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10 November 2023 07:59

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SEARCH STRATEGY

Set No.	Searched for	Databases	Results
S1	Culture, Medicine and Psychiatry	Ebook Central, Public Health Database, Publicly Available Content Database	74095*

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

The Affective Creativity of a Couple in Dementia Care

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

The capacity to feel and express themselves in response to worldly surroundings is a defining feature of who a person living with dementia is, and can have profound effects on the ways in which they think, act and express creativity. Drawing on a year of intensive collaborative work with residents living with dementia in an Orthodox Jewish care home in London, I extend our perceptions and understandings of how a couple experiences their day-to-day lives, with particular attention paid to their affective practice in creativity. I demonstrate how the affective creativity of the couple emerges, circulates, and transforms as a spouse's dementia develops, whilst feeling bodies continuously (re)make relations and familiarize themselves with the immediate surroundings through the making of artworks.

Postpartum Maternal Mood Among Hadza Foragers of Tanzania: A Mixed Methods Approach

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Infant and maternal mortality rates are among the highest in the world in low and middle-income countries where postpartum depression impacts at least one in five women. Currently, there is a dearth of data on maternal mood and infant health outcomes in small-scale non-industrial populations from such countries, particularly during the postnatal period. Here, we present the first investigation of postpartum maternal mood among a foraging population, the Hadza of Tanzania. We administered the Edinburgh Postnatal Depression Scale (EPDS) to twenty-three women, all with infants under the age of 12 months. Semi-structured interviews on happiness and unhappiness during the post-partum period served as a validity cross-check for the EPDS. The combined results of the EPDS surveys and the interview responses suggest that a high proportion of Hadza women experience significant mood disturbances following birth and that postpartum unhappiness is associated with self-reports of pain, anxiety, and disturbed sleep

patterns. These findings suggest that many of the mothers in our sample are experiencing post-partum unhappiness at levels similar to or higher than those reported for low to middle income countries in general, including Tanzania. These data are critical for improving our understanding of the etiologies of postpartum mood disturbances cross-culturally.

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Cultural Consultation in Context: A Comparison of the Framing of Identity During Intake at Services in Montreal, London, and Paris

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Cultural diversity poses a challenge to mental Health care systems in many settings. Specialized cultural consultation services have been developed in a number of countries as a way to supplement existing services. The objective of this paper is to compare and contrast cultural consultation services in Montreal, London, and Paris to determine how culture and society have shaped the evolution of these services to meet local sensitivities and imperatives. Historical contexts of the sites, their descriptions and origins, how they categorize cultural, ethnic, and linguistic diversity, and their intake procedures are compared and contrasted according to a standardized template of themes. Data came from site visits and participant observation at each site. For historical, political, and cultural reasons, categorization of diversity and intake procedures differ markedly by site: Montreal focuses on language categories and language proficiency; London enumerates ethnic diversity according to officially mandated categories; and Paris does not gather ethnic data on its patients in any form. The process of cultural consultation, specifically its triage and intake procedures, is profoundly influenced by local histories and social norms that are maintained by professional cultures of psychiatry in each setting. To properly place their patients in context, cultural psychiatrists must not only aim to understand the culture of the other, but also must consider the culture of the mainstream society and how it shapes the delivery of services.

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Ghost Encounters Among Traumatized Cambodian Refugees: Severity, Relationship to PTSD, and

Phenomenology

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ABSTRACT (ENGLISH)

Ghost encounters were found to be a key part of the trauma ontology among Cambodian refugees at a psychiatric clinic, a key idiom of distress. Fifty-four percent of patients had been bothered by ghost encounters in the last month. The severity of being bothered by ghosts in the last month was highly correlated to PTSD severity ($r=.8$), and among patients bothered by ghosts in the last month, 85.2% had PTSD, versus among those not so bothered, 15.4%, odds ratio of 31.8 (95% confidence level 11.3–89.3), Chi square=55.0, $p<.001$. Ghost visitations occurred in multiple experiential modalities that could be classified into three states of consciousness: full sleep (viz., in dream), hypnagogia, that is, upon falling asleep or awakening (viz., in sleep paralysis [SP] and in non-SP hallucinations), and full waking (viz., in hallucinations, visual aura, somatic sensations [chills or goosebumps], and leg cramps). These ghost visitations gave rise to multiple concerns—for example, of being frightened to death or of having the soul called away—as part of an elaborate cosmology. Several heuristic models are presented including a biocultural model of the interaction of trauma and ghost visitation. An extended case illustrates the article's findings.

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The Globalization of Biological Psychiatry and the Rise of Bipolar Spectrum Disorder in Iran

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ABSTRACT (ENGLISH)

In recent years, psychiatry in Iran witnessed a dramatic increase in the use of the diagnosis of bipolar spectrum disorder (BSD). This qualitative study maps the journey of the BSD diagnosis from the West to Iran, examines the controversy surrounding the diagnosis and its treatment, and explores some of the structural factors that facilitate and maintain the widespread use of the BSD diagnosis in Iran and related practices of prescribing neuroleptic and

mood stabilizers. The study methods include archival research and semi-structured interviews with 25 prominent Iranian psychiatrists in the field of mood disorders. Results show the importance of factors in addition to economics in driving changes in diagnostic fashion. Most psychiatrists interviewed reported what they viewed as an over-diagnosis of bipolar disorder and over-prescription of mood stabilizers and atypical antipsychotics among Iranian psychiatrists over the past decade. In addition to the influence of leading figures of American psychiatry, the dominance of Western psychiatric classifications and textbooks in Iran's psychiatry, and indirect intervention by pharmaceutical companies, local structural and political factors have played a significant role in the Iranian psychiatric system's embrace of the new concept of bipolarity. In Iran, the medicalization of social conflict has been embraced by government, families, and psychiatrists for cross-cutting purposes. These challenges and the continued controversy over the adoption of American psychiatric fads in a non-Western country like Iran point to the importance of elaborating a more ecosocial and cultural view of psychiatric practice to disentangle some of the complex trade-offs involved in adopting particular modes of diagnostic practice.

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'A German Whore and no Money at that': Insanity and the Moral and Political Economies of German South West Africa

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

While the links between colonial psychiatry and racism figure prominently in histories of the diagnosis, treatment and institutionalisation of the mentally ill in Africa, there is an absence of patient-centred accounts, in the analysis of the efforts of the colonial-era subjects themselves to be pro-active not merely as the mentally ill, by clinical or court definition, but as persons embedded in social relationships with their kin and significant others. Moreover, despite an emerging scholarship, little is known of the experience of European settlers. In this respect there is a need for a more balanced representation, one that shows the ambivalence of colonial psychiatry and its reach into the lives of colonial subjects, Africans and Europeans alike. In this paper I focus on the narratives of a settler in German South West Africa and her efforts to escape diagnosis and institutionalisation. In building on a feminist approach to illness narratives, in particular on the idea of bearing empathic witness, I will explore the ways in which illness narratives can reveal the complex moral and political economies of the colonial world.

Bibliography

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

Jong-min, J. (2020). The affective creativity of a couple in dementia care. *Culture, Medicine and Psychiatry*, 44(3), 360-381. doi:<https://doi.org/10.1007/s11013-019-09662-5>

The capacity to feel and express themselves in response to worldly surroundings is a defining feature of who a person living with dementia is, and can have profound effects on the ways in which they think, act and express creativity. Drawing on a year of intensive collaborative work with residents living with dementia in an Orthodox Jewish care home in London, I extend our perceptions and understandings of how a couple experiences their day-to-day lives, with particular attention paid to their affective practice in creativity. I demonstrate how the affective creativity of the couple emerges, circulates, and transforms as a spouse's dementia develops, whilst feeling bodies continuously (re)make relations and familiarize themselves with the immediate surroundings through the making of artworks.

Herlosky, K. N., Benyshek, D. C., Mabulla, I. A., Pollom, T. R., & Crittenden, A. N. (2020). Postpartum maternal mood among hadza foragers of tanzania: A mixed methods approach. *Culture, Medicine and Psychiatry*, 44(3), 305-332. doi:<https://doi.org/10.1007/s11013-019-09655-4>

Infant and maternal mortality rates are among the highest in the world in low and middle-income countries where postpartum depression impacts at least one in five women. Currently, there is a dearth of data on maternal mood and infant health outcomes in small-scale non-industrial populations from such countries, particularly during the postnatal period. Here, we present the first investigation of postpartum maternal mood among a foraging population, the Hadza of Tanzania. We administered the Edinburgh Postnatal Depression Scale (EPDS) to twenty-three women, all with infants under the age of 12 months. Semi-structured interviews on happiness and unhappiness during the post-partum period served as a validity cross-check for the EPDS. The combined results of the EPDS surveys and the interview responses suggest that a high proportion of Hadza women experience significant mood disturbances following birth and that postpartum unhappiness is associated with self-reports of pain, anxiety, and disturbed sleep patterns. These findings suggest that many of the mothers in our sample are experiencing post-partum unhappiness at levels similar to or higher than those reported for low to middle income countries in general, including Tanzania. These data are critical for improving our understanding of the etiologies of postpartum mood disturbances cross-culturally.

Eric, J. G., Larchanché Stephanie, Rachid, B., Micol, A., Bhui Kamaldeep, S., & Kirmayer, L. J. (2020). Cultural consultation in context: A comparison of the framing of identity during intake at services in montreal, london, and paris. *Culture, Medicine and Psychiatry*, 44(3), 433-455. doi:<https://doi.org/10.1007/s11013-019-09666-1>

Cultural diversity poses a challenge to mental Health care systems in many settings. Specialized cultural consultation services have been developed in a number of countries as a way to supplement existing services. The objective of this paper is to compare and contrast cultural consultation services in Montreal, London, and Paris to determine how culture and society have shaped the evolution of these services to meet local sensitivities and imperatives. Historical contexts of the sites, their descriptions and origins, how they categorize cultural, ethnic, and linguistic diversity, and their intake procedures are compared and contrasted according to a standardized template of themes. Data came from site visits and participant observation at each site. For historical, political, and cultural reasons, categorization of diversity and intake procedures differ markedly by site: Montreal focuses on language categories and language proficiency; London enumerates ethnic diversity according to officially mandated categories; and Paris does not gather ethnic data on its patients in any form. The process of cultural consultation, specifically its triage and intake procedures, is profoundly influenced by local histories and social norms that are maintained by professional cultures of psychiatry in each setting. To properly place their patients in context, cultural psychiatrists must not only aim to understand the culture of the other, but also must consider the culture of the mainstream society and how it shapes the delivery of services.

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