Culture and Abnormal Psychology

Chapter 11

Outline

- Defining Abnormality: Some Core Issues
- Cross-Cultural Research on Abnormal Behaviors
- Culture-Bound Syndromes
- Culture and the Assessment of Abnormal Behavior
- Mental Health of Ethnic Minorities and Migrants
- Conclusion

Defining Abnormality: Some Core Issues

Two views on influence of culture on psychopathology

- Cultural relativism: abnormal behaviors can only be understood in the cultural framework within which they occur
- There are universalities in the underlying psychological mechanisms and subjective experiences of many psychological disorders; culture plays a role in behavioral manifestations of abnormal behavior

Cross-Cultural Research on Abnormal Behavior

Schizophrenia

- World Health Organization Study
- Universal symptoms of schizophrenia: lack of insight, auditory and verbal hallucinations, and ideas of reference
- Cross-cultural differences in
  - Rate of recovery
  - Symptom expression
<table>
<thead>
<tr>
<th>Schizophrenia</th>
<th>Depression</th>
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<tbody>
<tr>
<td>• Criticism of World Health Organization Study</td>
<td>• World Health Organization Study</td>
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<tr>
<td>• Other studies found cross-cultural differences in symptoms</td>
<td>• Universal symptoms of depression: loss of enjoyment, appetite, or sleep</td>
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<td>• Cross-cultural differences in diagnosis</td>
<td>• Other studies document cross-cultural differences in expression of symptoms</td>
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<tr>
<td>• Raises question about validity of assessment techniques used in cross-cultural comparisons of schizophrenia</td>
<td>• Kleinman and Marsella argue that expression and course of illness are culturally determined</td>
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<th>Somatization</th>
<th>Attention-Deficit/Hyperactivity Disorder</th>
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<td>• Somatization may be a universal phenomenon with culture-specific meanings and expression modes</td>
<td>• No large-scale comparative cross-cultural studies have been conducted so currently cannot establish whether ADHD is universally experienced disorder</td>
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<td></td>
<td>• Some argue that ADHD is a cultural construct</td>
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<td></td>
<td>• ADHD Working group argued that ADHD is a valid disorder found in both developed and developing cultures with neurobiological basis and untreated in many countries</td>
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<th>CULTURE-BOUND SYNDROMES</th>
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<td>• Using emic (culture-specific) approaches, several culture-specific disorders have been identified</td>
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<tr>
<td>• Sinbyong in Korea</td>
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<td>• Amok in Malaysia, Philippines, and Thailand</td>
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<td>• Anorexia nervosa in the West (now spreading to other countries)</td>
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<td>• Ataque de nervios in Latin American groups</td>
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<td>• Zar among Ethiopian immigrants to Israel</td>
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<td>• Whakama among New Zealand Maori</td>
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These culturally unique disorders from:

• Culture-specific areas of stress, including family and societal structures and ecological conditions
• Culture-specific shaping of conduct and interpretations of conduct may mean that certain cultures implicitly approve patterns of exceptional behavior
• How culture interprets exceptional behavior will be linked to culture-specific interventions

Paniagua's assessment guidelines for practitioners

1) Become familiar with cultural background of client
2) Check own cultural biases and prejudice
3) Do not automatically jump to conclusion that client's symptoms are culture-bound syndrome
4) Ask culturally appropriate questions that allow elaboration by client on possible cultural factors

Summary

Research provides evidence that psychopathology across cultures contains both universal and culturally specific components

CULTURE AND ASSESSMENT OF ABNORMAL BEHAVIOR

Culture and Psychiatric Diagnoses

• Modifications made to the DSM-IV to increase cultural sensitivity; difficulty in classifying culture-bound syndromes remain
• Local diagnostic system (e.g. Chinese Classification of Mental Disorders) created
• Development of more culturally valid classification manual of disorders needed

Cross-Cultural Assessment of Abnormal Behavior

• Valid and reliable measurement of pathology across cultures difficult and complex
• Traditional tools of clinical assessment may have little meaning in cultures with varying definitions of abnormality
• Culturally sensitive assessment methods examine sociocultural norms of healthy adjustment and culturally based definitions of abnormality
Cross-Cultural Assessment of Abnormal Behavior

- Importance of examining indigenous healing systems
- Cultural backgrounds of therapists and client may contribute to perception and assessment of mental health
- Overpathologizing and underpathologizing
- Language issues in psychological testing

Measurement of Personality to Assess Psychopathology

- Clinical studies across cultures involving personality scales are reliable and valid in assessing psychopathology and abnormal behavior in other cultures
- Others argue that items of personality measure do not mean the same thing in other cultures

MENTAL HEALTH OF ETHNIC MINORITIES AND MIGRANTS

African Americans

- African Americans report higher rates of mental disorders than European Americans
- This may be due to socioeconomic disparities

Asian Americans

- Very limited information available on Asian Americans' mental health
- Recent survey found that Asian Americans report lowest prevalence of disorders compared to other ethnic groups
  - This study is limited because it did not distinguish between different Asian ethnic groups

Latino Americans

- The National Latino and Asian American study report variations in rates of mental illness among different Latino groups
  - This may be due to reception of immigration, history of immigration, varying SES, experiences with discrimination, and strength of ethnic community
Native Americans

- Native Americans report highest prevalence of mood and anxiety disorders compared with other ethnic groups
- Variations within the Native American community exists

Migrants

- "Immigrant paradox": immigrants report better health and mental health compared to their US-born peers; this may be due to strong ties to family and access to a supportive ethnic community
- Findings are inconsistent whether immigrants are at higher risk for mental health problems due to acculturation

Migrants

- Ecological perspective on acculturation may clarify how acculturation relates to mental health of immigrants
- Individual's level of acculturation may also contribute to content and expression of his or her distress

Refugees

- Due to their traumatic experiences, refugees show higher rates of PTSD, depression, and anxiety than immigrants

Summary

- Contextual factors like poverty, discrimination and immigration stress, should be taken into account to understand ethnic differences in rates of mental disorders
- There is great diversity among and within ethnic groups in the prevalence of mental disorders

CONCLUSION
There are both etic and emic aspects of psychopathology.

Therefore classification systems and assessment methods need to contain both etic and emic elements.