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Symbolic Interaction and an Interpretive Approach to Cross-Cultural Psychiatry

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Adoption of the medical model of psychopathology has de-emphasized the need for psychiatry to incorporate new developments from the other social sciences. The need for an interpretive (rather than merely biological) approach to psychopathology based upon theories of symbolic interaction is argued in the present article with respect to the emerging field of cross-cultural psychiatry. Groundwork for such an approach is sketched out by application of Obeyesekere's (1981) anthropological theory of personal symbols.

Recent research into the connections between neurochemical processes and psychopathology have led to an expanded view of the brain's role in human behavior and the development of pharmocological treatment for mental disorder. Unfortunately, this narrowed area of focus has led to a corresponding lack of attention to developments in the social sciences, namely new theories concerning the symbolic aspects of human behavior. Such a lack of interest is understandable given the basic premises on which the medical model of psychopathology predicates itself. The root core of the medical model is its view that stems from structural psychopathology or neurochemical impairments of the brain which inhibit the diseased individual from meeting certain societal standards of behavior. Yet, as the vast literature on the medicalization of deviance has pointed out, this view tends to localize the often systemic problem of deviant behavior within disempowered individuals (see Conrad, 1980; Szasz, 1961). Moreover, though the etiology of the disorder is assumed to be physical, the diagnosis of a disorder is made on the basis of behavioral observations and symbolic interaction through language, both of which are culturally mediated. Thus, the problem of making a diagnosis is compounded when the diagnostician and therapist are from different cultural backgrounds.

An empirical example will make this point clear. Eisenbruch (1992) has argued that the DSM-III diagnosis of Posttraumatic Stress Disorder (PTSD) is not applicable in his work with Cambodian refugees. He claims: The diagnosis is often based upon an ethnocentric view of health that prescribes how refugees should express their distress, how disorders should be classified, and how the distress should be ameliorated. It offers a checklist of criteria, many of which are physical changes in the person's body that are easy to elicit and presumed to occur as a universal physiological reaction to stress, without regard to the nature of the stressor or the individual's cultural background. (p. 8)

Pointing to case studies and statistics on noncompliance with pharmacological treatments as evidence of his point, he argues such diagnoses are seldom helpful in treating individuals of different cultural backgrounds. Rather, focusing on these presumed universals obscures the contextual reasons for the behavior. Eisenbruch substituted the term "cultural bereavement" as a more accurate diagnosis for Cambodian refugees normally diagnosed with PTSD. In his formulation the individual's behavior results when his/her link with the past and cultural categories of

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Correspondence concerning the article should be sent to the Philosophy Department, University of Tennessee at Chattanooga, 613 McCallie Ave, Chattanooga, Tennessee 37403. Electronic mail may be sent via Internet to hdyson@utcvm.utc.edu. meaning has been violently torn away, leaving the individual with no way in which to assimilate his/her present condition with previous experience. This state causes behavioral aberrations and somatic symptoms. The Western diagnosis of PTSD and its ensuing treatment, usually antidepressants or clonidine (Kinzie & Leung, 1989), may actually harm the refugee by further disassociating him/her from the native culture. Eisenbruch points to the efficacy of traditional healers and ritualistic treatments in reconnecting the individual with his/her painful past and thus allowing continuity of meaning and restored functioning in his/her transplanted community.

Eisenbruch's (1992) article makes plain the need for an interpretive approach to psychopathology which assigns to culture a more comprehensive role than the ephemeral position it holds in the current medical paradigm. Such an approach must begin with an examination into the role of culture in the symbolic interaction between the individual and his/her culture. It must then go to demonstrate the effect which the symbolic idiom of a culture has upon the expression and perception of psychopathology. Finally, an interpretive approach should be applied not only to the premises of cross-cultural psychiatry, but reflexively applied to the expression and perception of psychopathology in the Western world, including the medical paradigm.

Personal Symbols and Myth Models of Behavior

Gananath Obeyesekere's (1981) Medusa's Hair: An Essay of Personal Symbols and Religious Experience, an ethnographic study of ecstatic priestesses in Sri Lanka, provides a theoretical approach to symbolic interaction which can be used as the basis for an interpretive approach to psychopathology. In its theoretical orientation, the book is an attempt to bring personality back into the scope of anthropological studies by undermining the traditional dichotomy of private and cultural symbols. To accomplish this goal Obeyesekere uses Freud's psychoanalytic concepts to model the explanatory model for reconnecting the symbolism of the ecstatics with their interpersonal situations. The psychoanalytic perspective is then grafted upon a Weberian theory of culture to describe a set of cognitive concepts which the individual uses to assimilate and give meaning to the whole of experience. He thus constructs a view of symbolic interaction by which the individual and his/her culture are brought together in a dialectic.

Obeyesekere's theoretical discussions are cast upon the background of his field work with ecstatic priestesses at the Sinhala Buddhist festival of Kataragama in Sri Lanka. He describes in great detail the symbolic contents of the ecstatics' various visions and somatizations. Specifically, he is interested in the matted locks of hair empirically associated with abstinence among the ecstatics. Drawing from Leach's (1958) interpretation of matted locks in his essay "Magical Hair," Obeyesekere notes the traditional methodological separation of private and cultural symbols. Private symbols, traditionally the domain of psychoanalysis, are attributed to intrapsychic conflict (deep motivation) which may give rise to somatic manifestations or delusions. These delusions, though they will certainly take their content from the surrounding culture, are themselves devoid of cultural meaning. Cultural symbols, on the other hand, are viewed by most anthropologists as integral to group communication and identification, yet are denied any personal significance or deep motivation stemming from the individual qua individual. Rather. anthropologists have generally focused upon group motivations and collective practices in their etiologies of symbolic systems. Obeyesekere uses the problem of matted hair to point out the danger of transporting methodological assumptions across cultural boundaries. The dichotomy of private/cultural symbols, he demonstrates, is a product of Western intellectualism and is not empirically supported in Sinhala culture.

Leach (1958), arguing against Berg's (1951) psychoanalytic interpretation of matted locks for Hindi holy men (the Sanyasin), draws evidence from the Vedas that hair and sexuality are explicitly linked in the culture and thus in the conscious minds of the ascetics. To Leach the symbolic nature of matted hair is not private but public, announcing to society that this person has willingly renounced sex. Obeyesekere retorts that both Berg's and Leach's analyses ignore the context in which the symbol arises and persists. He demonstrates his own theory of symbolic representation through a comparison of matted locks for the Sanyasin and shaved heads for Buddhist monks. He states that true symbols are always public in that their essential nature is communication. By this, however, he does not imply that symbols cannot be the manifestations of deep motivation, but simply that manifestations which do not reach the level of public recognition (and sanction) do not belong to the category of symbols but to symptoms and fantasies in the nature demonstrated by Western psychotics. Thus symbols can never be private-but they may be personal. By personal symbols Obevesekere understands symbolic a representation which is drawn from the realm of public mythology and animated by the deep motivation of the individual. This definition has a profound effect upon

the expression of psychopathology. For example, a member of Buddhist culture who suffers from a castration complex need not find recourse in typical (Western) neurotic behavior because there is an acceptable outlet for such anxiety within the culture itself—Buddhist head-shaving. Anthropologists such as Leach have ignored the personal context in which symbols arise by denying that acts such as headshaving can manifest deep motivation because they are cultural, an ignorance imposed by an ethnocentric bias in methodology.

By stating that cultural symbols may be animated by deep motivation. Obevesekere does not by any means align himself with the psychoanalytic interpretation of symbols. Traditional psychoanalysis is equally guilty for ignoring the socio-cultural context in which symbols must persist if they are to be true symbols rather than symptoms. Again there is a bias in the methodology which here insists that every manifestation of a symbol is derived from deep motivation, that is, that every Buddhist monk that shaves his head does so because of castration anxiety. Obevesekere provides a distinction between symbols which are personal and those which are merely psychogenetic. Psychogenetic symbols represent the largest class of symbols which are in any way derived from the unconscious, but which need not be derived from the deep motivation of the particular individual who participates in them. One must look at the context in which participation occurs. For example, headshaving has become institutionalized with Buddhist monkhood and is required for every monk. Yet the motivation for monkhood may not always rest in castration anxiety but in purely external circumstances, as Obeyesekere demonstrates empirically through an examination of recruitment practices. In such a case the symbol exists on a level which is purely interpersonal, articulating membership in the group-although its original meaning may have once been symbolic castration.

In order for a psychogenetic symbol to be personal it must be recreated by the deep motivation of the individual. In searching for personal symbols anthropologists must always be attuned to cultural ambiguity allowing individual choice to play a part in manifestation. Head-shaving is an institutionalized ritual for all monks, yet matted locks are not such a requirement for the *Sanyasin*. This allows Obeyesekere to claim that matted locks are primarily personal symbols whereas shaved heads are primarily psychogenetic (though they may be personal as well). He gives the name objectification to the process by which the deep motivation of the individual is recreated within cultural, psychogenetic symbols. Obeyesekere extends this line of thinking in his case histories of ecstatics who are believed to be possessed by *pretas*, the spirits of ancestors who act as mediators between humans and the gods. The lack of formalization associated with *preta* mythology allows this symbolic idiom to be manipulated by the individual ecstatic. Particularly, Obeyesekere emphasizes the role of choice: choice of which dead ancestor the *preta* represents and even for which god or goddess in the pantheon the *preta* speaks. Objectification allows the psychopathology of the sufferer to be expressed in a way which is understandable and accepted by the community.

Obevesekere demonstrates that personal symbols are a connection between the individual and society. In his case histories he provides the interpersonal and intrapsychic relations which he believes led to the "psychotic" behavior of his informants. In this analysis he uses Freud's concepts to Desiree the effect of the interpersonal context upon the psyche of the individual. However, there is one major point in which the ecstatics differ from Freud's neurotics-the existence of a symbolic idiom intelligible to both the individual and society. The ecstatics not only manifest their deep motivation in terms of visions expressed in symbolic idiom, but are themselves acting out a symbolic mode of behavior which conforms to certain cultural-mythical roles. Obevesekere calls these models of behavior "myth models." The myth model is cultural and not private in that it exists outside the individual as a mode of discourse between the unconscious needs of the individual and his/her social context. For example, in one of the case studies a young female ecstatic is possessed by the Black Prince (Kalu Kumara). The fact that the adolescent is possessed by this particular demon, Obeyesekere states, makes plain to all in the community the sexual nature of her ailment and allows the proper recourse (a quick marriage). The girls' visions make meaningful a set of psychic phenomena in the same way that cultural idiom is evoked to provide meaning for physical phenomena, such as natural disasters. The myth model of the ecstatic priestess allows the psychic turmoil of the individual to be expressed in a way which, unlike the experience of Freud's neurotics, reconnects the suffering individual to society.

Subjective Imagery and the Etiology of Symbolic Idiom

Obeyesekere's second theoretical project in the book is to provide an etiological explanation for psychogenetic symbols in cultural idioms. The above discussion of objectification makes it apparent that

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Obeyesekere has already broken ranks with Durkheim's (1915/1954) superorganic view in which culture acts upon the passive individual in a manner which creates normative behavior and modal personalities. Rather, the symbolic idiom of culture provides the individual with the cognitive tools to render natural and psychic phenomena meaningful.

In this formulation the consciousness of the individual is in constant dialogue with his/her culture, a process which Obeyesekere demonstrates through the creation of subjective imagery. Whereas objectification represented the articulation of psychopathology in terms of pre-existent forms, subjective imagery involves the incorporation of ambiguous cultural material into the creation of a subjective idiom (not existent at the level of general culture) which is nonetheless acceptable and articulate to the society. This is possible because cultural forms are underdetermined with respect to their psychic origins, a notion which Obeyesekere borrows from Weber's definition of culture as "the finite segment of the meaningless infinity of world-process, a segment on which human beings confer meaning and significance" (1946, p. 81).

Two points about the nature of culture as a symbolic system are brought out in this definition. First, Weber is clear in his designation of individual consciousness as an active agent in the creation of cultural meaning systems rather than a passive recipient. Second, Weber indicates that since culture is a finite segment within an infinite series it will always involve an element of choice. Obevesekere's formulation of subjective imagery captures this notion of culture and roughly corresponds to Weber's discussions of charisma as the individual's ability to affect culture (pp. 245-252). Cultural symbol systems exist as a pathway to interpersonal and societal discourse; yet culture, far from providing norms for modal personalities, provides a means for accounting for nonregular occurrences. If meaning for intrapsychic stress cannot be found within the existent myth models, the individual is empowered as a symbol creator with the ability to recreate the cultural idiom to articulate his/her own psychic needs.

If it is true that the creative power of subjective imagery stems from the deep motivation of the individual, it does not follow that he/she is free to define symbolic meaning outside the realm of culture. Indeed, given the Weberian perspective it would be impossible to do so: the individual will always draw upon cultural concepts in the creation of subjective meaning. Subjective imagery is dependent upon sociocultural conditions for historical verification and ultimate acceptance if it is to be symbolic and not

symptomatic. In his discussion of savior myths, Weber (1946, pp. 358-9) demonstrates that the emergence of charismatic leaders in the role of messianic figures is dependent upon a "theodicy of suffering" caused by recurrent psychological need. While this theodicy does not represent a cultural form in the mode of a myth model to which the charismatic leader must fit, it does condition a certain degree of receptivity towards some forms over others. The essential difference between a prophet and a psychotic is the degree to which the culture embraces and incorporates the charismatic figure. Weber (pp. 248-50) states that all charisma must either become institutional or else die away. Thus the etiology of culture proceeds by dialectic: if the subjective imagery of the individual is embraced by society it will become subsumed within the greater symbolic idiom.

Obevesekere demonstrates Weber's theory empirically in his case histories and account of the original ecstatics in the Sinhala festival at Kataragama. He reports that when the ecstatic priestesses first began to make their appearance at the Kataragama festival, they claimed that they were possessed by the gods. Prior to this no culturally sanctioned myth model for such behavior existed, and the priests in charge of the festival refused to accept that the gods would inhabit the impure body of a woman. The ecstatics were forced to accept a compromised interpretation that their visions were actually the effect of preta possession but that the pretas acted as merely intermediaries for the gods. This compromise, which over time has become culturally and institutionally accepted, does not represent a 'pigeonholing' of subjective experience within a pre-existent myth model. Rather, the ecstatics were able to gain cultural acceptance by transforming the myth model of preta possession to legitimize the claim that they spoke the words of the gods.

Institutionalization and the Demythologizing of Symbolic Idiom

Note that to this point the discussion has focused on the attributes of symbolic systems and the interaction between culture and the individual visions of the ecstatics. Little attention has been paid to the ecstatics themselves. Obeyesekere, due to his Freudian perspective, considers the visions of the ecstatics to be pathological in that they are the manifestations of intrapsychic turmoil. As Johannes (1984) points out in her review of the book, the author's discussion of case studies leaves the reader with the impression that dissociative states are inherently pathological. Yet this in itself is not sufficient for labeling these women mentally "ill" in the sense implied by Western nosologies. As many in the literature have pointed out (Szasz, 1961; Foucault, 1974; see also Fabrega, 1976; Sedgwick, 1982; Wakefield, 1992), mental "illness" is a cultural classification with a specific history in Western medicine that carries with it a number of assumptions that are difficult to apply cross-culturally. The designation of mental "illness" can best be described in terms of symbolic systems. This perspective introduces the concept of cultural relativism into the universalistic medical paradigm. Even if it is assumed, for the moment, that the Sinhala ecstatic and the Western psychotic are equally pathological, it is still the case that the course of their pathology will be very different. The pathology of the ecstatic is expressed in a symbolic idiom which allows discourse of personal needs with the society and facilitates the reintegration of the individual into the community. The label of mental "illness," on the other hand, continually marginalizes rather than reintegrates the Western psychotic. In Obeyesekere's scheme this consequence lies not in the pathology of the individual but in the inability of a demythologized symbolic code to integrate the subjective imagery of the individual. Rather than transforming the cultural idiom, the Western psychotic is forcefully pigeonholed into ever more comprehensive "myth models" of Western psychiatric taxonomies. While these "myth models" do allow society to attribute some degree of comprehensibility to the psychotic's actions, they do not meet the needs of the psychotics themselves, whether intrapsychic or interpersonal. To follow Obeyesekere's line of thinking, the Western secular world has so demythologized its symbolic code that it is no longer capable of manifesting the deep motivation of individuals. Denied access to cultural myth models and verification of their own subjective imagery, the afflicted individual is forced to act out the manifestations of their turmoil in private symptomsymbols.

Obeyesekere does not himself reconstruct the process by which Western symbolic idiom has reached this demythologized point, but his discussion of personal symbols and subjective imagery give several hints to the process which are relevant to an interpretive approach to psychopathology. The instrument by which institutionalization takes place is the introduction of rational discipline designed to impose predictability on charisma's incalculable nature (Weber, 1946). The definitive effect is the reduction of choice available to the deep motivation of the individual. Thus preta possession, once the subjective image of a few pioneering ecstatics, becomes a myth model with certain rules to which aspirants must comply. One of these rules includes the psychic disposition to go into trance states. Obeyesekere describes the pathetic plight of one young woman who lacked this basic qualification and was forced to act out her distress in less culturally recognized ways. As mythologies become more and more rigid and standardized in their formulation, there is less and less choice allowed in the personal recreation of the symbol. What was once a primarily personal symbol becomes primarily psychogenetic, as in the case of Buddhist head-shaving. This progression can be seen in Western history in the creation of the scientific method through the continual rationalization of folk and mythological explanations of natural phenomena. In Obeyesekere's account of Kataragama, institutionalization occurs more in the realm of artistic and mythic representation than in the strict sense of Western rationalization, but the effect is the same: as they are subjected to conscious scrutinization, symbols lose their ambiguity and thus their ability to articulate to society the deep motivational needs of the individual.

Conclusions

Cultural symbolic systems, as both Weber (1946) and Obeyesekere point out, serve as explanatory categories rendering acts of nature meaningful even when the psychogenetic symbols themselves have ceased to carry deep motivation. This is essentially the state of Western secular thought. Scientific categories have become extremely demythologized with the introduction of rational methodology, yet they remain symbolic systems nonetheless. This fact is often obscured by a logical flaw by which the explanatory structures of scientific theory are placed in an antecedent, causal position (Dewey, 1925). In Dewey's formulation of scientific empiricism, explanatory structures are abstracted from experience in order to provide a greater level of understanding and control over nature. However, it is a logical fallacy to then place these structures in a position metaphysically anterior to experience. Both psychoanalysis and the biomedical model of psychiatry display this fallacy when they assume that psychological phenomena are generated by underlying forms which are applicable cross-culturally. In this medical model an individual's culture merely provides the surface content of psychopathology. It is assumed that pathological states are causally determined in the same way that physical events are determined. However, an appeal to mechanistic views of human behavior, whether biological or psychoanalytic, tends to obscure the contextual factors influencing behavior and de-emphasize the role of human agency (Szasz, 1961). In a recent paper on spirit possession in South Asia, Castillo (1994) concludes that biomedical psychiatry and psychoanalysis are both inadequate for understanding the phenomenology of trance states because the experiential level at which we encounter these states is caught up in culturally constituted categories of thought. What is needed to understand such diverse cultural phenomena is a theoretical framework which restores integrity to indigenous modes of explanation consistent with the cognitive categories of the individual.

Obevesekere's formulation of symbolic systems, despite its use of psychoanalytic modes of explanation, provides the theoretical support for an interpretive view of psychopathology and a valuable heuristic model for combating the inherent universalism of Western science. His case studies are a vivid reminder that, regardless of their etiological histories, the behavioral disturbances by which mental "illnesses" are identified are culturally mediated. Moreover, his interpretation of Weber secures the position of the individual as an active agent in cultural theory. The tendency of recent psychiatric taxonomies such as the DSM-IV to portray pathological categories as discreet entities existing in culture-free nature is a prime example of Dewey's positivist fallacy and a dangerous trend to cross-cultural psychiatry (Eisenbruch, 1992; Littlewood 1991; see also Fabrega, 1976, 1987, 1994; Kirmayer, 1991). As long as it is assumed that by stripping away the cultural "clothing" of pathological behavior the diagnostician can arrive at the etiological core of the disease, cross-cultural psychiatry will betray its ethnocentrism as an attempt to impose Western, demythologized categories of thought upon indigenous behaviors. For this reason it is necessary that psychiatry move beyond its positivist bias toward the development of a more comprehensive theory of psychopathology based upon a general theory of behavior which includes both culture and symbolic behavior.

References

- Berg, C. (1951). The unconscious significance of hair. London: George Allen and Unwin.
- Castillo, R. J. (1994). Spirit possession in South Asia: Dissociation or hysteria? Culture, medicine, and psychiatry, 18, 1-21.
- Conrad P. (1980). On the medicalization of deviance and social control. In D. Ingelsby (Ed.), Critical

psychiatry (pp. 102-119). New York: Pantheon Books.

- Dewey, J. (1925). Experience and nature. In J. A. Boydston (Ed.), *The later works: 1925-1953: Vol. 1.* Carbondale, IL: Southern Illonois University Press. (Original work published 1925)
- Durkheim, E. (1954). Elementary forms of the religious life (J. W. Swain, Trans.). London: George Allen and Unwin. (Original work published 1915)
- Eisenbruch, M. (1992). Toward a culturally sensitive DSM: Cultural bereavement in Cambodian refugees and the traditional healer as taxonomist. *Journal of Nervous* and Mental Disease, 180, 8-10.
- Fabrega, H. (1976). Toward a theory of human disease. Journal of Nervous and Mental Disease, 162, 299-311.
- Fabrega, H. (1987). Psychiatric diagnosis: A cultural perspective. Journal of Nervous and Mental Disease, 175, 383-394.
- Fabrega, H. (1994). International systems of diagnosis in psychiatry. Journal of Nervous and Mental Disease, 182, 256-63.
- Foucault, M. (1974). *Madness and civilization* (R. Howard, Trans.). New York: Vintage Books.
- Johannes, A. (1984). [Review of the book Medusa's hair: An essay on personal symbols and religious experience.] Medical Anthropology Quarterly, 15, 53-54.
- Kinzie, J. D., & Leung, P. K. (1988). Clonidine in Cambodian patients with posttraumatic stress disorder. Journal of Nervous and Mental Disease, 177, pp. 546-550.
- Kirmayer, L. J. (1991). The place of culture in psychiatric nosology: Taijin Kyofusho and DSM-III-R. Journal of Nervous and Mental Disease, 179, 19-28.
- Leach, E. R. (1958). Magical Hair. Journal of the Royal Anthropology Institute, 88, 147-64.
- Littlewood, R. (1991). DSM-IV and culture: Is the classification valid? Paper presented at the NIMH/American Psychiatic Association meeting, Pittsburg, PA.
- Obeyesekere, G. (1981). Medusa's hair: An essay on personal symbols and religious experience. Chicago: The University of Chicago Press.
- Sedgwick, P. (1982). Psycho politics. London: Pluto.
- Szasz, T. (1961). The myth of mental illness: Foundations of a theory of personal conduct. New York: Delta Books.
- Wakefield, J. C. (1992). The concept of mental disorder: On the boundary between biological fact and social values. American Psychologist, 47, 373-388.
- Weber, M. (1946). In H. H. Gerth & C. W. Mills (Eds. and Trans.), From Max Weber: Essays in sociology. New York: Oxford University Press.