

Session One

Culture & Community

Aims

To develop students' critical understanding of the how different societies and cultures view mental health and the implications of this for diagnosis and treatment.

To develop an in-depth knowledge of the effectiveness of community-based approaches to tackling mental health problems.

To develop students' ability to reflect on their own cultural sensitivities, attitudes and beliefs and how these may influence their practice.

Learning Outcomes

- Discuss the extent to which variations or similarities exist between cultures and societal groups in terms of prevalence, incidence and treatment of mental health.
- Evaluate the role of community-based approaches to tackling mental health and identify appropriate approaches for a specific population.
- Reflect upon how their own attitudes, beliefs and perceptions may influence their own professional practice and approaches to specific groups in society.
- Organise their knowledge and learning through the use of information resources and present their work at the appropriate level.

Assessment

Assessment Component 1 – Element 1: Academic poster (25%); Element 2: oral presentation (10 minutes)(25%)

Assessment Component 2 –Written Reflective Essay (2000 words) (50%)

Culture & Mental Health

According to WHO, mental health is "defined as a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community".

What is the role of *culture* in achieving an optimal state of health and wellbeing?

Culture & Mental Health (Discuss)

- What is culture?
- Does culture matter in mental health intervention (and healing)?
- What might it mean for us to approach mental health from a culturally sensitive lens?
- Do different societies draw the same line between wellbeing and distress?
- How much training (as well as anxieties) do you have working with issues related to cultural relevance with different groups?

Culture & Mental Health

- How do we know that our constructs around mental health mean the same thing to service users?
- What adaptations are necessary to make sure interventions are effective?
- How will each of us take responsibility for upholding an ethic of cultural relevance and critical thinking as we discuss the multiple dimensions of what is known about mental health as well as the populations we represent and work with?

Culture & Mental Health

[I]t is a process by which ordinary activities acquire emotional and moral meaning for participants. Cultural processes include the embodiment of meaning in habitus and physiological reactions, the understanding of what is at stake in particular situations, the development of interpersonal connections, religious practices, and the cultivation of collective and individual identity. Culture is inextricably caught up with economic, political, psychological, and biologic conditions. Treating culture as a fixed variable seriously impedes our ability to understand and respond" (Kleinman, 2004 as cited in Cromby, Harper, & Reavey, 2013, p. 57).

Culture - a working definition

"When studying culture and mental health, it could be argued that particular attention must also be given to the more specific domains of family, religion and spirituality, ethnicity, class, gender and sexuality within the overarching definition of culture, as these can have a dramatic impact on the organization of emotions, beliefs and norms of acceptable behaviour (Pilgrim & Rogers, 2002; Addlakha, 2008; Pilgrim, 2009)" (Cromby, Harper, & Reavey, 2013, p. 57).

Culture & Mental Health

"The discourse on 'culture' that is applicable to mental health mainly concerns the culture of the individual because of the emphasis on the individual in the (western) interpretation of mental health. ... But even here it is recognized that individual culture rests on a bed of traditional family culture, the culture of the community they are part of, the wider body of people they felt attached to, the region(s) they live in and even perhaps the 'imagined communities' ... they are connected to. These ramifications of culture determine to a large extent people's behaviour, and more generally, their social systems, religious systems and beliefs, worldviews and, most important of all, their concept of the human condition, the meaning of life itself (Fernando, 2014, p. 13).



Culture & Mental Health – What's the relationship?

- Culture influences definition of mental illness
- Culture explains the cause of mental illness
- Cultural beliefs guide our reasoning regarding how we should address mental health problems
- Culture influences motivation to seek help and also impacts how mental illness is experienced
- Culture accounts for variation in how clients communicate their symptoms and which one they report
- Culture influences expectation between the clinician and service users (different assumptions about what a clinician is supposed to do, how a service user should act and what treatments are available)

Culture & Mental Health – What's the relationship?

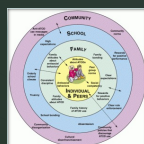
- Culture influences what type of coping styles and social supports people have
- Culture influences the meanings that people impart to their illness
- Culture dictates how much stigma is attached to an illness
- Culture relates to how people cope with everyday problems and types of adversity
- Some aspects of culture also underlie culture-bound syndromes (sets of symptoms much more common in some cultural communities than others).

Sociocultural Theory – Lev Vygotsky

- Cultural mediation and internalization (e.g. interpersonal communication)
- Individual development cannot be understood without reference to the social and cultural context within which it is embedded.
- For instance, Vygotsky assumed cognitive development varies across cultures.
- "A mind cannot be independent of culture"

Ecological Systems Theory

E.g., culture & sub-cultures within macrosystems and microsystems



The Role of Culture in Mental Health (History)

Zeitgeist

- Drapetomania (out)
- Homosexuality (out)
- Pathological gambling (in)

Cultural relativity (emic vs etic)

Cultural influences on prevalence and incidence

Example – The rise of eating disorders (ED)

Traditionally a Western disorder

Economic grow and the rise of eating disorder in Asian countries (e.g. Japan)

Culture-bound disorder?

Historical Context

- Cases of starvation have been reported in classical and medieval times (e.g. Catherine de Siena).
- Mary Queen of Scots
- 'Anorexia nervosa' – Sir Williams Gull
- 'Fames canina' – disorder characterized by large food intake followed by vomiting (bulimia nervosa).

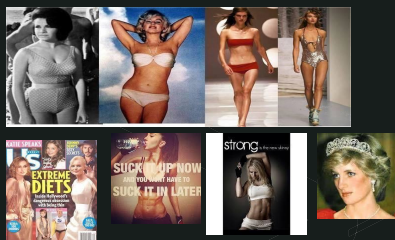


Cultural & Demographic Differences in ED

- Bulimia nervosa rarely found in individuals who have NOT been exposed to Western ideals (Keel & Klump, 2003)
- African American women are less likely to have eating disorders than American white women (Lovejoy, 2001)
- In the USA, rates of eating disorders in Asian immigrants are increasing (Chamorro & Flores-Ortiz, 2000)
- Anorexia nervosa has been reported in individuals who have NOT been exposed to western ideals (Keel & Klump, 2003)

Cultural & Demographic Differences in ED

- Females are ten times more likely to develop eating disorders than males
- Female thinness may be an important social value
- Eating disorders are higher in groups of males whose body weight and shape are of more significance to them (e.g. athletes, ballet dancers)



Example – Taijin Kyofusho

- Taijin kyofusho is a Japanese culture-bound syndrome. It translates into the disorder (sho) of fear (kyofu) of interpersonal relations (taijin).
- Those who have taijin kyofusho are likely to be extremely embarrassed of themselves or fearful of displeasing others when it comes to the functions of their bodies or their appearance.
- The symptoms of this disorder include: avoiding social outings and activities, rapid heartbeat, shortness of breath, panic attacks, trembling, and feelings of dread and panic when around people.
- It is more common in men than women. Lifetime prevalence is estimated at 3–13%.

Globalization, Culture & Mental Health

According to Ferrando (2014, p. 14), globalization can be described as:

Passive globalization: Natural process through diffusion of ideas and cultural forms in voluntary interchange.

Forced globalization: Process imposed overtly—for example, as part of economic aid for modernization—or subtly for example, via institutional pressures.

For example: 'international health', 'global health', 'global mental health'

Globalization, Culture & Mental Health

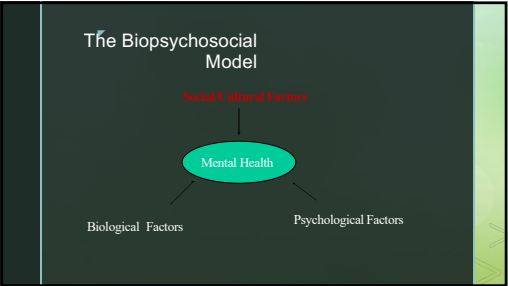
Interplay between culture and globalization in the mental health field is complicated by:

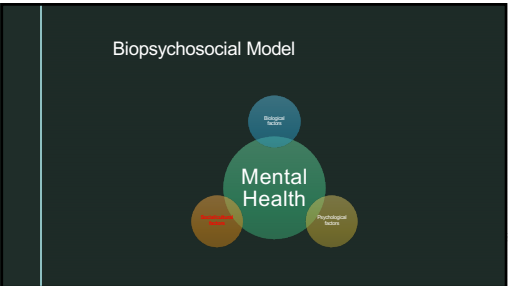
Culture is not static but changeable according to context

Forced globalization may impose changes – including cultural ones

– for economic & political purposes in a context of geopolitical power (e.g. westernization of non-western countries)

Fundamental differences regarding people's understanding of the human condition, including mental health





THE LANCET
Planetary health

Why "Culture" matters for planetary health

Michael M. M. Why "Culture" matters for planetary health

Published: November 14, 2019 | DOI: 10.1016/S0140-6736(19)30000-1

Summary

The future health of human civilisation depends on the careful management of a planet without resources. The formidable challenges demand that we, as a global community, address the complex interplay of social, cultural, and environmental factors that shape human health. This paper explores the role of culture in planetary health, highlighting the need for a holistic approach that integrates social, cultural, and environmental factors into the management of human health. The paper argues that culture is a key determinant of health, and that a deep understanding of culture is essential for the development of effective health interventions. The paper also discusses the role of culture in the management of natural resources, and the need for a holistic approach that integrates social, cultural, and environmental factors into the management of natural resources. The paper concludes by calling for a global effort to address the challenges of planetary health, and the need for a holistic approach that integrates social, cultural, and environmental factors into the management of human health.
