Summary of Americanization of Mental Illness

*Culture as possessing a “symptom repertoire”*

*Doctors inadvertently help to select which symptoms will be recognized as legitimate.*

My understanding here is that doctors usually diagnose the symptoms based on history records and classify what the patient said into those type of symptoms.

**Hong Kong’s anorexic example and conclusions**

Then the paper gives a detailed example of *“The Westernization of a mental illness firsthand.”*

Initially in Hong Kong the universal reason for anorexics is not the same as that of American’s.

The major reason for anorexics in America:

*Unlike American anorexics, most of his patients did not intentionally diet nor did they express a fear of becoming fat.*

While in Hong Kong:

*somatic -- they complained most frequently of having bloated stomachs*

The conclusion is that *“food refusal had a particular expression and meaning in Hong Kong”*

But then a key news is reported that a girl in Hong Kong died of anorexic. And *“local reporters often simply copied out of American diagnostic manuals.”*

Through Western’s more comprehensive of description of anorexic and globalization, the understanding of the symptom is changed locally in Hong Kong.

*“New patients appeared to be increasingly conforming their experience of anorexia to the Western version of the disease.”*

Because of globalization culture atmosphere is changed in Hong Kong and the result is that *“illness experiences of individual patients are being discarded”*

*“Western conception of mental health and illness might be shaping the expression of illnesses in other cultures”*

Which I think is a severe problem.

Then another problem emerges as *“Similarly, illnesses found only in other cultures are often treated like carnival sideshows”*

Idea of the author here is that “all mental illness can be every bit as influenced by cultural beliefs” and “a mental illness is an illness of the mind and cannot be understood without understanding the ideas, habits and predispositions”

So, the result of *export of Western biomedical ideas on mental illness can be frustrating though underlying science is sound and intentions altruistic.*

**Debate over whether mental illness should be explained as “psychosocial problem” or “brain disease”**

**And an experiment on that**

The author’s idea and conclusion is that the “brain disease” belief does not reduce stigma but actually increase it.

*“The results of the current study suggest that we may actually treat people more harshly when their problem is described in disease terms”*

Since in this belief assumes that *“a brain made ill through biomedical or genetic abnormalities is more thoroughly broken and permanently abnormal than one made ill though life events”*

So the impact of brain disease belief is *“exact opposite of what we intended”*

**Another example in Zanzibar**

The solution to schizophrenics locally is described as *“Rather they are coaxed with food and goods, feted with song and dance. They are placated, settled, reduced in malfeasance”*

“An ill individual enjoying a time of relative mental health could, at least temporarily, retake his or her responsibilities in the kinship group. Since the illness was seen as the work of outside forces, it was understood as an affliction for the sufferer but not as an identity”

So here the family *“indirectly helped control the course of the illness.”*

By comparison, *“In fact, researchers have long documented how certain emotional reactions from family members correlate with higher relapse rates for people who have a diagnosis of schizophrenia.”*

So the ethnographic in Zanzibar family of schizophrenics provides a good solution.

**Conclusion**

*Of course, to the extent that our modern psychopharmacological drugs can relieve suffering, they should not be denied to the rest of the world. The problem is that our biomedical advances are hard to separate from our particular cultural beliefs.*

The ethnographic work in Zanzibar let me see the application of cultural anthropology.

In the great background of globalization, though *“underlying science sound and intentions altruistic”* we should be careful to apply our culture to other “symptoms” without considering and separating from particular cultural beliefs.