

Symposium | Schizophrenia : [Symposium 104] Culture and Delusions

 Sun. Sep 28, 2025 2:50 PM - 4:20 PM JST | Sun. Sep 28, 2025 5:50 AM - 7:20 AM UTC  Session Room 5 (Conference Room A)

[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)
Discussant: Toshiya Murai (Department of Psychiatry, Kyoto University)

[SY-104]

Culture and Delusions

Goffredo Bartocci^{1,2,9}, Toshiya Murai⁶, Tsutomu Kumazaki⁵, Micol Ascoli^{3,4,12,11}, Senkei Ueno⁶, Donato Zupin^{7,10,8,12} (1. Italian Institute of Transcultural Mental Health, Co-Founder and Past President (Italy), 2. World Association of Cultural Psychiatry, Co-Founder and Past President (Italy), 3. Central and North West London Foundation Trust (UK), 4. Mental Health Department Head, Beijing United Family Hospital (China), 5. Toranomon Hospital (Japan), 6. Department of Psychiatry, Kyoto University (Japan), 7. DDSM, Mental Health Area, ASUGI - WHO Collaborative Center, Trieste (Italy), 8. Transcultural Psychiatry Section, Italian Society of Psychiatry. Chair (Italy), 9. Transcultural Psychiatry Section, Italian Society of Psychiatry, Co-Founder and Past President (Italy), 10. World Association of Cultural Psychiatry, Board of Directors. Advisor (Italy), 11. Transcultural Psychiatry Section, Italian Society of Psychiatry. Board of Directors (Italy), 12. Italian Institute of Transcultural Mental Health, Board of Directors (Italy))

[SY-104-01]

Why has delusion not been defined independent of contexts?
From the viewpoint of Japanese psychopathology

*Tsutomu Kumazaki¹ (1. Toranomon Hospital (Japan))

[SY-104-02]

Is racism a cultural delusion? Transference and countertransference pitfalls in the psychotherapist's consulting room

*Micol Ascoli¹ (1. Central and North West London Foundation Trust (UK))

[SY-104-03]

Epistemological Perspectives on Delusion: Applying Tracking Theory to Delusions

*Senkei Ueno¹ (1. Department of Psychiatry, Kyoto University Hospital (Japan))

[SY-104-04]

From culturally-induced splitting to cultural delusions

*Donato Zupin^{2,1} (1. DDSM - Mental Health Area-WHO Collaborative Center, ASUGI. Psychiatrist (Italy), 2. Italian Institute of Transcultural Mental Health (Italy))

[SY-104-05]

Comments to the speakers

Discussant: Toshiya Murai¹ (1. Kyoto University (Japan))

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Keywords : cultural psychiatry、 delusions、 epistemology

Delusion is a cornerstone of psychiatric diagnosis, representing a hallmark for diagnosing schizophrenia and other psychoses as well as affective disorders with psychotic symptoms. This psychiatric symptoms could be identified in a variety of mental health conditions. Clinicians are increasingly confronted with a proliferation of beliefs that are harmful for the subject and his community and presents subjective certainty, incorrigibility, and non verifiable contents. This does not limits to the bizarre beliefs of schizophrenia, but includes a variety of conspiracy theories, fundamentalists religious beliefs and racist assumptions, culturally and sub culturally shared. These findings raise the questions of exploring the boundaries between healthy and pathological beliefs, and challenge the notion that delusions are limited to individual beliefs. The symposium explore the exceptional clinical, anthropological and philosophical issue raised by the definition of delusion. The history of the concept of delusions will be reviewed, alongside with its links with different psychiatric perspectives and its implications for the epistemology of knowledge, beliefs and error. Cultural delusions will be proposed as a useful clinical tool to be used in addition to the traditional clinical concept of individual delusions. Socio-cultural dynamics leading to cultural delusions will be examined, and its implication for psychotherapy will be illustrated.

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[SY-104-01] Why has delusion not been defined independent of contexts? From the viewpoint of Japanese psychopathology

*Tsutomu Kumazaki¹ (1. Toranomon Hospital (Japan))

Keywords : persecutory delusion、 psychopathology、 diagnosis

Delusion has long stood as a central symptom in psychiatric diagnosis; however, its definition remains elusive.

To begin with, this presentation offers a brief review of historical and contemporary efforts to conceptualize delusions, highlighting contributions from pre-modern cultural observations to seminal works by psychiatrists such as Jaspers, K. Schneider, and M. Spitzer. Despite these endeavors, the definition of delusion continues to rely on folk-psychological and commonsense judgments, introducing a degree of indeterminacy.

Focusing specifically on persecutory delusions and analogous anomalous judgments, the discussion then examines the challenges in distinguishing delusional from non-delusional thoughts, particularly within varying cultural contexts.

This leads to an exploration of how sociocultural conditions influence the formation and interpretation of delusions, drawing upon studies by Japanese psychopathologists. These investigations underscore the importance of cautious and detailed sociocultural consideration in the analysis of delusional phenomena.

In conclusion, the presentation argues that in our increasingly interconnected world, where sociocultural boundaries are fluid, incorporating cultural sensitivity into the understanding and diagnosis of delusions is not only beneficial but essential.

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[SY-104-02] Is racism a cultural delusion? Transferential and countertransferential pitfalls in the psychotherapist's consulting room

*Micol Ascoli¹ (1. Central and North West London Foundation Trust (UK))

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.

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[SY-104-03] Epistemological Perspectives on Delusion: Applying Tracking Theory to Delusions

*Senkei Ueno¹ (1. Department of Psychiatry, Kyoto University Hospital (Japan))

Keywords : knowledge、 epistemology、 justification

This presentation examines delusions from an epistemological perspective. Delusional beliefs often take the form of knowledge claims, but are typically dismissed for lacking epistemic justification. However, our empirical knowledge, which is ultimately based on common sense, similarly often lacks epistemic justification. We hold beliefs like "people around us are alive" or "the earth is round" without establishing their grounds by oneself. Thus, epistemic boundaries between delusional beliefs and ordinary knowledge claims are not clearly delineated.

To address this epistemological challenge, we apply tracking theory, an externalist approach. This theory suggests that knowledge depends not on epistemic justification but on whether beliefs appropriately track changes in circumstances. From this perspective, the incorrigibility of delusions, one of the hallmarks of delusional beliefs, can be interpreted as the fixity of belief across all counterfactual situations close to reality.

This framework offers advantages for both theoretical understanding and therapeutic intervention. If we adopt this framework in our clinical practice, we can avoid mutual blame regarding justification failures, and gain a practical method for examining the variability of potentially delusional beliefs through counterfactual scenarios.

Next, we examine the concept of cultural delusion within this framework. Cultural delusions persist as normal beliefs within their cultural contexts despite being deemed not valid by those outside the cultural framework. This indicates that the epistemic boundaries between culture-specific worldviews and clinical delusions can blur. We propose that the tracking theory approach—seeking intersections between patient and therapist reality concepts rather than imposing normative judgments—may offer an approach to dealing with the complex challenges of cultural delusions.

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[SY-104-04] From culturally-induced splitting to cultural delusions

*Donato Zupin^{2,1} (1. DDSM - Mental Health Area-WHO Collaborative Center, ASUGI. Psychiatrist (Italy), 2. Italian Institute of Transcultural Mental Health (Italy))

Keywords : Culturally-induced splitting、 Cultural delusions、 Cultural representations of migrants

Cultural psychiatry and medical anthropology emphasize the importance of situating pathology and its treatment not only within the individual but within a broader socio-cultural framework. Previous studies in the Euro-American context have described how public discourse on migration—including media narratives and public opinion—tends to oscillate between two opposing representations: the *good migrant* and the *bad migrant*. These representations do not refer to migrants themselves but to how they are collectively imagined, creating a fragmented and contradictory perception of migration. Building on these findings, this presentation introduces the concept of **culturally-induced splitting** as an interpretative framework to analyze this phenomenon. Culturally-induced splitting structures collective perception through rigid and polarized categories, reinforcing social tensions. While previous research has explored this dynamic in media and public opinion, this study examines its manifestation within Euro-American public institutions, highlighting its impact on the quality of functioning of community mental health services. Within this context, the emergence of **cultural delusions** can be considered a possible mechanism through which these contradictions are dynamically managed at the Euro-American level. Cultural delusions could be considered as beliefs strongly upheld by a particular social group and, as a result, experienced as ego-syntonic. These beliefs are unrealistic and potentially harmful, yet inherently unfalsifiable and resistant to contradiction due to the social consensus they enjoy. Their pervasiveness across the individual's cognitive and emotional landscape, along with their influence on behaviour, further reinforces their impact. This presentation examines how the culturally-induced splitting of Euro-American imaginaries about migration contributes to the emergence of **cultural delusions of racism and white supremacism**. At the same time, it suggests that the proposed causal chain—from culturally-induced splitting to cultural delusion—may provide a broader interpretative model for other culturally significant issues in different socio-cultural contexts.

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[SY-104-05] Comments to the speakers

Discussant: Toshiya Murai¹ (1. Kyoto University (Japan))

Keywords : Culture、 Delusion、 Psychiatry

Provide brief comments on each speaker's presentation.