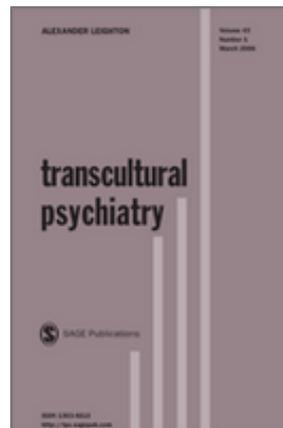# Child and Community Mental Health in Cultural Perspective: a special issue of Transcultural Psychiatry

2010-11-30 17:30:00

By Eugene Raikhel

The latest *Transcultural Psychiatry* is a special issue on "Child and Community Mental Health in Cultural Perspective." Consisting of papers presented at the 2009 McGill Advanced Institute in Cultural Psychiatry and others on the "interactions between developmental psychopathology, family systems, communities and culture," (Guzder and Rousseau 2010). In their introduction to the issue, McGill University child psychiatrists Jaswant Guzder and Cecile Rousseau write:

> "Child mental health cannot be separated from the health and functioning of family and community. Development follows diverse trajectories but is profoundly shaped by cultural knowledge, values, and practices. Poverty, migration, war, and political violence all create additional burdens on the resources of child, family, and community. Changes in society may put children at risk or open up new opportunities for coping and resilience. The biomedical view of contemporary psychiatry tends to disconnect mental health problems from their social contexts. Psychiatric theory and practice convey implicit developmental and behavioural norms that may be dissonant with local cultural values and practices. Cultural psychiatry aims to interrogate these assumptions and supply the missing context essential for both scientific research and effective clinical practice.

While attention to systemic processes involving the family and community is desirable in adult psychiatry, it has always been absolutely crucial in child mental health work. However, many factors have impeded research and clinical writing on cultural dimensions of child mental health. The interaction of multiple strands of psychological, social and cultural meaning increases the level of complexity that must be considered to elaborate culturally appropriate clinical practices. In the case of migrants, the clinician must comprehend and acknowledge not only constitutional realities of development but also the ambiguous influences emerging from the child's family, his or her community of origin, school and primary care institutions of the host or native country. Immigrant and refugee communities and families coping with culture change and stigma have often been poorly understood and many migrant communities remain reluctant to seek a mental health intervention because of stigma or a lack of sense of the relevance of services for coping with the distress of their children," (Guzder and Rousseau 2010).

This special issue might be particularly interesting to read alongside a recently published collection on culture and development — *Formative Experiences: The Interaction of Caregiving, Culture, and Developmental Psychobiology*. This is a hefty tome (almost 600 pages, 21 chapters and over 50 contributors) which itself came out of a conference held by the Foundation for Psychocultural Research several years ago, and brings together contributions by anthropologists, developmental psychobiologists, cultural psychiatrists and others working on these issues. We'll be writing about this book in greater detail later, but I wanted to mention it in this context as an excellent resource on the state-of-the-art research on culture and developmental psychobiology.

And here are the titles and abstracts from the special issue of *Transcultural Psychiatry*:

Jaswant Guzder and Cecile Rousseau, Editorial: Child and Community Mental Health in Cultural Perspective

Sami Timimi, The McDonaldization of Childhood: Children's Mental Health in Neo-liberal Market Cultures

> As the failings of neo-liberalism have recently been revealed through the collapse of much of the banking and financial services sector, it seems an opportune time to think about the impact this economic, political, and social value system has had on the well-being of children. After analyzing how our beliefs and practices around children and families are shaped by a variety of economic, political, and cultural pressures, I discuss how policies that promote a particular form of aggressive capitalism lead to a

narcissistic value system that permeates social institutions, including those that deal with children. Not only does this impact children's emotional well-being, but it also shapes the way we conceptualize children and their problems. These dynamics facilitate the rapid growth of child psychiatric diagnoses and the tendency to deal with aberrant behavior or emotions in children through technical — particularly pharmaceutical — interventions, a phenomenon I refer to as the 'McDonaldization' of children's mental health. The present article seeks to challenge many of the unhelpful cultural assumptions regarding childhood embedded within the narrow biomedical frame that neo-liberalism has encouraged.

Thomas M. Achenbach, [Multicultural Evidence-Based Assessment of Child and Adolescent Psychopathology](#)

This article presents multicultural ways to advance knowledge of children's problems, to fashion conceptual and practical mental health tools, and to use these tools to help children. Diagnostically based scales and statistically derived syndromes are scored from parallel forms completed by population samples of parents, caregivers, teachers, and youths in many societies. The scores are incorporated into multicultural norms for evaluating individual children, as rated by different respondents in relation to relevant norms, such as norms for host societies where immigrant children reside and norms for their families' home societies. Syndrome structures have been supported in 44 societies. Certain age, gender, and SES effects are consistent across many societies. As reported in over 7000 publications from 85 societies and cultural groups, evidence-based assessment provides a common data language for clinicians, trainees, and researchers around the world.

Brandon A. Kohrt, Mark J.D. Jordans, Wietse A. Tol, Em Perera, Rohit Karki, Suraj Koirala, and Nawaraj Upadhaya, [Social Ecology of Child Soldiers: Child, Family, and Community Determinants of Mental Health, Psychosocial Well-being, and Reintegration in Nepal](#)

This study employed a social ecology framework to evaluate psychosocial well-being in a cross-sectional sample of 142 former child soldiers in Nepal. Outcome measures included the Depression Self Rating Scale (DSRS), Child Posttraumatic Stress Disorder Symptom Scale (CPSS), and locally developed measures of functional impairment and reintegration. Hierarchical linear

modeling was used to examine the contribution of factors at multiple levels. At the child level, traumatic exposures, especially torture, predicted poor outcomes, while education improved outcomes. At the family level, conflict-related death of a relative, physical abuse in the household, and loss of wealth during the conflict predicted poor outcomes. At the community level, living in high caste Hindu communities predicted lack of reintegration supports. Ultimately, social ecology is well suited to identify intervention foci across ecological levels based on community differences in vulnerability and protective factors.

Anne E. Becker, Kristen Fay, Jessica Agnew-Blais, Peter M. Guarnaccia, Ruth H. Striegel-Moore, and Stephen E. Gilman, [Development of a Measure of "Acculturation" for Ethnic Fijians: Methodologic and Conceptual Considerations for Application to Eating Disorders Research](#)

Acculturation has been examined as a risk factor for eating disorders, but interpretation of findings has been limited by inconsistent operationalization of this construct across studies. The study aim was to develop and evaluate a population-specific measure of acculturation for ethnic Fijian adolescent schoolgirls, to use in future analyses related to eating disorders. Our findings suggest that acculturation is a multidimensional construct characterized by distinct, though related, dimensions of orientation to ethnic Fijian and/or western/global culture with respect to a range of behaviors and attitudes. In contrast to theoretical models positing uni-dimensional, orthogonal, or oblique relations between cultural identities in individuals undergoing acculturation, our study findings support a heterogeneous pattern among correlations of dimensions across contrasting cultural identities. We suggest multidimensional measures of acculturation are optimal — and socio-demographic proxies inadequate — for characterization of this complex process for health research.

B. Heidi Ellis, Alisa K. Lincoln, Meredith E. Charney, Rebecca Ford-Paz, Molly Benson, and Lee Strunin, [Mental Health Service Utilization of Somali Adolescents: Religion, Community, and School as Gateways to Healing](#)

This mixed-method study examines the utility of the Gateway Provider Model (GPM) in understanding service utilization and pathways to help for Somali refugee adolescents. Somali adolescents living in the Northeastern United States, and their

caregivers, were interviewed. Results revealed low rates of use of mental health services. However other sources of help, such as religious and school personnel, were accessed more frequently. The GPM provides a helpful model for understanding refugee youth access to services, and an elaborated model is presented showing how existing pathways to help could be built upon to improve refugee youth access to services.

Nikki van Leeuwen, Rachel Rodgers, Isabelle Regner, and Henri Chabrol, The Role of Acculturation in Suicidal Ideation among Second-Generation Immigrant Adolescents in France

This study explored the contributions of sociocultural and psychopathological factors to suicidal ideation among adolescents. A sample of 292 French high school students with an immigrant background completed a questionnaire assessing suicidal ideation, borderline personality traits, depressive symptoms, parental attachment, life events, acculturation orientations, ethnic identity, cannabis and alcohol consumption, socioeconomic status and academic failure. Although stressful life events, depressive symptoms, and individualism were risk factors, and attachment to parents a protective factor for both boys and girls, some gender differences emerged. Borderline traits (risk factor), assimilation and marginalization (both protective factors) were significant predictors only among girls.

AMA citation
Raikhel E. Child and Community Mental Health in Cultural Perspective: a special issue of Transcultural Psychiatry. *Somatosphere*. . Available at: . Accessed December 2, 2011.

APA citation
Raikhel, Eugene. (). *Child and Community Mental Health in Cultural Perspective: a special issue of Transcultural Psychiatry*. Retrieved December 2, 2011, from Somatosphere Web site:

Chicago citation
Raikhel, Eugene. . Child and Community Mental Health in Cultural Perspective: a special issue of Transcultural Psychiatry. Somatosphere. (accessed December 2, 2011).

Harvard citation

Raikhel, E , *Child and Community Mental Health in Cultural Perspective: a special issue of Transcultural Psychiatry*, Somatosphere. Retrieved December 2, 2011, from <>

MLA citation

Raikhel, Eugene. "Child and Community Mental Health in Cultural Perspective: a special issue of Transcultural Psychiatry." . <u>Somatosphere</u>. Accessed 2 Dec. 2011.<>