Editorial

Cultural Psychiatry: Perspectives for the next decade
Thomas Stompe, Ronald Wintrob, Guest Editors

This issue of the World Cultural Psychiatry Research Review groups together a selection of papers presented and discussed at the conference of the Transcultural Psychiatry Section of the World Psychiatric Association, that was held at the Vienna University Medical Center, April 18-20, 2006. More than 160 researches and practitioners from countries around the world participated in the Vienna conference, making it one of the most successful conferences in the Section’s history. When the conference concluded, and while still basking in the glow of its accomplishment, the program co-chairs, Drs Stompe and Wintrob, discussed several possible approaches to preserving at least some of the 106 presentations that had been given by our friends and colleagues. These papers covered a wide range of cultural psychiatry topics, and we felt that preserving them could be of benefit to the next generation of clinicians and researchers interested in advancing the boundaries of our field of cultural psychiatry.

Once again, our friend Dr Goffredo Bartocci, who had served as chair of WPA’s Transcultural Psychiatry Section from 1999 to 2005, and is currently President-Elect of WACP and Editor-in-Chief of the World Cultural Psychiatry Research Review, took on the role of ‘deus ex machina’; encouraging us to make a selection of papers presented at the Vienna conference, and subsequently inviting us to serve as guest editors for this ‘special issue’ of WCPRR.

Accordingly, the three of us have adopted the theme of the Vienna conference, “New Directions of Transcultural Psychiatry”, as the theme of this special issue. We have selected articles that may open up new perspectives on the complex relationships between culture, society and religion on one hand, and mental health and illness on the other.

The term cultural psychiatry was first introduced by Kraepelin in two articles reflecting his experiences with mentally ill subjects in Java at the beginning of the 20th century (1904a, 1904b). During the decades that followed Kraepelin’s pioneering reports, the emerging role of cultural psychiatry was strengthened by an increasing body of systematic research leading us to deeper insights into individual and collective characteristics of human nature. Nowadays it is commonly shared knowledge that societies provide culturally specific functional systems like religion, politics, education and economics; but also symbolic systems and semantics that have direct and indirect influences on the phenomenology and related aspects of psychiatric disorders. But one has to keep in mind that in view of the long history of psychiatry from Hippocrates to Kraepelin, and on to our current generation of clinicians and researchers, this body of knowledge, by now accepted by psychiatrists of all theoretical orientations from biological to psychoanalytic, is the result of a
body of research findings in the field of cultural psychiatry that has grown exponentially since Kraepelin’s time, and especially in the past 2-3 decades. The rapid scientific progress of cultural psychiatry in the 20th century has been greatly spurred on by the enormous socio-political and ethical challenges following in the wake of wars, that have resulted in waves of voluntary and forced migration, and of re-adaptation to new environments; with all the consequences of acculturative stress, inter-generational conflicts of values, psychic distress and psychiatric symptomatology. And yes; mutual learning too, as well as resilience, cultural and psychological integration, and multicultural evolution. All of these momentous historical developments over the past century have promoted the differentiation of cultural psychiatry into three broad areas:

1- Cross-cultural-comparative psychiatry
2- Ethno-psychiatry
3- Migration psychiatry

Cross-cultural-comparative psychiatry
Kraepelin initially compared the patients he saw in the psychiatric hospitals in Java with his German patients (1904a, 1904b). Other important examples of this branch of research were the studies performed at McGill University in the 1950s and '60s (Murphy et al., 1963) and the large-scale WHO studies, like the International Pilot Study of Schizophrenia (Jablensky, 1987, Leff et al., 1992).

Three of the papers included in this issue are rooted in the long tradition of cross-cultural-comparative psychiatry:

• Depression across ethnic minority cultures: diagnostic issues (K. Ahmed, D. Bhugra)
• Transcultural comparison of quality of life in somatoform pain patients (M. Aigner, S. Piralic Spitzl, M. Freidl, W. Prause, A. Friedmann, G. Lenz).

Ethnopsychiatry
Ethnopsychiatry, the branch of cultural psychiatry that is closest to ethnology and ethnographic science, describes culturally-specific formations of mental disorders; for instance culture-bound syndromes, or the specific impact of socio-cultural and religious patterns on lay and therapeutic attitudes towards mentally ill (e.g. Kleinman, 1988). This issue includes two ethnopsychiatric papers:

• Doubled Otherness in Ethnopsychiatry (B. Waldenfels)
• What is “psychotherapy” in the context of Orthodox Christianity? (A. Lapin)

Migration psychiatry
Inter-nation and civil wars have brought new challenges for transcultural psychiatry, as waves of internal migration and international movements of refugees and immigrants have continued to drive the world’s population shifts over the past century. A consequence was the increasing importance of migration psychiatry during the last 40 years (e.g. Assion, 2005). This issue of WCPRR includes two papers showing the social significance of this direction of cultural psychiatry:

• Psycho-socio-cultural rehabilitation in an ethnic subgroup: a 30-year follow-up study (A. Friedmann)
• Ethics and diversity need to be considered in successful international doctoral supervision (S. Ekblad)
We hope that the articles included in this edition of WCPPR will demonstrate that cultural psychiatry is a vital and important component of the scientific study human adaptation to stressors of all kinds, of mental health and of psychiatric illness, offering exciting potential for the near future; and inspire a new generation of contributors to our field.

REFERENCES


Kraepelin E. Psychiatrisches aus Java. *Zentralblatt für Nervenheilkunde und Psychiatrie*, 27: 468-469, 1904b
