

Symposium | Schizophrenia : [Symposium 104] Culture and Delusions

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[Symposium 104] Culture and Delusions

Moderator: Goffredo Bartocci (World Association of Cultural Psychiatry, Co-Founder and Past President), Itsuo Asai (Heart Clinic Medical Corporation) Discussant: Toshiya Murai (Kyoto University)
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[SY-104-02] Is racism a cultural delusion? Transferential and countertransferential pitfalls in the psychotherapist's consulting room

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The current definition of delusion in psychopathology implies an inherent culturalistic approach: a delusion is a fixed belief which is not in keeping with the world view shared by the patient's sociocultural group of reference. This essential characteristic, however, doesn't help the clinician when it comes to making a judgement on the sanity or the insanity of a seemingly delusional belief held by a patient, which is entirely in keeping with the beliefs of the majority of the people within the same society. The concept of cultural delusion can be helpful in such scenarios. Cultural delusions are defined as notions, views, convictions or even "knowledge" held by a sociocultural group and, as a result, perceived as "normal", "true", "valid" and experienced as self-evident realities. Just like in individual delusions, the morbidity of cultural delusions lies within the resulting altered relationship with the rest of the world and reality, rather than on their factually erroneous content. Cultural delusions are based on a shared world view, therefore they are not private or idiosyncratic beliefs held by a visibly dysfunctional individual. In this sense, they defy the commonly held notion that a delusional reality necessarily locks the patient in a private world, the validity of which he/she is the only one to acknowledge. By the same token, their potential for harm is much higher than individual delusions. Racism is a good example of such delusional beliefs, and conceptualising racism as a cultural delusion can be a useful approach to unveil its dysfunctional nature from a psychopathological perspective. This presentation, based on the clinical experience of the author with both a culturally dominant western minority in China as well as with a group of westernised Chinese, illustrates how racism reveals its delusional nature in psychotherapeutic work, mainly through transferential and countertransferential characteristics.