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## TABLE OF CONTENTS

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Search Strategy.....	iii
1. Existential Displacement: Health Care and Embodied Un/Belonging of Irregular Migrants in Norway.....	1
2. Mukbang and Disordered Eating: A Netnographic Analysis of Online Eating Broadcasts.....	1
3. A Mixed Methods Approach of End-of-Life Care, Social Rites, and Bereavement Outcomes: A Transnational Perspective.....	2
4. A Troubling Notification.....	3
5. Working on and with Relationships: Relational Work and Spatial Understandings of Good Care in Community Mental Healthcare in Trieste.....	3
6. Medication by Proxy: The Devolution of Psychiatric Power and Shared Accountability to Psychopharmaceutical Use Among Soldiers in America’s Post-9/11 Wars.....	4
7. Can Mobile Health Improve Depression Treatment Access and Adherence Among Rural Indian Women? A Qualitative Study.....	4
8. Broadcasting Your Death Through Livestreaming: Understanding Cybersuicide Through Concepts of Performance.....	5
9. The Power of Shared Embodiment: Renegotiating Non/belonging and In/exclusion in an Ephemeral Community of Care.....	6
Bibliography.....	8

## SEARCH STRATEGY

Set No.	Searched for	Databases	Results
S1	Culture, Medicine and Psychiatry	Ebook Central, Public Health Database, Publicly Available Content Database	74094*

\* Duplicates are removed from your search, but included in your result count.

# Existential Displacement: Health Care and Embodied Un/Belonging of Irregular Migrants in Norway

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## ABSTRACT (ENGLISH)

Drawing on fieldwork and interviews in Oslo and Bergen, Norway, this article discusses irregular migrants' experiences of existential displacement and the tactics they use to try to re-establish a sense of emplacement and belonging. More specifically, it argues that irregular migrants' experiences of embodied unbelonging are a consequence of a violent form of governmentality that includes specific laws, healthcare structures, and migration management rationalities. The article makes this argument by tracing how these experiences translate into embodied effects that feature prominently in migrants' narratives of suffering while living in a country that purports to provide welfare services to all. The narratives of their state of being-in-the-world are ways through which migrants both experience and express the violence and deprivation they face. I argue that these narratives are instances of structures of feeling (Williams 1973), which are shaped by modes of governmentality. The article shows that irregular migrants' coping strategies centrally involve faith, religious communities and friends. Irregular migrants draw on these relationships to get by, access healthcare, and to resist the (health) effects of social deprivation and political violence. These relationships allow irregular migrants to find meaningful ways of being-in-the-world and rebuilding, to some extent, a sense of entitlement and belonging.

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# Mukbang and Disordered Eating: A Netnographic Analysis of Online Eating Broadcasts

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## ABSTRACT (ENGLISH)

Mukbang is a recent Internet phenomenon in which video recordings of hosts eating large amounts of food are streamed on an online video platform. It originated in South Korea around 2014 and has since become a global trend. The aim of this study was to explore how viewers of mukbang videos relate their audience experiences to symptoms of disordered eating. A qualitative analysis of YouTube comments and Reddit posts on the topic of mukbang and disordered eating was performed, employing a netnographic approach. Two overarching themes were identified: a viewer perspective, by which users discuss mukbang without describing any personal involvement, and a participant perspective, by which users describe their own experiences of affects and behaviors in response to watching mukbang. Several topical categories emerged, describing how watching mukbang can both limit and increase eating, reduce loneliness and guilt, and become self-destructive. For some, mukbang appears to be a constructive tool in increasing food intake, preventing binge eating, or reducing loneliness; for others, it is clearly a destructive force that may motivate restrictive eating or trigger a relapse into loss-of-control eating. Notably, watching mukbang is not necessarily experienced as either helpful or destructive, but instead as simultaneously useful and hurtful.

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Document 3 of 9

# A Mixed Methods Approach of End-of-Life Care, Social Rites, and Bereavement Outcomes: A Transnational Perspective

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## ABSTRACT (ENGLISH)

The current article focused on examining the potential benefits of the End-of-Life (EoL) informal caregiving, communication, and ritualistic behaviors in adaptation to the conjugal bereavement across two different cultural-background contexts: France and Togo, West Africa. The investigation adopted a transnational approach including a total of 235 bereaved spouses. Despite the variation in the length of time since death, no significant difference was found between the Togolese and French bereaved with respect to the level of complicated grief symptoms. However, the Togolese bereaved perceived a significant postloss growth, fostered by EoL communication with the dying and the performance of ritualistic behaviors. In the French sample, bereaved individuals who had experienced more intimate communication with their dying spouse reported a high level of postloss growth. Moreover, findings showed that EoL caregiving without ritualistic support or communication is associated with poor postbereavement outcomes. These findings suggest a clinical need to promote informal caregiving to the dying, communication with

the dying, and ritualistic support during the process of dying as entangled components of EoL care.

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Document 4 of 9

## A Troubling Notification

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### ABSTRACT (ENGLISH)

This piece discusses an internal medicine trainee's attempt to process the untimely death of a patient seen in primary clinic by suicide. More specifically, it explores the role mental health may have played in the patient's care, and the possibility of the symptoms which were labeled as functional having been manifestations of underlying psychiatric illness. The piece also attempts to explore the unique challenges facing veterans within the healthcare system.

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Document 5 of 9

## Working on and with Relationships: Relational Work and Spatial Understandings of Good Care in Community Mental Healthcare in Trieste

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## ABSTRACT (ENGLISH)

Deinstitutionalization is often described as an organizational shift of moving care from the psychiatric hospital towards the community. This paper analyses deinstitutionalization as a daily care practice by adopting an empirical ethics approach instead. Deinstitutionalization of mental healthcare is seen as an important way of improving the quality of lives of people suffering from severe mental illness. But how is this done in practice and which different goods are strived for by those involved? We examine these questions by giving an ethnographic description of community mental health care in Trieste, a city that underwent a radical process of deinstitutionalization in the 1970s. We show that paying attention to the spatial metaphors used in daily care direct us to different notions of good care in which relationships are central. Addressing the question of how daily care practices of mental healthcare outside the hospital may be constituted and the importance of spatial metaphors used may inform other practices that want to shape community mental health care.

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Document 6 of 9

# Medication by Proxy: The Devolution of Psychiatric Power and Shared Accountability to Psychopharmaceutical Use Among Soldiers in America's Post-9/11 Wars

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## ABSTRACT (ENGLISH)

With the United States military stretched thin in the “global war on terror,” military officials have embraced psychopharmaceuticals in the effort to enable more troops to remain “mission-capable.” Within the intimate conditions in which deployed military personnel work and live, soldiers learn to read for signs of psychopharmaceutical use by others, and consequently, may become accountable to those on medication in new ways. On convoys and in the barracks, up in the observation post and out in the motor pool, the presence and perceived volatility of psychopharmaceuticals can enlist non-medical military personnel into the surveillance and monitoring of medicated peers, in sites far beyond the clinic. Drawing on fieldwork with Army personnel and veterans, this article explores collective and relational aspects of psychopharmaceutical use among soldiers deployed post-9/11 in Iraq and Afghanistan. I theorize this social landscape as a form of “medication by proxy,” both to play on the fluidity of the locus of medication administration and effects within the military corporate body, and to emphasize the material and spatial ways that proximity to psychopharmaceuticals pulls soldiers into relationships of care, concern and risk management. Cases presented here reveal a devolution and dispersal of biomedical psychiatric power that complicates mainstream narratives of mental health stigma in the US military.

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Document 7 of 9

# Can Mobile Health Improve Depression Treatment Access and Adherence Among Rural Indian Women? A Qualitative Study

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## ABSTRACT (ENGLISH)

Major Depressive Disorder (MDD) is associated with low rates of treatment and medication non-adherence, more so in low- and middle-income countries (LMICs). Mobile mental health (mHealth) interventions offer promise as a tool to address these problems. However, the feasibility and acceptability of mHealth interventions among rural women in LMICs is unknown. We examined barriers to accessing mental health treatment, reasons for non-adherence, and attitudes towards mHealth solutions among women with MDD in rural south India. Six focus groups were conducted among women with MDD ( $n=69$ ) who had been in treatment at a rural community health center. The discussion was transcribed and analyzed using a modified grounded-theory approach. Women perceived limited autonomy within their family structure, and experienced financial and systemic barriers as contributing to poor treatment access and non-adherence. Illiteracy, limited personal access to mobile phones, and preference for in-person clinical consultation were identified as barriers to use of mHealth. This is the first qualitative study, to our knowledge, that examines attitude towards mHealth among women with MDD in a rural setting in India. The study identified contextual barriers that will be important to address before implementing mHealth interventions.

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Document 8 of 9

## Broadcasting Your Death Through Livestreaming: Understanding Cybersuicide Through Concepts of Performance

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## ABSTRACT (ENGLISH)

Cybersuicide, or suicide mediated by the internet in various ways, is a growing phenomenon worldwide and one which makes an often private act highly public. This paper provides an exploration of one version of cybersuicide: suicide that is livestreamed on the internet. Through an analysis of three case studies, this paper asks what light anthropological concepts of performance can shed on cybersuicide? It argues that as a public and social act, cybersuicide needs to be analyzed in terms of how an audience is attracted and retained, as well as the key roles the audience plays in the social practice. This means that cybersuicide has a different structure from suicide offline, impacting how it should be analyzed and understood.

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Document 9 of 9

# The Power of Shared Embodiment: Renegotiating Non/belonging and In/exclusion in an Ephemeral Community of Care

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## ABSTRACT (ENGLISH)

In this article, we explore the power of shared embodiment for the constitution of an affective community. More specifically, we examine how people afflicted by long-term, arduous experiences of war, migration, and discrimination sensually articulate and, at least temporarily, renegotiate feelings of non/belonging, care, and in/exclusion. Methodologically, we draw on emplaced ethnography and systematic phenomenological go-alongs with a group of elderly migrants, born and raised in different parts of Vietnam, who had arrived in Germany within different legal-political frameworks and who, during the time of our psychological-anthropological research, frequented the same psychotherapeutic clinic. We apply the notion of “affective communities” (Zink in *Affective Societies: Key Concepts*. Routledge, New York, 2019) to grasp how the group experienced a sensual place of mutual belonging outside the clinic when moving through different public spaces in Berlin as part of their therapy. Particular attention is paid to the participants’ embodied and emplaced memories that were reactivated during these excursions. Shared sensations and spatiality, we argue, made them feel they belonged to an ephemeral community of care that was otherwise hardly imaginable due to their distinct individual biographies, contrasting political attitudes, and ties to different social collectives. In analyzing this affective community, we highlight how significant

spatio-sensorial modes of temporal solidification can be in eliciting embodied knowledge that positively contributes to therapeutic processes.

## Bibliography

Citation style: APA 6th - Annotated with Abstracts - American Psychological Association, 6th Edition

Bendixsen Synnøve, K. N. (2020). Existential displacement: Health care and embodied Un/Belonging of irregular migrants in Norway. *Culture, Medicine and Psychiatry*, 44(4), 479-500. doi:<https://doi.org/10.1007/s11013-020-09677-3>

Drawing on fieldwork and interviews in Oslo and Bergen, Norway, this article discusses irregular migrants' experiences of existential displacement and the tactics they use to try to re-establish a sense of emplacement and belonging. More specifically, it argues that irregular migrants' experiences of embodied unbelonging are a consequence of a violent form of governmentality that includes specific laws, healthcare structures, and migration management rationalities. The article makes this argument by tracing how these experiences translate into embodied effects that feature prominently in migrants' narratives of suffering while living in a country that purports to provide welfare services to all. The narratives of their state of being-in-the-world are ways through which migrants both experience and express the violence and deprivation they face. I argue that these narratives are instances of structures of feeling (Williams 1973), which are shaped by modes of governmentality. The article shows that irregular migrants' coping strategies centrally involve faith, religious communities and friends. Irregular migrants draw on these relationships to get by, access healthcare, and to resist the (health) effects of social deprivation and political violence. These relationships allow irregular migrants to find meaningful ways of being-in-the-world and rebuilding, to some extent, a sense of entitlement and belonging.

Mattias, S., & Gustafsson, S. A. (2020). Mukbang and disordered eating: A netnographic analysis of online eating broadcasts. *Culture, Medicine and Psychiatry*, 44(4), 586-609. doi:<https://doi.org/10.1007/s11013-020-09674-6>

Mukbang is a recent Internet phenomenon in which video recordings of hosts eating large amounts of food are streamed on an online video platform. It originated in South Korea around 2014 and has since become a global trend. The aim of this study was to explore how viewers of mukbang videos relate their audience experiences to symptoms of disordered eating. A qualitative analysis of YouTube comments and Reddit posts on the topic of mukbang and disordered eating was performed, employing a netnographic approach. Two overarching themes were identified: a viewer perspective, by which users discuss mukbang without describing any personal involvement, and a participant perspective, by which users describe their own experiences of affects and behaviors in response to watching mukbang. Several topical categories emerged, describing how watching mukbang can both limit and increase eating, reduce loneliness and guilt, and become self-destructive. For some, mukbang appears to be a constructive tool in increasing food intake, preventing binge eating, or reducing loneliness; for others, it is clearly a destructive force that may motivate restrictive eating or trigger a relapse into loss-of-control eating. Notably, watching mukbang is not necessarily experienced as either helpful or destructive, but instead as simultaneously useful and hurtful.

Kokou-Kpolou, C. K., Moukouta, C. S., Livia, S., Sara-Emilie, M., Cénat, J. M., Atiyihwè, A., & Marie-Frédérique, B. (2020). A mixed methods approach of end-of-life care, social rites, and bereavement outcomes: A transnational perspective. *Culture, Medicine and Psychiatry*, 44(4), 501-523. doi:<https://doi.org/10.1007/s11013-020-09669-3>

The current article focused on examining the potential benefits of the End-of-Life (EoL) informal caregiving, communication, and ritualistic behaviors in adaptation to the conjugal bereavement across two different cultural-background contexts: France and Togo, West Africa. The investigation adopted a transnational approach including a total of 235 bereaved spouses. Despite the variation in the length of time since death, no significant difference was found between the Togolese and French bereaved with respect to the level of complicated grief symptoms. However, the Togolese bereaved perceived a significant postloss growth, fostered by EoL communication with the dying and the performance of ritualistic behaviors. In the French sample, bereaved individuals who had experienced more intimate communication with their dying spouse reported a high level of postloss growth. Moreover, findings showed that EoL caregiving without ritualistic support or communication is associated with poor postbereavement outcomes. These findings suggest a clinical need to promote informal caregiving to the dying, communication with the dying, and ritualistic support during the process of dying as entangled components of EoL care.

Razmjou, A. A. (2020). A troubling notification. *Culture, Medicine and Psychiatry*, 44(4), 457-460. doi:<https://doi.org/10.1007/s11013-020-09670-w>

This piece discusses an internal medicine trainee's attempt to process the untimely death of a patient seen in primary clinic by suicide. More specifically, it explores the role mental health may have played in the patient's care, and the possibility of the symptoms which were labeled as functional having been manifestations of underlying psychiatric illness. The piece also attempts to explore the unique challenges facing veterans within the healthcare system.

Christien, M., Kroon, H., Mulder, C. L., & Jeannette, P. (2020). Working on and with relationships: Relational work and spatial understandings of good care in community mental healthcare in trieste. *Culture, Medicine and Psychiatry*, 44(4), 544-564. doi:<https://doi.org/10.1007/s11013-020-09672-8>

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