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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.

Relegating Psychosis: Blood Work and “Routine Connection” in the Clozapine Clinic

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ABSTRACT (ENGLISH)

This paper attends to the sociality available in the clozapine clinic regimen and suggests that the social dimensions of clozapine treatment may be as important as the biochemical efficacy of clozapine. The clozapine clinic is where people diagnosed with chronic schizophrenia who take the antipsychotic clozapine go for routine monitoring of clozapine side effects, particularly haematological effects. Psychopharmaceutical treatments are often criticized for being reductionistic and dehumanizing, but clozapine clinics offer increased clinical contact in the age of deinstitutionalization. The inadvertent social benefits of biomedically reductive treatments have not previously been ethnographically attended to in the clozapine-only context. Drawing on 18 months of ethnographic fieldwork with 43 clozapine clients and 16 clinical caregivers in two clozapine clinics in the United Kingdom in Australia, I argue that routine clinical attachments in the clozapine clinic can serve a therapeutic role in terms of providing opportunities for clients' health agency, social competence and accountability. This socio-therapeutic quality appeared to be available *because* the clinical emphasis was not on psychotic illness. It depended, however, on reliable and familiar social exchanges inside the clinic and on the predictability of clinical activity. The importance of unemotional but unflinching relationships and rhythms in the clozapine clinic context echoes cross-cultural findings about how schizophrenia is managed more productively in environments that invite more neutral and equal social exchanges.

Internalization of Western Ideals on Appearance and Self-Esteem in Jamaican Undergraduate Students

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ABSTRACT (ENGLISH)

Beauty ideals in the Caribbean are shifting with increased exposure to Western and European standards of appearance. Previous research has shown a consistent link between internalization of Western beauty ideals and depressive symptoms and other forms of psychological disturbance among diverse populations including Caribbeans. We examined the association between internalization of Western beauty ideals and depressive symptoms as well as the potential mediating role of self-esteem on this relation in N=222 students (155 females, 79 males) attending a tertiary institution in Kingston, Jamaica. Internalization of Western ideals was inversely associated with self-esteem ($r = -.35, p < .01$) and positively associated with depressive symptoms ($r = .13, p < .05$). In a model adjusted for age and sex, results revealed a significant indirect effect of internalization of Western ideals of appearance on depressive symptoms via self-esteem (estimate = .21, SE = .05, 95% confidence interval [.13, .32]). The potent effects of culture must be better understood as intercontinental travel becomes less important as a mechanism for cultural exposure and exchange, and there is a significant increase of digital and internet access in the Caribbean. The current study suggest that Caribbeans are at significant risk for internalizing Western ideals of beauty, subsequently diminishing their self-esteem, and ultimately increasing depression symptomatology. The benefits and consequences of cultural exchange should continue to be a topic for research studies.

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'It's Always About the Eating Disorder': Finding the Person Through Recovery-Oriented Practice for Bulimia

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Bulimia is an eating disorder characterised primarily by bingeing and 'inappropriate' compensatory behaviours, such as purging or excessive exercise. Many individuals with bulimia experience chronic disordered eating, dissatisfaction with treatment, and difficulty establishing a 'new life'. Recovery-oriented practice, which focuses holistically on the person and their own aspirations for treatment, has recently been advocated in the treatment of eating disorders in Australia and other countries. However, questions have been raised about how this practice might be integrated into existing treatment approaches. Taking a social constructionist approach and using a case study of one woman's account, together with literature on patients' treatment experiences, we examined recovery from bulimia. Three themes were identified: bulimia was constructed as 'consuming one's life', an experience protracted through treatment ('treatment and becoming the eating disorder'), which makes life 'beyond treatment and attempting to live without bulimia' challenging. Based on this analysis, we argue that recovery-oriented practice, while seemingly

commensurate with patients' needs, may be challenged by long-standing meanings of mental illness and experience of bulimia specifically.

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The Role of Culture/Ethnicity in Communicating with Cancer Patients About Mental Health Distress and Suicidality

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

To explore the role of culture in communicating with cancer patients about mental health distress and suicidality. The Grounded Theory method of data collection and analysis was used. Healthcare professionals (HCPs) reported that language competency was a facilitator while being unable to speak the language or understand the nuances of their patient's communication could be a barrier. HCPs noted that being culturally matched with their patients helped them communicate effectively. HCPs also spoke about religious taboos on suicide as being a barrier to having conversations, either because patients did not feel comfortable discussing these issues, or because they perceived that this was not a topic they could bring up. Some HCPs reported that the culture/ethnicity of their patients had no effect on their ability to communicate effectively with them about mental health distress or suicidality. Advancing effective cross-cultural communication is a challenge faced by HCPs. Raising awareness about communication styles is an important step in addressing communication gaps about mental health and suicide with cancer patients. Training should facilitate skill development to engage in a culturally humble approach to cross-cultural communication including diversity training which encourages asking and actively listening to patients' needs and preferences.

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Neuronarratives of Affliction: Antidepressants, Neuropolitics and the "Entrepreneur of Oneself"

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

The dramatic increase in the consumption of antidepressants is one indicator, among others, of the contemporary cerebralization of human affliction. This process has been led by expert systems, creating new biosocialities or neurosocialities, and new models of self as well: the neural self. While some research minimizes the neuro-colonization of the self and its impact on lay knowledge systems, here I argue that synergy between neuropolitics and figures characteristic of neoliberal governmentality such as the “entrepreneur of oneself” can give rise to an interiorized, cerebralized, centripetal, inwardly-oriented self. This paper, based on long-term fieldwork among consumers of antidepressants in Catalonia, analyses the emergence of neuronarratives of affliction (NoAs). NoAs privilege neurochemical dysfunction as the source of distress, shortcircuiting an awareness of the social sources of suffering while at the same time obscuring the fact of this concealment. NoAs transform the self into structure and reduce the social world to event.

Document 6 of 8

The Social Construction of PTSD: The Case of the ‘Old Guard’ Policemen After South African Democracy

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Often, we assume the traumatic nature of first response work has inevitable repercussions. This can lead to assumptions about trauma being the reason for distress, resulting in fixed ideas about diagnosis and treatment, without the complex socio-political and psychodynamic implications being fully considered. This paper challenges such assumptions by exploring the presentation of PTSD in ‘old guard’ police officers at the cusp of the post-apartheid era in South Africa. Focusing on long serving ‘white’ Afrikaner policemen, an argument is advanced that, while a diagnosis of PTSD may have enabled the old guard to legitimately access care and support for distress, at another level it served to displace core conflicts related to masculinity (and other aspects of identity) triggered by adjustment difficulties inherent in the transition from apartheid to post-apartheid South Africa. A case study is used to illustrate these observations.

The Disenchanted Self: Anthropological Notes on Existential Distress and Ontological Insecurity Among ex-Mormons in Utah

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

This paper describes a pervasive form of psychological distress occurring among people undergoing a sudden and acute collapse of faith in the teachings of the Church of Jesus Christ of Latter-day Saints (aka LDS, or Mormon Church). Drawing on 18 months of fieldwork in Utah, I trace the cultural–historical etiology of this unique form of psycho-existential trauma, focusing on ex-Mormons’ narratives of ‘world collapse’—in which the all-encompassing symbolic-existential framework of reality once provided by religion disintegrated once they lost faith in the Mormon Church. Although marked by symptoms resembling depression, anxiety, dissociation and paranoia, this condition is however unlike mental health disorders described in psychiatric diagnostic manuals, and has thus been largely overlooked within the mental health professions. I thereby discuss the extent to which the distress of religious disenchantment constitutes a unique form of ‘cultural syndrome’ (Hinton and Lewis-Fernandez in *Cult Med Psychiatry* 34(2):209–218, 2010), reflective of complex historical, cultural, and religious transformations occurring within contemporary Utah Mormonism.

Giving a Voice to Gambling Addiction: Analysis of Personal Narratives

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Gambling addiction (GA) is now considered a worldwide health issue. Although the topic of disorder awareness is a central issue in clinical practice, there are few studies examining this dimension in relation to GA. To bridge this gap, we conducted a qualitative study, administering interviews focused on awareness of GA and eliciting narratives of both the disorder and the whole life of participants. We adopted both qualitative and quantitative methods of

research, using computer-aided content analysis. We administered to a sample of 15 treatment-seeking gamblers the Psychiatric Interview for Gambling Addiction and performed a qualitative analysis of the text using the T-Lab software. Five main thematic domains and four factors emerged, shedding light on specific aspects underlying the development of and recovery from GA. Specifically, the results suggested that dissociation processes, materialistic thinking and difficulties in social achievement underlie the subjective experience of GA. Moreover, closeness in interpersonal relationships and awareness of the disorder emerged as core features in the process of change. As a whole, the results highlight the specificities of disorder awareness in addicted gamblers. We discuss these results within the context of previous research and suggest clinical implications for the treatment of GA.

Bibliography

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

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This paper attends to the sociality available in the clozapine clinic regimen and suggests that the social dimensions of clozapine treatment may be as important as the biochemical efficacy of clozapine. The clozapine clinic is where people diagnosed with chronic schizophrenia who take the antipsychotic clozapine go for routine monitoring of clozapine side effects, particularly haematological effects. Psychopharmaceutical treatments are often criticized for being reductionistic and dehumanizing, but clozapine clinics offer increased clinical contact in the age of deinstitutionalization. The inadvertent social benefits of biomedically reductive treatments have not previously been ethnographically attended to in the clozapine-only context. Drawing on 18 months of ethnographic fieldwork with 43 clozapine clients and 16 clinical caregivers in two clozapine clinics in the United Kingdom in Australia, I argue that routine clinical attachments in the clozapine clinic can serve a therapeutic role in terms of providing opportunities for clients' health agency, social competence and accountability. This socio-therapeutic quality appeared to be available because the clinical emphasis was not on psychotic illness. It depended, however, on reliable and familiar social exchanges inside the clinic and on the predictability of clinical activity. The importance of unemotional but unflinching relationships and rhythms in the clozapine clinic context echoes cross-cultural findings about how schizophrenia is managed more productively in environments that invite more neutral and equal social exchanges.

O'Garro Keisha-Gaye, N., Morgan Kai, A. D., Hill, L. K., Reid, P., Simpson, D., Lee, H., & Edwards, C. L. (2020). Internalization of western ideals on appearance and self-esteem in jamaican undergraduate students. *Culture, Medicine and Psychiatry*, 44(2), 249-262. doi:<https://doi.org/10.1007/s11013-019-09652-7>

Beauty ideals in the Caribbean are shifting with increased exposure to Western and European standards of appearance. Previous research has shown a consistent link between internalization of Western beauty ideals and depressive symptoms and other forms of psychological disturbance among diverse populations including Caribbeans. We examined the association between internalization of Western beauty ideals and depressive symptoms as well as the potential mediating role of self-esteem on this relation in N=222 students (155 females, 79 males) attending a tertiary institution in Kingston, Jamaica. Internalization of Western ideals was inversely associated with self-esteem ($r = -.35$, $p < .01$) and positively associated with depressive symptoms ($r = .13$, $p < .05$). In a model adjusted for age and sex, results revealed a significant indirect effect of internalization of Western ideals of appearance on depressive symptoms via self-esteem (estimate = .21, SE = .05, 95% confidence interval .13, .32]. The potent effects of culture must be better understood as intercontinental travel becomes less important as a mechanism for cultural exposure and exchange, and there is a significant increase of digital and internet access in the Caribbean. The current study suggest that Caribbeans are at significant risk for internalizing Western ideals of beauty, subsequently diminishing their self-esteem, and ultimately increasing depression symptomatology. The benefits and consequences of cultural exchange should continue to be a topic for research studies.

Kate, C., Ussher, J. M., Janette, P., & Rapport, F. (2020). 'It's always about the eating disorder': Finding the person through recovery-oriented practice for bulimia. *Culture, Medicine and Psychiatry*, 44(2), 286-303. doi:<https://doi.org/10.1007/s11013-019-09654-5>

Bulimia is an eating disorder characterised primarily by bingeing and 'inappropriate' compensatory behaviours, such as purging or excessive exercise. Many individuals with bulimia experience chronic disordered eating, dissatisfaction with treatment, and difficulty establishing a 'new life'. Recovery-oriented practice, which focuses holistically on the person and their own aspirations for treatment, has recently been advocated in the treatment of eating disorders in Australia and other countries. However, questions have been raised about how this practice might be integrated into existing treatment approaches. Taking a social constructionist approach and using a case study of one woman's account, together with literature on patients' treatment experiences, we examined recovery from bulimia. Three themes were identified: bulimia was constructed as 'consuming one's life', an experience protracted through treatment ('treatment and becoming the eating disorder'), which makes life 'beyond treatment and attempting to live

without bulimia' challenging. Based on this analysis, we argue that recovery-oriented practice, while seemingly commensurate with patients' needs, may be challenged by long-standing meanings of mental illness and experience of bulimia specifically.

Leeat, G., Ora, N., Samuel, A., Shahar, S., & Ben-David, M. (2020). The role of Culture/Ethnicity in communicating with cancer patients about mental health distress and suicidality. *Culture, Medicine and Psychiatry*, 44(2), 214-229. doi:<https://doi.org/10.1007/s11013-019-09650-9>

To explore the role of culture in communicating with cancer patients about mental health distress and suicidality. The Grounded Theory method of data collection and analysis was used. Healthcare professionals (HCPs) reported that language competency was a facilitator while being unable to speak the language or understand the nuances of their patient's communication could be a barrier. HCPs noted that being culturally matched with their patients helped them communicate effectively. HCPs also spoke about religious taboos on suicide as being a barrier to having conversations, either because patients did not feel comfortable discussing these issues, or because they perceived that this was not a topic they could bring up. Some HCPs reported that the culture/ethnicity of their patients had no effect on their ability to communicate effectively with them about mental health distress or suicidality. Advancing effective cross-cultural communication is a challenge faced by HCPs. Raising awareness about communication styles is an important step in addressing communication gaps about mental health and suicide with cancer patients. Training should facilitate skill development to engage in a culturally humble approach to cross-cultural communication including diversity training which encourages asking and actively listening to patients' needs and preferences.

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