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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 | 74096*  |

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

# “Breaking Down”: Afflictions and Treatments During Times of Crisis in Buenos Aires

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[ProQuest document link](#)

## ABSTRACT (ENGLISH)

Based on the ethnographic research carried out on speech-based therapies at health centers in marginalized areas of the Buenos Aires Metropolitan Area, this article problematizes the “breaking down” or “being broken” as a local language of afflictions that emerges from the rapidly deteriorating material living conditions related to downward social mobility. Specifically, I analyze how these discomforts turn into narrative in terms of economic and political subjective and collective crises, which combine and hybridize personal experiences with mainstream discourses of the country’s recent history. Based on a brief analysis of the changing relationships between psychoanalysis and poverty in the Buenos Aires area, I also examine how speech-based approaches classify these afflictions as “social issues,” external to their logic, as they resist to be entirely subdued to current psychological knowledge, categories, and techniques.

## DETAILS

|                                |                                                                                                                                                                                                                                                                                                                                                                                     |
|--------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Subject:</b>                | Poverty; Health centres; Speech; Marginality; Discourses; Personal experiences; Living conditions; Social mobility; Psychoanalysis; Crises; Social issues; Medical research; Ethnographic research; Treatment methods; Ethnography; Economic crisis; Upward mobility; Narratives; Health facilities; Neoliberalism; Grammar; Psychotherapy; Psychiatry; Middle class; Mental health |
| <b>Business indexing term:</b> | Subject: Economic crisis Upward mobility Social mobility                                                                                                                                                                                                                                                                                                                            |
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Document 2 of 17

# SymptomSpeak: Women's Struggle for History and Health in Kosovo

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## ABSTRACT (ENGLISH)

What are the linguistic dimensions of pain, and what kind of articulations arise from these painful experiences? How does the language of pain circulate, connect, and reach across histories, gendered realities, and social politics? In what ways might the language of pain act on and transform the world by shaping and changing socio-political agendas? I explored these questions among women in Kosovo and discovered a unique symptomatic language which I call SymptomSpeak. SymptomSpeak is a powerful language evoked, shared, and exchanged by women to articulate political, social, and economic grievances, to challenge societal norms, and to demand justice. The language itself consists of a detailed symptom vocabulary which is variously assembled into meaning complexes. Such assemblages shift depending on the social context in which they are conveyed and are referred to as *nervoz* (nervousness), *mërzitna* (worried, sad), *mzysh* (evil eye), and *t'bone* (spell). I describe in detail how women variously combine and exchange components of SymptomSpeak and, thereby, question dominant framings of reality. Thereby, my intention is to contribute to a new understanding of pain as language which straddles the fine line between socio-political commentary and illness; produces gendered political realities; and challenges the status quo through its communicative power.

## DETAILS

|                                |                                                                            |
|--------------------------------|----------------------------------------------------------------------------|
| <b>Subject:</b>                | Language; Politics; Women; Pain; Bones; Social environment; Vocabulary     |
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| <b>Identifier / keyword:</b>   | Mental health; Symptoms; Pain; War; Kosovo                                 |
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## Correction to: A Cross-cultural Perspective on Intrathecal Opioid Therapy Between German and Iranian Patients

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[ProQuest document link](#)

## DETAILS

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# Visualizing a Calculus of Recovery: Calibrating Relations in an Opioid Epicenter

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; Milligan, Katie <sup>2</sup>; Osborn, Annette <sup>2</sup>; Aamir, Iman <sup>2</sup>; Gainer, Danielle <sup>3</sup>; Daniulaityte, Raminta <sup>4</sup> <sup>1</sup> Wright State University, Center for Interventions, Treatment, and Addictions Research, Department of Population and Public Health Sciences, Boonshoft School of Medicine, Dayton, USA (GRID:grid.268333.f) (ISNI:0000 0004 1936 7937) <sup>2</sup> Mount Holyoke College, South Hadley, USA (GRID:grid.260293.c) (ISNI:0000 0001 2162 4400) <sup>3</sup> Wright State University, Center for Interventions, Treatment, and Addictions Research, Department of Population and Public Health Sciences, Boonshoft School of Medicine, Dayton, USA (GRID:grid.268333.f) (ISNI:0000 0004 1936 7937); Wright State University, Department of Psychiatry, Boonshoft School of Medicine, Dayton, USA (GRID:grid.268333.f) (ISNI:0000 0004 1936 7937) <sup>4</sup> Arizona State University, College of Health Solutions, Phoenix, USA (GRID:grid.215654.1) (ISNI:0000 0001 2151 2636)

[ProQuest document link](#)

## ABSTRACT (ENGLISH)

This article uses participatory photography to explore the relationships animating efforts towards recovery from opioid use disorder (OUD) in the Dayton, Ohio area, an epicenter of illicit opioid use and overdose death. A photo-elicitation project was conducted with thirteen people who met the DSM-5 criteria for OUD. Photographs were used as prompts during qualitative interviews, which were thematically analyzed. Analysis of both visual and textual data demonstrated the ways in which recovery became an unfolding process of calculation as participants made strategic choices to navigate relations and encounters with things, people, and places. Relationships across each of these domains could, under some circumstances, serve as supports or motivators in the recovery process, but, in alternate settings, be experienced as "triggers" prompting a resumption of problematic drug use or, at the very least, a reckoning with the feelings and emotions associated with painful or problematic aspects of personal histories and drug use experiences. Findings highlight the importance of understanding recovery as a calibration of the ambiguous relations animating experiences of everyday life. We argue for continued emphasis on recovery as an active performance and ongoing practice of calculation—of risks and benefits, of supports and triggers, of gratification and heartbreak—rather than a goal or static state.

## DETAILS

|                                 |                                                                                                                                                                                                                                                                             |
|---------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Subject:</b>                 | Drugs; Drug abuse; Recovery; Motivation; Everyday life; Opioids; Gratification; Rehabilitation; Drug use; Photography; Emotions; Ambiguity; Elicitation; Computation; Opiates; Narcotics; Substance use disorder                                                            |
| <b>Identifier / keyword:</b>    | Opioids; Addiction; Recovery; Photo-elicitation; Participatory photography                                                                                                                                                                                                  |
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# Ancient Roots of Today's Emerging Renaissance in Psychedelic Medicine

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; Hanson, Ryan <sup>2</sup>; Wilkinson, Darryl <sup>3</sup>; Garcia-Romeu, Albert <sup>4</sup> <sup>1</sup> Penn State College of Medicine, Department of Humanities, Penn State Milton S Hershey Medical Center, Hershey, USA (GRID:grid.240473.6) (ISNI:0000 0004 0543 9901) <sup>2</sup> Cleveland Clinic, Anesthesiology Institute, Cleveland, USA (GRID:grid.239578.2) (ISNI:0000 0001 0675 4725) <sup>3</sup> Dartmouth University, Department of Religion, Hanover, USA (GRID:grid.254880.3) (ISNI:0000 0001 2179 2404) <sup>4</sup> Department of Psychiatry and Behavioral Sciences, Johns Hopkins School of Medicine, Center for Psychedelic and Consciousness Research, Baltimore, USA (GRID:grid.21107.35) (ISNI:0000 0001 2171 9311)

[ProQuest document link](#)

## ABSTRACT (ENGLISH)

An international ban on psychedelics initiated by the United Nations' Convention on Psychotropic Substances in 1971 restricted the clinical use of these ancient psychoactive substances. Yet, in an era marked by rising mental health concerns and a growing "Deaths of Despair" epidemic (i.e., excess mortality and morbidity from suicide, drug overdose, and alcoholism), the structured psychedelic use that has long been a part of ritual healing experiences for human societies is slowly regaining credibility in Western medicine for its potential to treat various mental health conditions. We use a historical lens to examine the use of psychedelic therapies over time, translate ancient lessons to contemporary clinical and research practice, and interrogate the practical and ethical questions researchers must grapple with before they can enter mainstream medicine. Given the COVID-19 pandemic and its contributions to the global mental health burden, we also reflect on how psychedelic therapy might serve as a tool for medicine in the aftermath of collective trauma. Ultimately, it is argued that a "psychedelic renaissance" anchored in the lessons of antiquity can potentially help shift healthcare systems—and perhaps the broader society—towards practices that are more humane, attentive to underlying causes of distress, and supportive of human flourishing.

## DETAILS

**Subject:** Ethics; Western medicine; Morbidity; Hallucinogens; Health services; Healing; Despair; Health problems; Alcoholism; Mental disorders; Clinical research; COVID-19; Faith healing; Health care industry; Medicine; Trauma; Drug overdose; Credibility; Psychological distress; Rituals; Deaths; Antiquity; Epidemics; Pandemics; Therapy; Mental health; Suicide; Clinical medicine

|                                 |                                                                                                                                                                                                                                                                               |
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# Interrupting Patients in Healthcare Settings: What is Being Interrupted?

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[ProQuest document link](#)

## ABSTRACT (ENGLISH)

Scientific literature since the 1980s examines the phenomenon of healthcare professionals interrupting patients: at which second patients opening expositions are interrupted and how long they take if unrestrained. Although the goal of this literature is strictly numerical—determining interventions' length—, it reveals a number of its authors' views and preferences. Our discourse analysis reveals, first, that, often in between the lines, this literature suggests reasons for letting patients speak freely and tries to dismantle the myth of the overly-loquacious patient. Second, by turning to some philosophical inquiries into the notion of "interruption," we explore how, within this literature, the ultimate reason for *interrupting patients* and silencing several of their concerns is often the fear of *a certain medical logic being interrupted*—a logic that dates back to Vesalius and Bichat, and that informs nowadays biomedicine: patients' speech is valuable as long as it contributes to a diagnosis in the form of the identification of an underlying tissue damage. That is, this literature presents the interruption of patients as a device of claiming power on the part of an eminently biomedical approach to illness. The paper provides further reasons for not interrupting patients proposed by the biopsychosocial model, "narrative medicine," and anthropologists who study the functions of illness narratives.

## DETAILS

**Subject:** Narratives; Discourse analysis; Speech; Health care; Illnesses; Health services; Medical diagnosis; Medicine; Biomedicine; Medical personnel; Patients; Literature; Biopsychosocial aspects; Anthropology; Physicians; Psychiatry; Experiments

**Identifier / keyword:** Biomedical model; Biopsychosocial model; Illness narratives; Interrupting patients; Narrative medicine

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# Correction to: “Women as Troublemakers”: The Hard Sociopolitical Context of Soft Bipolar Disorder in Iran

Mianji, Fahimeh <sup>1</sup> ; Kirmayer, Laurence J. <sup>1</sup> <sup>1</sup> McGill University, Division of Social and Transcultural Psychiatry, Department of Psychiatry, Montreal, Canada (GRID:grid.14709.3b) (ISNI:0000 0004 1936 8649); Culture and Mental Health Research Unit, Institute of Community and Family Psychiatry, Montreal, Canada (GRID:grid.14709.3b)

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Document 8 of 17

# 'I am Dying a Slow Death of White Guilt': Spiritual Carers in a South African Hospice Navigate Issues of Race and Cultural Diversity

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<sup>1</sup> Stellenbosch University, Department of Psychology, Cape Town, South Africa (GRID:grid.11956.3a) (ISNI:0000 0001 2214 904X)

[ProQuest document link](#)

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## ABSTRACT (ENGLISH)

Culturally appropriate spiritual care is increasingly recognised as a crucial component of spiritual care. As part of a larger study, we were interested in cultural and racial issues as experienced by spiritual carers in a hospice in Cape Town, South Africa. We conducted one-on-one interviews and focus group discussions with a cohort of spiritual care workers, who, being volunteers and relatively privileged South Africans, discussed their sensitivity to cultural issues, but also mentioned a host of political, racial and identity issues which profoundly affect their work. The data suggest that the concept of culturally appropriate care must be understood and acted on contextually. We note that the work of transformation of care cannot be separated from broader questions of social inequality and change.

## DETAILS



|                                 |                                                                                                                                                                                                                                                                                          |
|---------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Subject:</b>                 | Guilt; Cultural differences; Caregivers; Transformation; Religiosity; Social inequality; Multiculturalism & pluralism; Volunteers; Hospice care; Cultural competence; Race; Black people; Racial identity; Political identity; Colonialism; COVID-19; Racism; Alliances; Palliative care |
| <b>Identifier / keyword:</b>    | Hospice spiritual care; Cultural diversity; South Africa; Apartheid; Colonialism; Race                                                                                                                                                                                                   |
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# Cognitive Optimisation and Schizophrenia: Assembling Heterogeneity, Overcoming the Precariousness of Life, and Challenging Public Health Policies in Psychiatry in France

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[ProQuest document link](#)

## ABSTRACT (ENGLISH)

Cognitive remediation therapy (CRT) aims to optimise cognitive abilities of people who suffer from schizophrenia in order to improve their social adaptation. This therapeutic orientation was developed in psychiatry in the 1980s and 1990s, at a time when the disorder was being redefined as a neurocognitive deficit disorder. In this article, I describe CRT as an assemblage that lies at the intersection of multiple, overlapping theories and spaces of mental disorders and psychiatric care. To do so, I draw on 18 months of ethnographic research conducted in a French hospital unit dedicated to the development of CRT. I argue that the focus on cognitive health and cognitive abilities (or deficits) is not only redefining the logics of care and reshaping medical conceptualisations of schizophrenia, but it is also opening up to a new understanding of people's precarious life conditions, where emotional, biological, and cognitive fragility is intertwined with social and economic uncertainty. I then examine the extent to which psychiatrists have extended the goals of CRT to include psychosocial rehabilitation in order to mitigate not only the effects of cognitive deficits, but also the effects of limited social and professional integration encountered by patients. Finally, I conclude with a consideration of how CRT has become, for its proponents in France, a means to develop a policy and organisational project for French psychiatry.

## DETAILS

|                                 |                                                                                                                                                                                                                                                                                         |
|---------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Subject:</b>                 | Public health; Mental disorders; Schizophrenia; Cognitive ability; Ethnographic research; Mental health services; Cognitive deficits; Uncertainty; Psychiatry; Cognition; Psychosocial factors; Rehabilitation; Medicine; Therapy; Patients; Psychiatrists; Psychosocial rehabilitation |
| <b>Location:</b>                | France                                                                                                                                                                                                                                                                                  |
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# The Harm Inflicted by Polite Concern: Language, Fat, and Stigma

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; Trainer, Sarah <sup>2</sup>; Brewis, Alexandra <sup>1</sup> <sup>1</sup> Arizona State University, School of Human Evolution and Social Change, Tempe, USA (GRID:grid.215654.1) (ISNI:0000 0001 2151 2636) <sup>2</sup> Seattle University, Seattle, USA (GRID:grid.263306.2) (ISNI:0000 0000 9949 9403)

[ProQuest document link](#)

## ABSTRACT (ENGLISH)

Understanding language as a social action draws attention to the ways in which fat stigmatizing discourses do social harm. Drawing on interviews and experiences situated in Osaka, Japan and north Georgia, US, this paper looks closely at the ways in which fat stigma is expressed across the two sites, both blatantly and through more subtle language use. We identified four key themes in people’s narratives around localized ideas about fatness. These themes are: (1) expressed pity or concern for fat people; (2) reported experiences of indirect stigma in public settings; (3) reported experiences of direct stigma in private settings; and (4) robust and repeated associations between fat and other conditions that had locally relevant negative connotations in each site. We further identify the expressed concern and pity articulated in the first theme as a form of cloaked, “dressed up” stigma and as such, we argue that it enacts social harm, especially when it co-occurs with more blatant forms of stigma. Linguistic niceties around caring actually, at least in these contexts, reify symbolic connections between fat bodies and their social failure.

## DETAILS

|                              |                                                                                         |
|------------------------------|-----------------------------------------------------------------------------------------|
| <b>Subject:</b>              | Social action; Stigma; Body fat; Discourses; Connotation; Pity; Obesity; Language usage |
| <b>Identifier / keyword:</b> | Stigma; Language; Fat; US; Japan                                                        |
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# Could the DSM-5 Cultural Formulation Interview Hold Therapeutic Potential? Suggestions for Further Exploration and Adaptation Within a Framework of Therapeutic Assessment

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[ProQuest document link](#)

## ABSTRACT (ENGLISH)

The Cultural Formulation Interview (CFI), included in the fifth edition of the *Diagnostic and Statistical Manual of Mental Disorders*, is a person-centered instrument for systematically appraising the impact of cultural factors in psychiatric assessment. A number of key areas in the future development of the CFI have been identified in order to ensure further clinical uptake. In this paper, we suggest that applying a Therapeutic Assessment (TA) approach in using the CFI—i.e., framing the interview in a way that gives primacy to its self-transformative potential by explicitly focusing on those issues that are seen as the most urgent, relevant, and meaningful by the patient—could prove helpful in alleviating patients' suffering beyond what is achieved by merely collecting relevant cultural information that may inform diagnosis and subsequent treatment interventions. The TA methodology has been designed as a collaborative approach to psychological assessment in which the assessment procedure itself is meant to induce therapeutic change. This is achieved by explicitly focusing on the particular questions and queries that patients have about themselves with respect to their mental health problems or psychosocial well-being; these questions are then allowed to guide the assessment process and the interpretation of the findings. We suggest a number of potential modifications to the related Outline for Cultural Formulation and to the CFI content that could strengthen a TA-inspired focus. With this paper, we do not claim to offer a definitive integration of the TA approach in using the CFI but hope to further the discussion of a therapeutic potential of the instrument.

## DETAILS

**Subject:** Diagnostic and Statistical Manual; Health problems; Medical diagnosis; Collaboration; Mental disorders; Collaborative approach; Person centred approach; Primacy; Interviews; Well being; Psychosocial factors; Cultural factors; Uptake; Therapy; Psychological assessment; Patients; Mental health; Evaluation; Psychosocial well being; Clinical assessment; Field study; Cultural identity; Child & adolescent psychiatry; Frame analysis

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# “Women as Troublemakers”: The Hard Sociopolitical Context of Soft Bipolar Disorder in Iran

Mianji, Fahimeh <sup>1</sup> ; Kirmayer, Laurence J. <sup>1</sup> <sup>1</sup> McGill University, Division of Social and Transcultural Psychiatry, Department of Psychiatry, Montreal, Canada (GRID:grid.14709.3b) (ISNI:0000 0004 1936 8649); Institute of Community and Family Psychiatry, Culture and Mental Health Research Unit, Montreal, Canada (GRID:grid.14709.3b)

[ProQuest document link](#)

## ABSTRACT (ENGLISH)

Gender differences in the prevalence of psychiatric disorders, with higher prevalence of mood and anxiety disorders among women, have been the focus of much debate. In Iran, the adoption of the construct of Bipolar Spectrum Disorder (BSD) and of the concept of “soft bipolarity” has been associated with a large gender difference in rates of diagnosis. This paper discusses the gendered meanings of the diagnosis of BSD in Iran. In this qualitative study, we conducted 25 in-depth semi-structured interviews with prominent psychiatrists and university professors (7 female and 18 male) at six different universities in Iran and 37 in-depth semi-structured interviews with patients (23 female and 14 male, 18–55 years of age) who had received bipolar spectrum disorder diagnosis and treatment, excluding Bipolar I. Findings suggest that the high rate of diagnosis of bipolar spectrum disorder (i.e., subthreshold or soft bipolar disorder) among women in Iran is influenced by gender, sociocultural, political, and economic factors, as well as the diagnostic practices of biomedical psychiatry. The dominant biological psychiatry system in Iran has led many psychiatrists to frame sociopolitically and culturally rooted forms of distress in terms of biomedical categories like soft bipolarity and to limit their interventions to medication. This bioreductionist approach silences the voices of vulnerable groups, including those of women, and marginalizes discussions of problematic institutional and social power. To understand the preference for biomedical explanations, we need to consider not only the economic interests at play in the remaking of human identity in terms of biological being and the globalization of biological psychiatry, but also the resistance to addressing the sociocultural, political, and economic determinants of women’s mental suffering in particular contexts.

## DETAILS

**Subject:** Interviews; Qualitative research; Gender differences; Globalization; Bipolar disorder; Economic factors; Sociocultural factors; Medical diagnosis; Mental disorders; Resistance; Gender; Women; Self concept; Bipolarity; Social power; Anxiety; Psychiatry; Drugs; Emotions; Psychological distress; Vested interests; Biomedicine; Patients; Psychiatrists; Anxiety disorders

**Location:** Iran



|                                 |                                                                                                                                                                                                                                                                               |
|---------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Identifier / keyword:</b>    | Bipolar spectrum disorders; Soft bipolar disorder; Women's mental health; Sociopolitical and cultural determinants; Medicalization; American Psychiatry; Iran's Psychiatry                                                                                                    |
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# 'White Child Gone Bankrupt'—The Intersection of Race and Poverty in Youth Fathered by UN Peacekeepers

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[ProQuest document link](#)

## ABSTRACT (ENGLISH)

Children fathered and abandoned by United Nations peacekeepers are an unintended consequence of peacekeeping operations. Research suggests that the social identity of peacekeeper-fathered children (PKFC) is complex and contradictory. While economically disadvantaged, PKFC's biracial background confers elements of racial privilege. Using the Democratic Republic of Congo as a case study, the present research evaluates the impact of racial differences on PKFC's social standing. Drawing on in-depth interviews with a racially heterogeneous sample of 35 PKFC and 60 mothers, we analyse how race and poverty interact and cause PKFC's conflicting social role. The data demonstrates that being of mixed race leads to the expectation of a higher living standard. Since most PKFC live in extreme economic deprivation, their anticipated privilege contrasts with reality. We found that the stigmatizing effects of poverty were amplified by biracial identification, leading to additional disadvantage, epitomised in the term "Muzungu aliye homba" [white child gone bankrupt]. The findings add to research on 'children born of war' and show the role of culture in shaping youth's social identities. Based on PKFC's intersecting burdens, we make policy recommendations that address the nexus of race and poverty.

## DETAILS

**Subject:** Social identity; Peacekeeping; Research; Standard of living; Race; Social status; Social privilege; Case studies; Peacekeeping forces; Disadvantaged; Racial differences; Poverty; Multiracial people; Children; Deprivation; Stigma; Bankruptcy; Child poverty; Economic deprivation; Mothers; Youth culture

**Identifier / keyword:** Social identity; Peacekeeping; Children; Poverty; Race

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|---------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Publication title:</b>       | Culture, Medicine and Psychiatry; New York                                                                                                                                                                                                                                                         |
| <b>Volume:</b>                  | 46                                                                                                                                                                                                                                                                                                 |
| <b>Issue:</b>                   | 3                                                                                                                                                                                                                                                                                                  |
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# The Politicised Child, Transcultural Constructions of Childhood, Psychological Trauma, and the Mind in the Modern World: Afterword

Summerfield, Derek <sup>1</sup> <sup>1</sup> Institute of Psychiatry, Psychology and Neuroscience, London, UK  
(GRID:grid.13097.3c) (ISNI:0000 0001 2322 6764)

[ProQuest document link](#)

## DETAILS

**Subject:** Psychological trauma; Children; Multiculturalism & pluralism; Psychological distress; Childhood; Trauma; Psychology; Psychiatry; Culture; Memory; Stabbings; Society; Mental disorders; Children & youth; Mental health; Consciousness; 19th century; Emotions; Cognition & reasoning

**Publication title:** Culture, Medicine and Psychiatry; New York

**Volume:** 46

**Issue:** 3

**Pages:** 679-682

**Publication year:** 2022

**Publication date:** Sep 2022

**Publisher:** Springer Nature B.V.

**Place of publication:** New York

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**Publication subject:** Medical Sciences, Medical Sciences--Psychiatry And Neurology, Anthropology

**ISSN:** 0165005X

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|--------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
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| Document type:           | Journal Article                                                                                                                                                                                                                                                                                    |
| Publication history :    |                                                                                                                                                                                                                                                                                                    |
| Online publication date: | 2022-08-13                                                                                                                                                                                                                                                                                         |
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| Publication history :    |                                                                                                                                                                                                                                                                                                    |
| First posting date:      | 13 Aug 2022                                                                                                                                                                                                                                                                                        |
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| ProQuest document ID:    | 2708875310                                                                                                                                                                                                                                                                                         |
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| Last updated:            | 2023-03-01                                                                                                                                                                                                                                                                                         |
| Database:                | Public Health Database                                                                                                                                                                                                                                                                             |

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# The Politicised Child During the Seventeenth-Century British Civil Wars: An Historical Perspective on Representations of Children and Trauma During Conflict

Pells, Ismini <sup>1</sup>

<sup>1</sup> University of Leicester, Leicester, UK (GRID:grid.9918.9) (ISNI:0000 0004 1936 8411)

[ProQuest document link](#)

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## ABSTRACT (ENGLISH)

The seventeenth-century British Civil Wars had a scale and impact to rival modern conflicts and its effects extended to children as well as adults. What might be today termed “child soldiers” were found in the armies in combat and supporting roles. Many more were witnesses to the conflict or had their lives changed by its consequences. This article is an historical case study of socio-cultural constructions of children, childhood and warfare. It aims to highlight the diverse nature of both historic and modern child experiences of warfare, and the plethora of ways that these experiences were and are understood and represented by adults. It argues that the evidence from the Civil Wars supports the scholarship of child psychologists such as Derek Summerfield that children in conflict should not always be regarded as victims but could display agency, whilst also acknowledging social, cultural, economic and political pressures. Although children in the Civil Wars may have experienced trauma, the evidence is insufficient to prove this and evidence for a contemporary concept of the psychologically damaged child as a result of conflict is ambiguous. However, what the evidence does uncover is the ways in which adults used representations of children to express their own anxieties about the Civil Wars.

## DETAILS

|                                 |                                                                                                                                                                                                                                                       |
|---------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Subject:</b>                 | Sociocultural factors; Civil war; Conflict; Military personnel; Childhood; 17th century; Case studies; Ambiguity; Witnesses; Child psychologists; Trauma; Victims; Armed forces; Children; Historical development; Adults; Children & youth; Soldiers |
| <b>Identifier / keyword:</b>    | Children; Warfare; Trauma; Britain; Early modern history                                                                                                                                                                                              |
| <b>Publication title:</b>       | Culture, Medicine and Psychiatry; New York                                                                                                                                                                                                            |
| <b>Volume:</b>                  | 46                                                                                                                                                                                                                                                    |
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| <b>Pages:</b>                   | 615-631                                                                                                                                                                                                                                               |
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| <b>Publication subject:</b>     | Medical Sciences, Medical Sciences--Psychiatry And Neurology, Anthropology                                                                                                                                                                            |
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# 'No-One Can Tell a Story Better than the One Who Lived It': Reworking Constructions of Childhood and Trauma Through the Arts in Rwanda

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; Uwihoreye, Chaste <sup>3</sup>; Ndushabandi, Eric <sup>4</sup>

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[ProQuest document link](#)

## ABSTRACT (ENGLISH)

The intergenerational legacies of conflict and violence for children and young people are typically approached within research and interventions through the lens of trauma. Understandings of childhood and trauma are based on biopsychological frameworks emanating from the Global North, often at odds with the historical, political, economic, social and cultural contexts in which interventions are enacted, and neglect the diversity of knowledge, experiences and practices. Within this paper we explore these concerns in the context of Rwanda and the aftermath of the 1994 Genocide Against the Tutsi. We reflect on two qualitative case studies: Connective Memories and Mobile Arts for Peace which both used arts-based approaches drawing on the richness of Rwandan cultural forms, such as proverbs and storytelling practices, to explore knowledge and processes of meaning-making about trauma, memory, and everyday forms of conflict from the perspectives of children and young people. We draw on these findings to argue that there is a need to refine and elaborate understandings of intergenerational transmission of trauma in Rwanda informed by: the historical and cultural context; intersections of structural and 'everyday' forms of conflict and social trauma embedded in intergenerational relations; and a reworking of notions of trauma 'transmission' to encompass the multiple connectivities between generations, temporalities and expressions of trauma.

## DETAILS

|                                |                                                                                                                                                                                                                                                                                                                              |
|--------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Subject:</b>                | Intervention; Cultural differences; Storytelling; Sociocultural factors; Childhood; Intergenerational relationships; Case studies; Trauma; Psychological trauma; Children; Arts; Genocide; Multiculturalism & pluralism; Youth; Psychological distress; Cultural factors; Intergenerational transmission; Memories; Conflict |
| <b>Location:</b>               | Rwanda                                                                                                                                                                                                                                                                                                                       |
| <b>Identifier / keyword:</b>   | Children and youth; Trauma; Memory; Arts-based methods; Rwanda                                                                                                                                                                                                                                                               |
| <b>Publication title:</b>      | Culture, Medicine and Psychiatry; New York                                                                                                                                                                                                                                                                                   |
| <b>Volume:</b>                 | 46                                                                                                                                                                                                                                                                                                                           |
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| <b>Pages:</b>                  | 632-653                                                                                                                                                                                                                                                                                                                      |
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| <b>Country of publication:</b> | Netherlands, New York                                                                                                                                                                                                                                                                                                        |
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| <b>Database:</b>                | Public Health Database                                                                                                                                                                                                                                                                             |

Document 17 of 17

# Introduction: Politicising Children: Transcultural Constructions of Childhood and Psychological Trauma in the Modern World

Antic, Ana <sup>1</sup> <sup>1</sup> University of Copenhagen, Copenhagen, Denmark (GRID:grid.5254.6) (ISNI:0000 0001 0674 042X)

[ProQuest document link](#)

## DETAILS

|                                 |                                                                                                                                                                                                                                                                         |
|---------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Subject:</b>                 | Psychological trauma; Children; Multiculturalism & pluralism; Psychological distress; Childhood; Trauma                                                                                                                                                                 |
| <b>Publication title:</b>       | Culture, Medicine and Psychiatry; New York                                                                                                                                                                                                                              |
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| <b>Pages:</b>                   | 603-614                                                                                                                                                                                                                                                                 |
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| <b>Publisher:</b>               | Springer Nature B.V.                                                                                                                                                                                                                                                    |
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| <b>Country of publication:</b>  | Netherlands, New York                                                                                                                                                                                                                                                   |
| <b>Publication subject:</b>     | Medical Sciences, Medical Sciences--Psychiatry And Neurology, Anthropology                                                                                                                                                                                              |
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| <b>Document type:</b>           | Editorial                                                                                                                                                                                                                                                               |
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Epele, M. E. (2022). "Breaking down": Afflictions and treatments during times of crisis in buenos aires. *Culture, Medicine and Psychiatry*, 46(4), 761-778. doi:<https://doi.org/10.1007/s11013-021-09748-z>

Based on the ethnographic research carried out on speech-based therapies at health centers in marginalized areas of the Buenos Aires Metropolitan Area, this article problematizes the "breaking down" or "being broken" as a local language of afflictions that emerges from the rapidly deteriorating material living conditions related to downward social mobility. Specifically, I analyze how these discomforts turn into narrative in terms of economic and political subjective and collective crises, which combine and hybridize personal experiences with mainstream discourses of the country's recent history. Based on a brief analysis of the changing relationships between psychoanalysis and poverty in the Buenos Aires area, I also examine how speech-based approaches classify these afflictions as "social issues," external to their logic, as they resist to be entirely subdued to current psychological knowledge, categories, and techniques.

Kienzler, H. (2022). SymptomSpeak: Women's struggle for history and health in kosovo. *Culture, Medicine and Psychiatry*, 46(4), 739-760. doi:<https://doi.org/10.1007/s11013-021-09746-1>

What are the linguistic dimensions of pain, and what kind of articulations arise from these painful experiences? How does the language of pain circulate, connect, and reach across histories, gendered realities, and social politics? In what ways might the language of pain act on and transform the world by shaping and changing socio-political agendas? I explored these questions among women in Kosovo and discovered a unique symptomatic language which I call SymptomSpeak. SymptomSpeak is a powerful language evoked, shared, and exchanged by women to articulate political, social, and economic grievances, to challenge societal norms, and to demand justice. The language itself consists of a detailed symptom vocabulary which is variously assembled into meaning complexes. Such assemblages shift depending on the social context in which they are conveyed and are referred to as nervoz (nervousness), mērzitna (worried, sad), mzysh (evil eye), and t'bone (spell). I describe in detail how women variously combine and exchange components of SymptomSpeak and, thereby, question dominant framings of reality. Thereby, my intention is to contribute to a new understanding of pain as language which straddles the fine line between socio-political commentary and illness; produces gendered political realities; and challenges the status quo through its communicative power.

Kleinmann, B., Firoozabadi, N. K., & Wolter, T. (2022). Correction to: A cross-cultural perspective on intrathecal opioid therapy between german and iranian patients. *Culture, Medicine and Psychiatry*, 46(4), 904-905. doi:<https://doi.org/10.1007/s11013-021-09753-2>

Silverstein, S. M., Milligan, K., Osborn, A., Aamir, I., Gainer, D., & Daniulaityte, R. (2022). Visualizing a calculus of recovery: Calibrating relations in an opioid epicenter. *Culture, Medicine and Psychiatry*, 46(4), 798-826. doi:<https://doi.org/10.1007/s11013-021-09758-x>

This article uses participatory photography to explore the relationships animating efforts towards recovery from opioid use disorder (OUD) in the Dayton, Ohio area, an epicenter of illicit opioid use and overdose death. A photo-elicitation project was conducted with thirteen people who met the DSM-5 criteria for OUD. Photographs were used as prompts during qualitative interviews, which were thematically analyzed. Analysis of both visual and textual data demonstrated the ways in which recovery became an unfolding process of calculation as participants made strategic choices to navigate relations and encounters with things, people, and places. Relationships across each of these domains could, under some circumstances, serve as supports or motivators in the recovery process, but, in alternate settings, be experienced as "triggers" prompting a resumption of problematic drug use or, at the very least, a reckoning with the feelings and emotions associated with painful or problematic aspects of personal histories and drug use experiences. Findings highlight the importance of understanding recovery as a calibration of the ambiguous relations animating experiences of everyday life. We argue for continued emphasis on recovery as an active performance and ongoing practice of calculation—of risks and benefits, of supports and triggers, of

gratification and heartbreak—rather than a goal or static state.

George, D. R., Hanson, R., Wilkinson, D., & Garcia-Romeu, A. (2022). Ancient roots of Today's emerging renaissance in psychedelic medicine. *Culture, Medicine and Psychiatry*, 46(4), 890-903. doi:<https://doi.org/10.1007/s11013-021-09749-y>

An international ban on psychedelics initiated by the United Nations' Convention on Psychotropic Substances in 1971 restricted the clinical use of these ancient psychoactive substances. Yet, in an era marked by rising mental health concerns and a growing "Deaths of Despair" epidemic (i.e., excess mortality and morbidity from suicide, drug overdose, and alcoholism), the structured psychedelic use that has long been a part of ritual healing experiences for human societies is slowly regaining credibility in Western medicine for its potential to treat various mental health conditions. We use a historical lens to examine the use of psychedelic therapies over time, translate ancient lessons to contemporary clinical and research practice, and interrogate the practical and ethical questions researchers must grapple with before they can enter mainstream medicine. Given the COVID-19 pandemic and its contributions to the global mental health burden, we also reflect on how psychedelic therapy might serve as a tool for medicine in the aftermath of collective trauma. Ultimately, it is argued that a "psychedelic renaissance" anchored in the lessons of antiquity can potentially help shift healthcare systems—and perhaps the broader society—towards practices that are more humane, attentive to underlying causes of distress, and supportive of human flourishing.

Rosàs Tosas, M. (2022). Interrupting patients in healthcare settings: What is being interrupted? *Culture, Medicine and Psychiatry*, 46(4), 827-845. doi:<https://doi.org/10.1007/s11013-021-09755-0>

Scientific literature since the 1980s examines the phenomenon of healthcare professionals interrupting patients: at which second patients opening expositions are interrupted and how long they take if unrestrained. Although the goal of this literature is strictly numerical—determining interventions' length—, it reveals a number of its authors' views and preferences. Our discourse analysis reveals, first, that, often in between the lines, this literature suggests reasons for letting patients speak freely and tries to dismantle the myth of the overly-loquacious patient. Second, by turning to some philosophical inquiries into the notion of "interruption," we explore how, within this literature, the ultimate reason for interrupting patients and silencing several of their concerns is often the fear of a certain medical logic being interrupted—a logic that dates back to Vesalius and Bichat, and that informs nowadays biomedicine: patients' speech is valuable as long as it contributes to a diagnosis in the form of the identification of an underlying tissue damage. That is, this literature presents the interruption of patients as a device of claiming power on the part of an eminently biomedical approach to illness. The paper provides further reasons for not interrupting patients proposed by the biopsychosocial model, "narrative medicine," and anthropologists who study the functions of illness narratives.

Mianji, F., & Kirmayer, L. J. (2022). Correction to: "Women as troublemakers": The hard sociopolitical context of soft bipolar disorder in iran. *Culture, Medicine and Psychiatry*, 46(4), 889. doi:<https://doi.org/10.1007/s11013-021-09752-3>

Mahilall, R., & Swartz, L. (2022). 'I am dying a slow death of white guilt': Spiritual carers in a south african hospice navigate issues of race and cultural diversity. *Culture, Medicine and Psychiatry*, 46(4), 779-797. doi:<https://doi.org/10.1007/s11013-021-09750-5>

Culturally appropriate spiritual care is increasingly recognised as a crucial component of spiritual care. As part of a larger study, we were interested in cultural and racial issues as experienced by spiritual carers in a hospice in Cape Town, South Africa. We conducted one-on-one interviews and focus group discussions with a cohort of spiritual care workers, who, being volunteers and relatively privileged South Africans, discussed their sensitivity to cultural issues, but also mentioned a host of political, racial and identity issues which profoundly affect their work. The data suggest that the concept of culturally appropriate care must be understood and acted on contextually. We note that the work of transformation of care cannot be separated from broader questions of social inequality and change.

Moutaud, B. (2022). Cognitive optimisation and schizophrenia: Assembling heterogeneity, overcoming the precariousness of life, and challenging public health policies in psychiatry in France. *Culture, Medicine and Psychiatry*, 46(4), 710-738. doi:<https://doi.org/10.1007/s11013-021-09745-2>

Cognitive remediation therapy (CRT) aims to optimise cognitive abilities of people who suffer from schizophrenia in order to improve their social adaptation. This therapeutic orientation was developed in psychiatry in the 1980s and 1990s, at a time when the disorder was being redefined as a neurocognitive deficit disorder. In this article, I describe CRT as an assemblage that lies at the intersection of multiple, overlapping theories and spaces of mental disorders and psychiatric care. To do so, I draw on 18 months of ethnographic research conducted in a French hospital unit dedicated to the development of CRT. I argue that the focus on cognitive health and cognitive abilities (or deficits) is not only redefining the logics of care and reshaping medical conceptualisations of schizophrenia, but it is also opening up to a new understanding of people's precarious life conditions, where emotional, biological, and cognitive fragility is intertwined with social and economic uncertainty. I then examine the extent to which psychiatrists have extended the goals of CRT to include psychosocial rehabilitation in order to mitigate not only the effects of cognitive deficits, but also the effects of limited social and professional integration encountered by patients. Finally, I conclude with a consideration of how CRT has become, for its proponents in France, a means to develop a policy and organisational project for French psychiatry.

SturtzSreetharan, C., Trainer, S., & Brewis, A. (2022). The harm inflicted by polite concern: Language, fat, and stigma. *Culture, Medicine and Psychiatry*, 46(4), 683-709. doi:<https://doi.org/10.1007/s11013-021-09742-5>

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