



Review article

“Thinking too much”: A systematic review of a common idiom of distress



Bonnie N. Kaiser ^{a, b, *}, Emily E. Haroz ^c, Brandon A. Kohrt ^d, Paul A. Bolton ^e,
Judith K. Bass ^c, Devon E. Hinton ^{f, g}

^a Department of Anthropology and Department of Epidemiology, Emory University, 1557 Dickey Drive, Atlanta, GA 30322, USA

^b Duke Global Health Institute, Duke University, 310 Trent Drive, Durham, NC 27701, USA

^c Department of Mental Health, Johns Hopkins Bloomberg School of Public Health, 624 N. Wolfe Street, Baltimore, MD 21205, USA

^d Department of Psychiatry & Behavioral Sciences, Duke Global Health Institute, and Department of Cultural Anthropology, Duke University, 310 Trent Drive, Durham, NC 27710, USA

^e Department of International Health, Johns Hopkins Bloomberg School of Public Health, 615 N. Broadway, Baltimore, MD 21205, USA

^f Department of Psychiatry, Massachusetts General Hospital, 15 Parkman Street, WACC 812, Boston, MA 02114, USA

^g Harvard Medical School, 25 Shattuck St, Boston, MA 02115, USA

ARTICLE INFO

Article history:

Received 30 January 2015

Received in revised form

14 October 2015

Accepted 19 October 2015

Available online 21 October 2015

Keywords:

Cultural concept of distress

Idiom of distress

Depression

Anxiety

PTSD

Ethnopsychology

Global mental health

Transcultural psychiatry

ABSTRACT

Idioms of distress communicate suffering via reference to shared ethnopsychologies, and better understanding of idioms of distress can contribute to effective clinical and public health communication. This systematic review is a qualitative synthesis of “thinking too much” idioms globally, to determine their applicability and variability across cultures. We searched eight databases and retained publications if they included empirical quantitative, qualitative, or mixed-methods research regarding a “thinking too much” idiom and were in English. In total, 138 publications from 1979 to 2014 met inclusion criteria. We examined the descriptive epidemiology, phenomenology, etiology, and course of “thinking too much” idioms and compared them to psychiatric constructs. “Thinking too much” idioms typically reference ruminative, intrusive, and anxious thoughts and result in a range of perceived complications, physical and mental illnesses, or even death. These idioms appear to have variable overlap with common psychiatric constructs, including depression, anxiety, and PTSD. However, “thinking too much” idioms reflect aspects of experience, distress, and social positioning not captured by psychiatric diagnoses and often show wide within-cultural variation, in addition to between-cultural differences. Taken together, these findings suggest that “thinking too much” should not be interpreted as a gloss for psychiatric disorder nor assumed to be a unitary symptom or syndrome within a culture. We suggest five key ways in which engagement with “thinking too much” idioms can improve global mental health research and interventions: it (1) incorporates a key idiom of distress into measurement and screening to improve validity of efforts at identifying those in need of services and tracking treatment outcomes; (2) facilitates exploration of ethnopsychology in order to bolster cultural appropriateness of interventions; (3) strengthens public health communication to encourage engagement in treatment; (4) reduces stigma by enhancing understanding, promoting treatment-seeking, and avoiding unintentionally contributing to stigmatization; and (5) identifies a key locally salient treatment target.

© 2015 Elsevier Ltd. All rights reserved.

1. Introduction

Several decades ago, [Nichter \(1981\)](#) outlined a research agenda

that takes idioms of distress as its theoretical object, defining them as “socially and culturally resonant means of experiencing and expressing distress in local worlds” ([Nichter, 2010, 405](#)). Terms used to describe such experiences or expressions have been alternatively labeled idioms of distress, culture bound syndromes, or cultural syndromes. With the publication of DSM-5, the term cultural concepts of distress has been adopted to refer to “ways that cultural groups experience, understand, and communicate suffering,

* Corresponding author. Department of Anthropology and Department of Epidemiology, Emory University, 1557 Dickey Drive, Atlanta, GA 30322, USA.

E-mail address: bfullard@gmail.com (B.N. Kaiser).

behavioral problems, or troubling thoughts and emotions” (American Psychiatric Association, 2013, 787).

Scholars have suggested that such constructs be incorporated into research and interventions in efforts to better understand forms of suffering; to improve clinical communication, service usage, and treatment outcomes; and to reduce stigma (Hinton and Lewis-Fernández, 2010; Kohrt and Harper, 2008, Kohrt and Hruschka, 2010; Kleinman, 1988). For example, Kohrt and Hruschka (2010) report that in Nepal, NGO and health professionals referred to psychological trauma using terminology that was stigmatizing due to ethnopsychological associations with karma. They suggest that treatment initiatives incorporate idioms of distress, contextualized within Nepali ethnopsychology, to avoid inadvertently stigmatizing mental health patients.

Additionally, researchers have used idioms of distress to develop and adapt locally relevant assessment instruments for use in epidemiological and clinical studies and to guide decisions regarding appropriate treatments and programs (Betancourt et al., 2009; Haroz et al., 2014; Kohrt et al., 2011; Verdelli et al., 2008). For example, researchers recognize that using measurement instruments designed to capture DSM or ICD-defined syndromes may result in missing culturally relevant symptoms that are associated with impaired functioning (Flaherty et al., 1988; Kleinman, 1987; Weaver and Kaiser, 2015). Some studies have thus drawn on idioms of distress alongside standard measures, making assessment more culturally sensitive (Hinton et al., 2012c; Kaiser et al., 2013; Weaver and Kaiser, 2015). Such an approach proved successful in Sri Lanka, where idioms of distress predicted functional impairment above and beyond a PTSD scale and depression inventory (Jayawickreme et al., 2012).

However, anthropologists have critiqued some applications of idioms of distress, arguing that they are reduced to psychiatric categories in interventions. Unlike psychiatric categories, idioms of distress can communicate suffering that does not reference psychopathological states, instead expressing collective social anxiety, engaging in symbolic protest, or providing “metacommentary on social injustice” (Abramowitz, 2010; De Jong and Reis, 2010; Nichter, 2010, 404; Pedersen et al., 2010). Also unlike psychiatric categories, idioms of distress are explicitly situated within a cultural milieu that is recognized to be complex and dynamic (Briggs et al., 2003; Kirmayer and Young, 1998; Massé, 2007). Considering idioms of distress as communicative tools draws attention to questions of power, such as *who defines categories of distress?* and *what forms of distress are most relevant in healing contexts?* (Guarnaccia et al., 2003; Kohrt et al., 2014).

For anthropologists, much of the value of idioms of distress derives from the way they reflect notions of personhood, local moral worlds, and engagement with social change and struggle, elements that are often disregarded in interventions. Some anthropologists have therefore critiqued psychiatrists and public health practitioners for ignoring this broader context and more nuanced meaning (Abramowitz, 2010; Sakti, 2013). Abramowitz presents an example of humanitarian organizations reducing a Liberian cultural syndrome (*Open Mole*) to psychiatric phenomena like PTSD, largely because they more readily fit the organizations’ biomedical epistemology. In this process of translation, organizations ultimately invalidated the narratives of suffering and loss that were being experienced and communicated as *Open Mole*. In this review, we aim to consider idioms of distress in a way that privileges local meaning while also attending to potential means of informing psychiatric and public health interventions.

To date, the majority of research on idioms of distress has been limited to a specific cultural context. While there is a long and ongoing practice of testing applications of psychiatric diagnoses (e.g., DSM and ICD criteria) across cultural populations, there is a

gap in the research with regard to examining idioms of distress that may share similarities across cultural groups and settings. The first major attempt to do this was the work of Simons and Hughes (1985a, b), who developed a taxonomy of culture bound syndromes, which categorized syndromes by the presumed level of biological pathogenicity and the type of symptom clusters. In the past 30 years, there has been a lack of effort to re-examine shared elements of idioms of distress across cultures. We chose to evaluate one previously unexamined category of idioms of distress that appears to be common across cultural groups: thinking too much.

“Thinking too much” idioms have appeared frequently in ethnographic studies of mental distress and represent one of the cultural concepts of distress in DSM-5 (American Psychiatric Association, 2013: 834). Given that “thinking too much” is often mentioned in studies related to non-European/North American cultures and contexts, we set out to more fully understand the descriptive epidemiology and complex meaning of these idioms in the literature. The current study aimed to systematically review the “thinking too much” literature from several perspectives: (1) to give an overview of studies to date by geographical area and population; (2) to describe and compare the phenomenology, course and consequences, etiology, and vulnerability factors; (3) to examine studies identifying associated psychiatric disorders; and (4) to examine and compare local attempts at coping with these forms of distress. Our goal is to provide an in-depth description and analysis of “thinking too much” idioms in an effort to determine the applicability and variability of this concept across cultures, as well as to explore implications for assessment and treatment cross-culturally. The review is particularly timely given the inclusion of “thinking too much” as one of the cultural concepts of distress in DSM-5.

2. Methods

This review followed the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines (Liberati et al., 2009). First, we searched eight databases: PubMed, PsychInfo, Web of Science, SCOPUS, Embase, Sociological Abstracts, Anthrosource, and Anthropology Plus with the following search terms: (Anthropology OR Ethnology OR “Cross-Cultural Comparison” OR Ethnopsychology OR “Cultural Characteristics” OR Ethnography OR “cross cultur*” OR “idioms of distress” OR “mental health” OR psychology) and (“Thinking too much” OR “Too much thinking” OR “lots of thinking” OR “lots of thoughts” OR “too many thoughts”). There were no limits in terms of language or publication date on any of the searches. In addition, we searched Google Scholar for the term “thinking too much” and contacted listservs related to medical and psychological anthropology, transcultural psychiatry, and community participatory research to ensure that we had as complete a reference list as possible. Initial publications were collected over a two-week period in November 2012, with a second database search conducted in December 2014. Publications included in the review consisted of articles, book chapters, dissertations, books, unpublished manuscripts, and reports. See Fig. 1 for a summary of our search process.

Publications were included for full review if they met the following criteria: (1) the publication mentioned “thinking too much” or a closely related idiom in the body of the text, (2) the publication included empirical qualitative, quantitative, or mixed-methods research regarding the idiom, and (3) the publication was in English. Regarding criterion 1, although our database search terms were broader than “thinking too much” (including “too much thinking,” “lots of thinking,” “lots of thoughts,” and “too many thoughts”), this was done in order to be inclusive in our initial search. Review of publications then identified those referencing a

Download English Version:

<https://daneshyari.com/en/article/7331065>

Download Persian Version:

<https://daneshyari.com/article/7331065>

[Daneshyari.com](https://daneshyari.com)