The House of the Dead

Debora Diniz (dir.)

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The effect the three acts that make up The House of the Dead, the sixth documentary from the anthropologist and bioethicist Debora Diniz (ImagensLivres/Ministério da Saúde, 2009), are most likely to cause on the viewer is to lead him to experience a place situated between relief, discomfort, and estrangement. The relief is generated by knowing that he inhabits social universes radically opposed to and distant from that of the individuals portrayed in the film – madmen and offenders – doubly and irreversibly stigmatized by converging mechanisms arranged between society, represented by common sense, and the fields of health, law and public safety. The estrangement, difficult to translate after the first grasping of the narrative, is generated by the absolute impossibility of identification in face of the discomfort of seeing oneself confronted with an experience taken to the highest degree of otherness: to be presented to another who is so different to a socially shared “we”, another so unknown and radical that such differences, given the impossibility of recognition and similarity, become semantically untranslatable.

In just 24 minutes, the documentary illustrates the human, social, medical and legal conditions under which about 4,500 men and women who inhabit Brazil’s treatment and custody hospitals live, in a kind of fusion between psychiatric treatment that is as endless as it is inefficient and a life sentence, known by its legal name of Security Measure. It is an updated version of Foucault’s Panopticon that, even after the psychiatric reform that opened the door of Brazil’s mental asylums, neglected the prison-hospitals (COHEN, 2006) and their occupants.
Although it was filmed at the Salvador Custody and Treatment Hospital, a psychiatric unit linked to the Justice and Human Rights Office of Bahia State and where about 150 are interned, *The House of the Dead* has no colors that are local or specific to this hospital, except for the fact that almost all the patients are black or brown. Considering that the film’s explicit purpose was to tackle an invisible phenomenon that essentially belongs to the human rights field, it could certainly have taken place in any CHT in the country, as the elements in the narrative are intrinsic to any unit of this nature: abandonment, madness, double stigmatization, chronic incarceration in name of potential risks, the absence of support network for those who leave the system, etc.

The Security Measure (COHEN, 2006) is a legal mechanism to which men and women are subjected who have been diagnosed with mental illness and who commit some kind of criminal offense. As they cannot be charged under the law, that is, they have been considered after psychiatric investigations to be cognitively incapable of understanding the crimes they have committed and, consequently, also incapable of being held responsible and answering for their acts, no matter how serious, they cannot be tried, sentenced and held in common prisons. They fall under the Security Measure, which consists of the cessation of freedom, during which period they are submitted to psychiatric treatment which, in theory, aims to reduce their danger potential so as to reinstate them in a family and social context. In the twenty-five custody hospitals now functioning in Brazil, the reality presented by the documentary is practically the same, with some being worse in a few Brazilian states.

Centered on the condition experienced by individuals now in custody at the Salvador CHT, Debra Diniz’s documentary, even at first glance, indicates to the viewer that the accounts which make up its 24 minutes (apart from an extra one with Pedro Delgado, coordinator of the Department of Health’s Mental Health Technical Area) were not chosen merely based on personal histories with respect to the population of offender madmen.

At the end of the documentary, no viewer will doubt the judgment Almerindo applies to himself. He is undeniably a living-dead man, dead-living man, a social dead man, the same title-metaphor that points to the work of Dostoyevsky, Lima Barreto and Bubu’s poem, Alive, but dead, dead, but alive. Almerindo is one of the thousands of so-called “social problems”, forgotten by the state bureaucracy’s blindness, omission and inefficiency with respect to the population of offender madmen.

In the context of prison hospitals, the universe formed by hundreds of Almerindos repeatedly falls under this umbrella category known as social problem, a nomenclature that not even Psychiatric Reform and its achievements can do much about, given the inefficacy of the so-called support networks, like therapeutic residences, which are supposed to give support to users whose social needs are not fully covered by the Psycho-Social Support Centers, or CAPS, multidisciplinary care units where patients with mental illnesses are sent after the asylum-model psychiatric hospitals are closed. The fact is that, both in the CAPS and in the as yet limited structures of the therapeutic residences, the offender madman experiences the same stigma that common sense attaches to him: he represents, even for the health teams and in a manner not publicly explicit, fear, threat, potential danger, aspects which the Reform model is not qualified to deal with.

Ironically, in one scene of the film, Almerindo perfectly expresses the expectations the outside world has...
for the prison-hospitals: to render docile, domesticate the offender madmen, from the Foucauldian perspective of docile bodies, with the daily doses of authorized drugs, as Bubu identifies in his manifesto-poem. When he is medicating Almerindo, as he routinely does with each intern, a hospital agent keeps asking him if he swallowed the medication. In the next scene, Almerindo appears on screen with a contemplative expression, a Brazilian popular song from the 1980s, with a refrain that exhaustively repeats the verse: “sweeten, my love/sweeten/sweeten, my love/my life”. Nothing could be more representative of Foucault’s thesis about the process of making bodies docile in totalizing institutions such as hospitals and prisons (FOUCAULT, 1983). In collective terms, Almerindo constitutes these “social problems”. For these, the condition of being in custody is expressed daily in the legitimation of what is known to be a life sentence, a sentence which does not even exist in the Brazilian Penal Code, in a demonstration that, in the prison-hospitals, the Brazilian reality seems to point to a perspective unacceptable under any humanitarian precepts: social norms that are unspoken, but practiced, are worth more than the law.

The third individual in the documentary is Antonio, who illustrates an equally everyday situation in custody hospitals: that of the subject who, from his first internment, that is, from the moment he enters the irreversibly stigmatizing scheme of judicial mental asylums, built on a type of limbo where medicine lays blame on the law and the latter throws it back at medicine, can never escape incarceration (GOFFMAN, 1999). The strength of the double stigma prevents people like the poet Bubu, who gives the name to the film and his own condition, and like Antonio himself, who once submitted to the Security Measure, can never escape the vicious cycle of coming and going, internment and re-internment, loss of freedom, compliance with the Security Measure, return to family life and return to the mental asylum system and so on ad infinitum. Although the documentary doesn’t aim to point out impending tragedies, characters like Antonio may, in the long term, become statistics that represent trajectories like that of Jaime, the suicide.

Beyond dealing with the condition of invisibility and absolute exclusion of the population of men and women considered mad and criminal and submitted to loss of freedom regimes that go from temporary to eternal, The House of the Dead displays a range of themes as broad as it is challenging, especially for the fields of public health policies, law and human rights. The documentary, without resorting to mannerisms or sentimental theses, destabilizes the social actors who act in the mental health field, but are silent before this population that is so invisible it can hardly find a place on the agendas of public policy formulators. The film, by tackling the meeting point between crime and madness, questions the viewer about the place of the offender madman in the praxis, agenda and discourse of Psychiatric Reform, which eight years ago redefined the ways of acting towards individuals with mental illnesses, with the advent of the Anti-mental asylum Law in April 2001 (BRAZIL, 2001).

Bibliographic references


