich *It's Madness* with concrete stories and nuanced analyses.

It's Madness employs a chronological organization. In Chapter 1, the author analyzes pre-modern understandings of deviant behaviors. The chapter highlights the persistent impact of shamanism on the diagnosis and treatment of mad acts. "Chinese medicine" and "Korean medicine" provide textual labels, such as *kuang (gwang)*, *feng (pung)*, and *dian (jeon)* to name abnormal and disruptive acts (p. 28). The author highlights the non-existence of a mind-body dualism in this explanation of madness in Korea. As is known, no label of "mental illness" ever existed in pre-modern East Asia, and the term began to circulate in parallel with the introduction of Western psychiatry in the 19th century. Accordingly, medical practitioners in pre-modern Korea did not perceive any form of institutional incarceration to be an effective therapeutic solution. The author well points out that the Joseon dynasty, following the Great Ming Code, did not allow an insanity defense to be used by an individual who had murdered his or her own family members.

In Chapter 2, the author contrasts the Japanese institutionalization of clinical psychiatry with that of Western missionaries. Whereas the Japanese primarily viewed the mentally ill as an object of biomedical treatment, Western missionaries, such as Charles I. McLaren (1882–1957), demonstrated a different therapeutic approach combining spiritual care with

scientific diagnosis. The author analyzes McLaren's contribution to Christian understandings of mental illness in Korea, as McLaren created a "special atmosphere of optimism and hope in his psychiatric ward" (p. 63).

Institutionalized psychiatry reflected the general features of medical modernization in colonial Korea. The introduction of innovative medical education, the revision of license authorization, and the establishment of modern-style clinics suffered from a lack of financial support or long-term administrative initiatives. Nonetheless, Yoo argues that the 1920s marked a turning point. Emil Kraepelin's nosological and biological frameworks, for instance, gave emerging medical professionals a coherent system of diagnostic techniques and therapeutic strategies. Though incomplete, the modern psychiatric definition of madness in the 1920s was shared by popular media as well. Korean writers in 1920s newspapers complained about the colonial government's unwillingness to fully incarcerate the mentally ill.

Chapter 3 describes the indigenous modes of feeling *jeong* (affective bond), *han* (intense suppressed anger), shame, and *nunchi* (the subtle art of gauging another's mood) by analyzing major literary works by Yi Gwangsu, Yi Sang, and Yeom Sang-seop. Yoo argues that Korean rules for the "emotional regimes" (p. 78) went through major changes during the early 20th century. Consequently, three social groups—Korean male scholars, women (young wives and mothers), and the struggling poor—emerged as the most vulnerable to mental illness. By elucidating the rupture and reconfiguration of Korean emotional regimes, the author aims to enrich the non-Western context of illness experiences.

In Chapter 4, the author examines the way the *Donga ilbo* (*Donga Daily News*) reported mental illnesses in the 1920s. Novel terminologies, such as "hysteric" and "neurotic," were selectively used to interpret women's vulnerability in coping with modern ways of life. Bizarre and abnormal behaviors were often medicalized, and patients experiencing trauma were readily criminalized. The second half of the chapter centers on the rampant suicides of the 1920s. The vivid description of this epidemic helps us comprehend the major causes of these suicides, such as financial difficulties,

male infidelity, unhappy marriages, unrequited loves, and chronic illnesses.

Interestingly, Japanese colonizers regarded the suicides as a sign of Korea's turn toward modernity and thus did not make any significant efforts to deter the new epidemic. On the contrary, according to Yoo, Koreans interpreted the rising suicide rates as a sign of Korean hardships under Japanese colonial rule. The sensational reports around suicide exemplify the way mental illness was consumed as an indicator of a sick Korea. According to a Korean writer in *Donga ilbo*, modern life itself caused the surge of mental illness, which often led to tragic suicides.

Given its substantial portrayal of the psycho boom, *It's Madness* could have defined key terminology more fully, thereby providing a clearer line of argument throughout its informative chapters. For example, it is unclear how the author conceptualizes important thematic terms such as “madness,” “mental illness,” and “psychiatry.” The author could at least have explained what labels he translates into the English terms “madness” or “mental illness.” Simply put, when did Koreans first encounter the term *jeongshin byeong* (mental illness)? When these new labels were introduced to Koreans, did the old terminologies such as *kuang* (*gwang*), *feng* (*pung*), and *dian* (*jeon*) soon vanish? If not, how do we understand the ensuing processes of translation, misunderstanding, or negotiation of different labels and their associated ideas? The author briefly mentions the complicated nature of defining mental illness and psychiatry at the beginning of the monograph (p. 8), but then utilizes those key terms indiscriminately. Discourses related to stress, lunacy, schizophrenia, abnormal behaviors, emotional disturbance, suicide, and folk disease are encompassed under the umbrella term of “mental illness.” As Emily Baum puts it in her history of madness in modern China (Baum 2018, 15), Yoo could have better explained the semantic distinction among madness, mental illness, and older terminologies.

As the Korean history of madness requires a comparative angle, the author could have paid more attention to the latest scholarship on the Chinese history of madness. Ignoring major works by Fabien Simonis (2014) or Hsiu-fen Chen (2003), for instance, the author refers to two outdated monographs discussing Chinese medical understandings of madness. In

addition, the author uncritically relies on research by traditional Chinese medicine (TCM) or traditional Korean medicine (TKM). Surely those works are informative, but scholars have observed that the TCM's government-authorized and biomedically sanctioned approach to healing practices in East Asia often imposes contemporary disease categories onto the past. A corollary to the uncritical reliance on the contemporary nosology is insensitivity to the semantics of medical language. For instance, the author explains *kuang* (*gwang*) and *dian* (*jeon*) as pre-modern terms of madness originating in Chinese medicine, in which Koreans shared. However, as Simonis writes, "*dian*, *kuang*, and *xian* were not sub-types of any higher-order category like 'madness'" (Simonis 2014, 58). The circulation of medical terms is context dependent. It is not enough to merely point out the existence of those terms in pre-modern Korea as the precursor of modern definitions of madness. Instead, the author could have fleshed out the emergence, circulation, and afterlife of *kuang* (*gwang*), *feng* (*pung*), and *dian* (*jeon*) in Korean discourse to make sense of modern transformations of Korean understandings of psycho-behavioral disorders. Simonis' warning that "Chinese approaches to madness should not be compared too hastily with psychiatric understanding of mental illness" (Simonis 2014, 70) is valid in the Korean context as well.

In addition, the author essentializes the Korean regime of emotions without proper documentation. In Chapter 3, the author depicts Korean-specific modes of feelings such as *uri* (we-ness), *jeong* (affective bond), or *ui* (righteousness) as if these sensibilities had been innate to all Koreans across time, region, gender, and status. To argue for Korean ways of expressing feelings of attachment and empathy, the author refers only to a Korean journalist's collection of essays, *What is this Jeong*, published in 2013 (Jeong 2013, 85). The author discloses a seemingly anachronistic approach in imposing the "emotional regimes" on Korean history.

The author might have also explained why his analysis focuses mainly on the 1920s and not the 1930s. According to historians of colonial Korea, the 1930s stand out in terms of urbanization and militarized industrialization (Eckert 1996). The commercialization of medicine reached

its climax in the major cities of East Asia in the 1930s. More to the point, Baum argues that the uptake of madness in Beijing during the 1930s was quite different from that of the early 20th century (Baum 2018, ch. 4). It could have been informative if the author explained why his analysis of *Donga ilbo* rarely goes beyond the late 1920s.

No author is free from typos. However, particular attention should be given to non-English materials, as not many readers in Anglophone academia could refer to the original sources in Korean. In the bibliography, a Korean scholar's name was transliterated differently, as if he were two people. The name of the author of *What Is this Jeong?* is incorrectly rendered: instead of the author's name "Un-hyeon Jeong," Yoo puts the name of the monograph's photographer, "Seung-gyu Kim."

Despite these shortcomings, *It's Madness* contributes extensively to existing scholarship on Korean history of medicine and healthcare. As many scholars have argued, the transition to modern psychiatry demonstrates neither linear progress nor clear discontinuity. *It's Madness* shrewdly scrutinizes this unprecedented moment of sudden change and hidden continuity, asking readers to grapple with the lasting impacts of the colonial transposition of mental illness in the course of psychiatry in Korea.

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