



ORIGINAL ARTICLE

How we think about depression: The role of linguistic framing[☆]



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Abstract Descriptions of emotional disorders vary according to cultural and historical context. Framing mental illness as a disease – as opposed to being a consequence of psychosocial factors – has been proposed as a strategy to fight stigma in recent years. Here we combine two studies, a corpus analysis and an experimental survey, to explore this issue in the case of Spanish. First, we conducted a corpus analysis to investigate the patterns of linguistic framing of depression – including disease-like descriptions and metaphorical frames – using data from Latin American countries. Two main patterns were identified: (1) depression is frequently framed as a brain disease. In line with medicalization trends observed worldwide, this pattern has increased over time. (2) The data showed that depression is also metaphorically construed as a place in space or as an opponent. Second, we investigated whether the instantiation of subtle linguistic cues influences people's perception of a description of a hypothetical case of depression. A survey experiment conducted among Colombian students revealed that when depression was framed as a disease, the participants' perception of the depressed person's responsibility was reduced. Moreover, disease-like descriptions and metaphorical frames influenced participants' initial interpretations of the role of social causal factors.

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PALABRAS CLAVE

Enmarque lingüístico;
Análisis corpus;
Depresión;
Medicalización;

Como pensamos sobre la depresión: el rol del encuadre lingüístico

Resumen Las descripciones de los desórdenes emocionales varían de acuerdo a la cultura y los contextos históricos. Recientemente, se ha propuesto que enmarcar lingüísticamente estos desórdenes como enfermedades – en contraposición a consecuencias de factores psicosociales – podría ser una estrategia para combatir estigmas. En este trabajo combinamos un análisis del corpus lingüístico y un estudio experimental para explorar las características y

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consecuencias del enmarque lingüístico en español para el caso de la depresión. En primer lugar investigamos la frecuencia de distintos patrones de enmarque – incluyendo enmarque de enfermedad y otros enmarques metafóricos – usando datos provenientes de distintos países de Latinoamérica. Dos patrones emergen: (a) La depresión es frecuentemente enmarcada como una enfermedad cerebral y (b) La depresión se describe metafóricamente como un lugar en el espacio o un oponente. En segundo lugar, investigamos si el enmarque lingüístico afecta la percepción de un caso hipotético de depresión. Una encuesta a estudiantes colombianos reveló que cuando la depresión se describe como una enfermedad, los participantes tienden a percibir una menor responsabilidad de la persona afectada. Por otra parte, los resultados revelan que los distintos enmarques metafóricos estudiados inciden en las interpretaciones de los participantes sobre el rol de las causas sociales.

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Over the last two decades, accumulating work in cognitive science and cognitive linguistics has provided evidence that language shapes thought. The way we frame things linguistically influences the way we conceptualize social matters such as political attitudes, and moral and causal reasoning (Bergen, 2012; Lakoff, 1987; Lakoff & Johnson, 1980, 1999; Landau, Meier, & Keefer, 2010). Linguistic framing shapes the way we perceive the world by constraining how we gather information about people, events and situations (Lakoff & Johnson, 1999). This paper extends this framework to the study of the influence of linguistic framing on the conceptualization of psychological problems, focusing specifically on the case of depression.

Linguistic descriptions of psychological disorders vary according to culture and historical context. For example, framing mental illness as a brain *disease* – as opposed to a reaction to or consequence of psychosocial factors – has been an observed trend in mental health discourse in recent years (Corrigan & Watson, 2004; Horwitz & Wakefield, 2007; Racine, Waldman, Rosenberg, & Illes, 2010). From a social perspective, the phenomenon of medicalization of discourse conveys the threat of transforming human differences into pathologies (Conrad, 2007; Wakefield, 2007). In the case of depression, many authors have stressed the importance of distinguishing between pathological depressive disorders (which warrants medical attention) and normal human sadness that emerges as a reaction to life events or personal contingencies (Horwitz & Wakefield, 2007).

Medicalization phenomena results, in part, from an effort to decrease stigma. The rationale behind it is that someone suffering a physical disease is not to blame for their affection (Corrigan & Watson, 2004; Weiner, Perry, & Magnusson, 1988). However, although biogenetic explanations might reduce perceived blame (Kvaale, Gottdiener, & Haslam, 2013; Kvaale, Haslam, & Gottdiener, 2013), they may also strengthen dangerous stereotypes suggesting that people with mental illness have no control over their behavior (Read & Law, 1999), induce pessimistic prognosis (Kvaale, Gottdiener, et al., 2013; Norman, Windell, & Manchanda, 2012), and increase the desire of social distance (Haslam, 2011; Kvaale, Haslam, et al., 2013). On the other hand, psychosocial explanations – framing psychological symptoms as reactions to life events – have been shown to reduce fear

and improve attitudes toward people suffering from mental illness (Read & Law, 1999).

Many experimental studies have explored the influence of biogenetic explanations on stereotype (e.g., Aspinwall, Brown, & Tabery, 2012; Boysen, 2011; Boysen & Gabreski, 2012; Mehta & Farina, 1997). Kvaale, Gottdiener, et al. (2013) and Kvaale, Haslam, et al. (2013) analyzed data from 28 experimental studies exploring the effect of manipulating biogenetic and psychosocial explanations on attribution of blame, dangerousness, desire of social distance and prognostic pessimism in a range of psychological problems. Their results revealed that promoting biogenetic explanations helps to reduce blame but induces prognostic pessimism.

The medicalization of discourse is evidenced by media coverage of psychiatric neuroscience (Racine et al., 2010). As a consequence, the layperson is increasingly exposed to disease-like descriptions of psychological problems as part of their everyday life. Does the subtle exposure to linguistic frames shape the way we conceptualize mental health problems? Although the relation between biogenetic causal beliefs of mental health problems and stereotype has been explored before (e.g., Boysen, 2011; Mehta & Farina, 1997), here we deal with a different question: Does the mere instantiation of subtle contextual and metaphorical frames cause measurable effects on initial perceptions of a case of depression?

The goal of this work is twofold: We present the results from a corpus analysis – a standard method in *corpus linguistics*¹ – designed to investigate the frequency of the different types of linguistic frames used to describe depression in Latin American countries. Second, we explore whether subtle exposure to linguistic cues influences people's initial perception of a hypothetical case of depression.

Linguistic frames shape conceptual structure

The concept of framing is ubiquitous in the social sciences. According to Entman (1993), framing involves selecting some

¹ Corpus linguistics refers to the study of language occurring in samples (*corpora*) of real world text.

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