

Symposium | Integrative Approaches to Cross-Cultural Models of Mental Disorders” : [Symposium 113] Cultural Consensus: A Structured Mixed-Methods Approach to Studying Cultural Models of Mental Illness

📅 2025年9月28日(日) 16:30 ~ 18:00 🏢 Session Room 6 (Conference Room B)

[Symposium 113] Cultural Consensus: A Structured Mixed-Methods Approach to Studying Cultural Models of Mental Illness

Moderator: Andrew Ryder (Concordia University)

[SY-113-01] The Use of Cultural Consensus Methods to Study Cultural Models of Normalcy and Deviancy

*Andrew Ryder¹ (1. Concordia University (Montreal, Canada) (Canada))

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Cultural Consensus Methods have been proposed for studying culturally shared beliefs in a way that allows (1) qualitative discovery of these beliefs in a bottom-up manner and (2) quantitative confirmation of shared consensus about these beliefs (Dressler, 2017). I propose that these methods can be used in cultural psychiatry research to study cultural models of normalcy and deviancy (Chentsova-Dutton & Ryder, 2020). Such research generally proceeds in three phases: (1) free listing; (2) pile sorting; and (3) cultural consensus analysis. In free listing, participants list responses to questions of interest to the researchers (e.g., beliefs about the origins of depression). Responses are made in reference to what people in the participant’s community believe, rather than what the participant personally believes. Frequent responses are then included in the pile sort phase, where new participants sort cards with these responses into piles reflecting how they understand the similarities and differences between various beliefs. The participant is also asked to ‘think out loud’, and these verbal responses are recorded, transcribed, and analyzed qualitatively. Finally, survey items are written based on the results of the first two phases and presented to new participants as a set of questionnaires. Cultural consensus analysis of these data uses factor analysis of participants (rather than items) to assess consensus (indicated by a strong first factor of participants). Advantages of this approach for cultural psychiatry research include (a) small sample size requirements, (b) relatively short time to conduct research, (c) bottom-up sourcing of items rather than imposing the content and structure of existing questionnaires, (d) quantification of the degree of consensus, and (e) identification of participants who do not conform to the consensus. I will conclude by considering some specific and important cultural psychiatry questions that are well-suited to investigation using this method.