

Chapter 3

Culture and Mental Illness

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In the previous two chapters, we discussed a new model of mental illness based on gene \times meme interaction. We visualized the individual organism as being in a petri dish surrounded by a medium of molecules representing memes. We examined how stress memes may awaken dormant memes resulting in mental illness. In this chapter, we will examine the petri dish as a container of cultural memes that affect mental health and illness.

3.1 Culture and Presenting Symptoms

It is well known that psychiatric syndromes are influenced by culture and cultural change, both in geographic and temporal senses. For example, waxy flexibility of catatonia and psychogenic fainting have diminished over time in Western cultures (van der Heijden et al., 2005) while previously rarely recognized conditions such as anorexia, fibromyalgia, and drug addiction have become commonplace.

For the same psychiatric condition, such as depression or schizophrenia, different symptomatic presentations depending on culture have been noted. For example, depressed Latinos presented with somatic symptoms much more than otherwise demographically matched Anglo-Americans whether they lived in North America or in their native lands (Escobar et al., 1983; Stoker et al., 1968). It has been reported that South American Indians who practice witchcraft often have hallucinations of “jungle spirits” and saints (Murphy, 1982). In fact, any clinician dealing with mental illness would note that religious delusions and hallucinations are common among the religious patients, while more persecutory delusions and hallucinations of non-religious objects, such as animals and space aliens, are more common among the nonreligious.

3.2 Culture-Specific Psychiatric Syndromes

There are culture-specific psychiatric syndromes that seem to be confined to geographic areas, such as koro, characterized by the patient's intense preoccupation of retraction of his penis and that he will die. This syndrome is endemic in Malaysia and Indonesia. Epidemics of koro have been reported affecting hundreds or thousands of people (Jilek and Jilek-Aall, 1977; Tseng and Streltzer, 1997). Latah, seen in Southeast Asian women, is characterized by a startle response in which they lose control, mimic others around them, and blindly obey commands. Ataques de nervios, a condition seen in Puerto Ricans, is characterized by anxiety, dissociation, and loss of control (Cintron et al., 2005; Guarnaccia, 1993; Oquendo et al., 1992).

Culture-specific syndromes seem to incorporate endemic memes and are readily accepted in the specific culture.

3.3 Enculturation and Memes

Culture is considered to consist of explicit and implicit patterns of behavior acquired and transmitted by symbols constituting distinctive achievement of human groups. The core of culture is considered to be traditional ideas and values (Tseng and Streltzer, 1997). Enculturation is a process through which the traditional ideas and values take up residence in the brain of the individual through repeated pattern formation in the neural networks, resulting in the formation and strengthening of certain synaptic and dendritic connections (see Chapter 9). Tseng and Streltzer note that the organization of culture has its psychobiological correlates in the organization of the brain, the microanatomy of individual neurons, and thus the organization of neural networks (Tseng and Streltzer, 1997).

In the previous chapter, I likened environment to a petri dish, and the nutrients and toxins that may enter the organism to memes. Culture, consisting of symbols – language, artifacts, rules, is then a pool of memes. Memes enter the brain and take up residence in the brain through long-term potentiation of neural network patterns. Endemic (cultural) memes introduced in childhood are strongly potentiated as they are repeatedly introduced during a period when the filtration system for meme introduction is immature. Eventually, existing memes contribute to the formation of the filtration system which filters out new memes that may conflict with or contradict the pre-existing potentiated memes.

3.4 Memes for Being Ill

Within the meme pool (culture) of most geographic areas, there are memes for being “crazy” or “insane” as well as memes for anxiety and dysphoria. This is no wonder as many memes started out as imitations (see Chapter 8). Imitating the crazy one is surely the best way to be crazy, and imitating the one recognized as not feeling well is a good way of communicating that you are not feeling well. In isolated cultures,

certain unusual (for other cultures) memes denoting such states have evolved, such as koro, latah, and ataques de nervios.

New memes or ways of expressing an internal state do arise and may become fashionable, such as some cases of fibromyalgia, “burn-out,” and multiple chemical sensitivity (Eriksen and Ursin, 2004).

As we saw in the previous chapter, sustained stress, by attenuating the connection to memory and thus dominant resident memes, provides the brain with favorable conditions for new meme infusion from the outside without normal filtration. Such unchecked infusion of new stress memes may interact with dormant pathogenic memes hidden in the brain, stimulating their replication. A contributing factor may be that chronic stress causes sensitization to bodily dysphoric sensations (Eriksen and Ursin, 2004), which may in turn stimulate the pathogenic memes.

An example of such pathogenic memes may be depressive memes. Memes such as “I am worthless,” “I am a bad person,” “Nobody loves me” exist in many individuals, but are not prominent (reinforced) in everyday life. Such memes are not uncommonly introduced in childhood by adults, peers, and by exposure to persons who are despised (empathy is a form of imitation, and thus leads to memes). Conversely, protective memes such as “I am loved (by parents, friends, spouse),” “I am competent,” and “I am good” are introduced to varying degrees during a person’s development.

We can now state that the resident memes, both protective and pathogenic, are memes the brain acquired from the meme pool that we call culture. The cultural environment in which the person grew up provided the individual with the memes that reside in the person’s brain. Some of these memes were repeatedly introduced and were attached to positive emotions becoming dominant part of the personality, others may have been introduced repeatedly but consciously suppressed, become attached to negative emotions, and stayed in a dormant, repressed state within the brain. It is these repressed memes attached to unpleasant affect that chronic stress permits to multiply and reach consciousness.

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