

# **CULTURE & PSYCHIATRY**

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# **CULTURAL DIVERSITY**

## **'CULTURE'**

**Living, dynamic and changing system of values and worldviews that people live by, create and re-create**

## **'MULTICULTURAL SOCIETY'**

**A society in which there is a plurality of cultural influences from a variety of various sources**

# **TRANSCULTURAL PSYCHIATRY**

## **'CULTURE-BOUND SYNDROME'**

**Understandable only with detailed knowledge of the 'exotic'  
(i.e. non-western) culture in which it occurs**

## **CULTURE IS CENTRAL TO ALL SYNDROMES**

## **PSYCHIATRY IS LOCATED IN WESTERN CULTURE**

## **'TRANSCULTURAL PSYCHIATRY'**

**Application of psychiatry across cultural barriers**

# **CULTURE AND PSYCHIATRY OVERVIEW**

## **HISTORY OF PSYCHIATRY & WESTERN PSYCHOLOGY**

**There are non-western systems of psychology**

**There is only one psychiatry**

## **CONCEPTS OF HEALTH AND ILLNESS**

**Cultural diversity of worldviews**

## **NEED FOR MULTICULTURAL UNDERSTANDINGS**

**Need for a multicultural psychiatry**

# HISTORICAL CONTEXT OF PSYCHIATRY

## Historical Events

- 1418 Portuguese voyage to West Africa  
 1492 Columbus reaches America  
 Vasco da Gama lands in India  
 Plunder of America  
 Genocide of Americans
- 1577 African slaves landed in America  
 Triangular trade: England  
     sugar, cotton      cloth, iron,  
     tobacco      rum, guns  
     America      Africa  
     slaves
- 1764 British Occupy Bengal  
 Plunder of India
- 1807 Abolition of Slave Trade  
 1839-42 Defeat of China in Opium Wars  
 1861 British occupy Lagos  
 1884 Berlin Conference: Scramble for Africa  
 Plunder of Africa
- 1947 Liberation of India  
 1957 Liberation of Ghana  
 1963 Commonwealth Immigrants Act  
 1971 Immigration Act  
 1981 British Nationality Act

## COLONIALISM

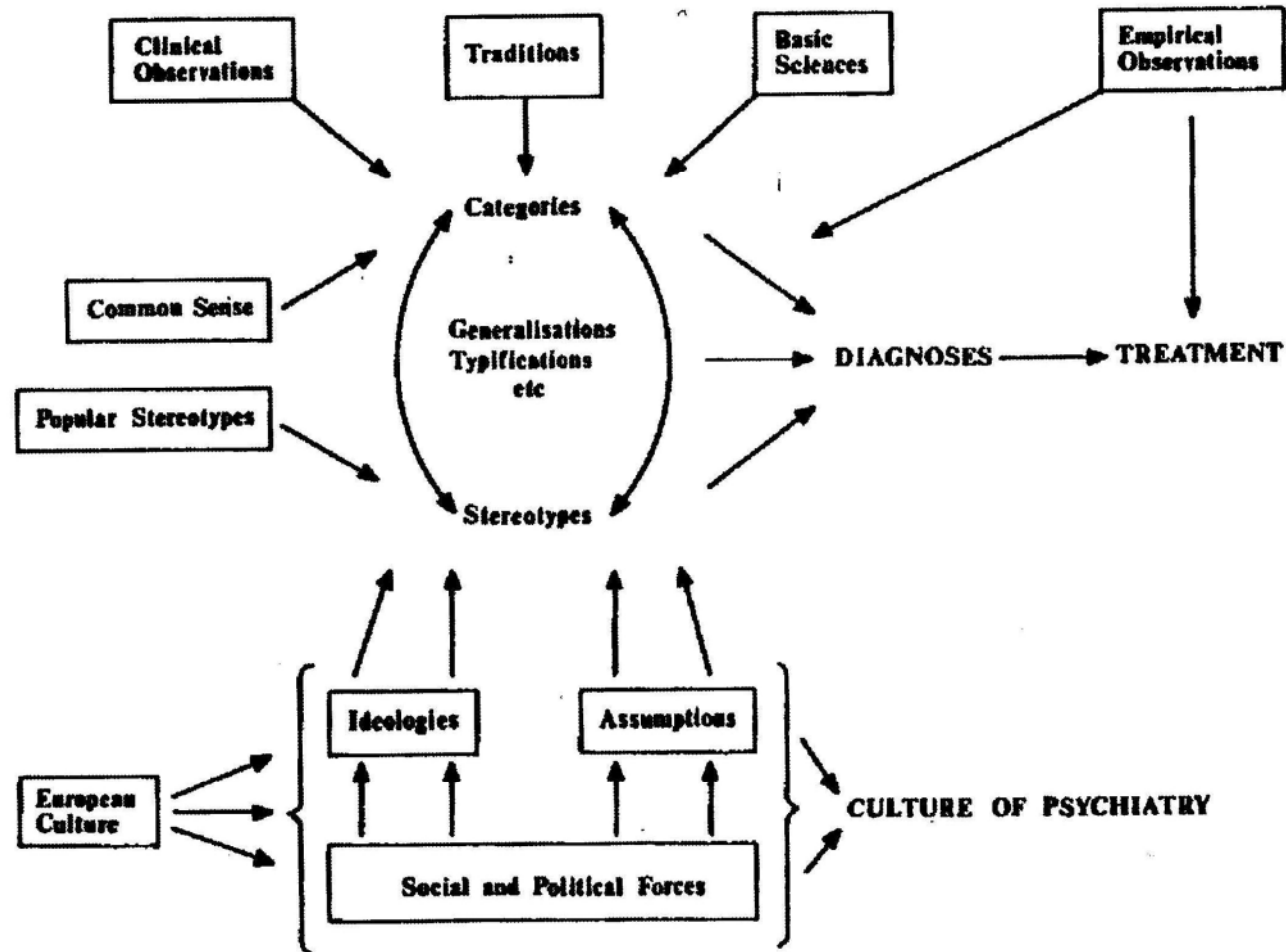
### SLAVERY

### PSYCHIATRY

## Growth of Psychiatry

- 1403 Bethlem Priory admits lunatics
- 1546 Bethlem Priory given to laity
- 1586 'Treatise on Melancholy' (Bright)  
 1621 'Anatomy of Melancholy' (Burton)  
 1632 Medical Governor of Bethlem
- 1713 Hospital for the Insane at Norwich  
 1734 'The English Malady' (Cheyne)  
 1744 Vagrancy Act
- 1774 Private Madhouses Act  
 1792 The Retreat for the Insane at York  
 1808 County Asylums Act  
 1841 Association of Medical Officers of Asylums  
 1858 'A Manual of Psychological Medicine'  
 1863 Broadmoor Hospital  
 1890 Lunacy Act  
 1930 Mental Treatment Act
- 1959 Mental Health Act  
 1963 British Journal of Psychiatry  
 1971 Royal College of Psychiatrists  
 1983 Mental Health Act

# MACHINERY OF PSYCHIATRY IN CONTEXT



Ref: Fernando, Suman (1988) Race and Culture in Psychiatry, Croom Helm, London (Paperback by Routledge, London 1989).

# **DEVELOPMENT OF PSYCHIATRY**

**BODY-MIND SEPARATION (DESCARTES 17<sup>TH</sup> century)**

**MECHANISTIC THINKING (NEWTON 17<sup>th</sup> century)**

**'DEGENERATION' (MOREL 19<sup>th</sup> century)**

**REDUCTIONIST EXPLANATIONS**

**ELIMINATION OF THE SPIRITUAL**

**NINETEENTH CENTURY 'SCIENTIFIC PARADIGM'**

# **SOCIAL CONSTRUCTION OF PSYCHIATRIC ILLNESS (EXAMPLES)**

## **HOMOSEXUALITY**

**'Illness' until 1973 not an illness from 1974 onwards**

## **DEPRESSION**

**Rare among (colonial) Asian & African people until 1950s**

## **DRAPETOMANIA**

**Illness of black slaves who persisted in running away**

## **CANNABIS PSYCHOSIS**

**Among black British in 1970s to 1980s**

## **HYSTERIA**

**Among disempowered women in early twentieth century**

# **PSYCHIATRIC DIAGNOSES**

**Not objective facts but hypotheses that may or may not be useful**

**Distinction between 'mental' and most physical illnesses**

**Usefulness rather than validity is what is what matters in mental health matters**

**Refs:**

**Kendell, R. E. (2001) 'The distinction between mental and physical illness.' *British Journal of Psychiatry*, 178, 490-493. [<http://bjp.rcpsych.org/vol178/issue6>]**

**Kendell, R. & Jablensky, A. (2003) 'Distinguishing between the validity and utility of psychiatric diagnoses.' *American Journal of Psychiatry*, 160, 4-12 [abstract <http://ajp.psychiatryonline.org/cgi/content/abstract/160/1/4>]**

# **DEVELOPING MH SERVICES IN LOW INCOME COUNTRIES BASIC PRINCIPLES**

- **Should be decentralised**
  - Not based on large hospitals
- **Multifaceted**
  - Focus on particular problems facing each community
- **Culturally relevant**
  - Not narrowly medical
- **Sustainable**
  - Not dependent on short-term funding

Derived from: Desjarlis, R., Eisenberg, L., Good, B. & Kleinman (1995) *World Mental Health. Problems and Priorities in Low-Income Countries*. New York & Oxford: Oxford University Press. pp67