

## Culture-bound Medical Problem and Community Nursing

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### ABSTRACT

*The culture bound medical disorder is a particular group of illness that is strongly related to the local culture and belief. The clinical problem is a sequence of both physical and psychiatric compositions and mainly affected by specific cultural background of specific community. To cope with those culture-bound problems, the community nurse has to learn about the community background, recognize the local belief and value and participate for adjustment of local patients' problems. Community health nurses should acknowledge and think about culture bound medical disorder when there is an unusual clinical presentation of a patient in community health nursing.*

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### INTRODUCTION

Medical disorder is an unwanted problem in medicine. There are several medical disorders in clinical practice. The underlying contributing factors for a medical disorder might be genetic or non-genetic factor. Regarding non genetic factor, the environmental effect is interesting. Since the patient has to live in the environment, the effect of environmental factor cannot be avoided.

The environment of a patient includes anything around the patient. This is also the social background of the patient. Any patient has to live in a community. The norms of a community might affect the health of the people living in that community. Each community might have a specific traditional culture that has been practiced for a very long time. The effect of the rooted culture on health is interesting. Some rooted culture might result in unwanted effect on health of the people living in the community. The way that a rooted culture in a community

affects the people in that community might be effect of the attitude and belief. When one attaches to a traditional culture, one might have the attitude and belief based on that culture. This can also further result in the pattern of the behavior including to health practice. If the culture is considered improper, it can result in false belief and might further result in unwanted risk health behavior. Sometimes, the belief is deeply rooted in subconscious stage, the hidden belief can still further result in risk health or problematic behavior.

The culture-bound medical disorder is a specific group of illness that strongly related to the local culture and belief [1, 2]. The problem is common in the community in the developing countries where there are several long-time rooted cultures (such as countries in East Asia and Southeast Asia). To manage those culture-bound problems, the community nurse has to learn about the community background, recognize the local belief and value and participate for adjustment of local patients' problems.

## REVIEW OF LITERATURE

In this specific article, the authors summarize and present the information on important topics regarding culture-bound syndrome and community nursing practice. The details from review of literature are presented in the two separated subheadings, a) culture-bound syndrome and b) community nurse and culture-bound medical disorder.

### Culture-Bound Syndrome

The term culture-bounded syndrome is widely used in clinical psychiatry at present [3]. By definition, a culture-bound syndrome is a kind of medical disorder that has both psychiatric and somatic components and is the result from the specific cultural background in of each specific community [3]. Patho-physiologically, the background belief of the community is the important factor that determines the pattern of clinical presentation of the culture-bound syndrome. Hence, the culture-bound syndrome is specific and unique to each specific community [3]. As a holistic approach concept, the component of any disease usually includes biological, psychological, social and spiritual aspect. The complex background has to be carefully investigated. For a community, the problem might be different from the other. The background culture should be well studied and clarified before designing any community health nursing.

The disease might be specific due to the modification of background culture of a community. The disease that has a great effect by local culture is called culture-bounded syndrome. A culture-bound syndrome is usually specific for a community and is totally different from the other communities. As noted by Ventriglio *et al.* “*There is no doubt that cultures influence how symptoms are perceived, explained and from where help is sought* [4]”. Globally, there are several well-known culture-bounded syndromes. Dhat

syndrome, a problem in Indian subcontinent that the patient feel suffer from impotence and have a thought that the patient loses vital force due to passing semen into urine, is a good example [5].

### Community Nurse and Culture-bound Medical Disorder

There are several problems that specifically existed in some settings due to the strong relationship to the local belief and cultural background. The different pattern of spiritual processing seen in Asian countries is the good example. For examples, in Thailand and Laos, with deep rooted cultures related to Buddhism and ghost belief, the spiritual processing presenting with the relationship to the local legends is common. In Vietnam, the rooted culture is mainly affected by Chinese culture, the appearance of culture-bound syndrome is usually related to the Chinese traditional practice.

To manage those problems, holistic approach is needed. The social and spiritual concern is needed in community nursing.

To understand each disorder, community nurse has to learn on the local culture. Access by medical humanistic approach might be necessary. To learn on the hidden value related to the existed problem is needed. For sure, there is usually a hidden local wisdom that relate to the success in management of the problem. For example, PhiiPob which is a common culture-bound spiritual processing in Thailand and Laos [3, 4] is strongly related to the local belief on ghost. PhiiPob is a problem in which a patient has personality changes, becomes fatigue, avoids sunlight, has weight loss and prefers to intake raw meats. The hidden wisdom relating to the Buddhism, using holy water from Buddhist Pagoda, seems to be an effective way in management of the case. This is explainable by spiritual dimension of community nursing. The specific

management of the case is not only the management of the patient but it might also cover the manipulation for the belief of the community. Modern treatment should be accompanied with the local spiritual practice to effectively manage both the patients and community.

Focusing on the community nursing practice, the nurses have to learn and recognize the background of the community that they work in. The identification of the sociocultural background can give the important information that can be applied for spiritual nursing care. Also, when community health nurses deal with a specific atypical clinical problem, they should recognize that it might be a kind of culture-bound syndrome.

## DISCUSSION

Any community, local norm can be seen. In a community with long history, culture might be formed and the local culture can affect the pattern of daily life of the people in that community. When one live in an social environment affected by a specific traditional cultural practice, one might get the effect from that practice. If the practice is in a good way, it might result in health prevention behavior. On the other hand, if one attach to inappropriate culture, one might develop risk behavior. The effect of eating culture can be well demonstrated. For example, in Indochina, the eating of raw fish is a local eating culture and it can result in risk for opisthorchiasis [6]. The problem of emerging opisthorchiasis in USA is also observed among the migrant from Indochina who have rooted eating culture of eating raw fish [7].

However, there are also other rooted cultures that are not eating cultures. Many cultures are directly related to local regions and beliefs. Those religious and belief related culture might also affect the pattern of life of the local people and might

sometimes result in interesting pattern of disease manifestation. The culture bound - syndrome usually has the interrelationship with the rooted community background of the patient. Strict of the rooted culture is the basic underlying condition for further development of culture – bound disorder. The patter of the disorder might be different in different setting. To understand each disorder, community nurse has to holistically approach with special focus on the community cultural background. The medical humanistic approach might be a useful tool.

The example of case of PhiiPob in rural Thailand can well reflect the effect of local belief on ghost and the traditional culture – bound ritual treatment can be seen [4]. The belief on ghost is rooted among local people. When a local villager has weak mental status, that village might seek for psychological support. The spiritual processing seen in PhiiPob is well explained as a king of psychological gain, getting attention by other ones in the same community. The set of holy practice by the community to support the patient is a way that provide psychological gain to the patient [4].



**Fig. 1:** Belief on PhiiPob in rural community of Thailand. (photo taken by Yasri, 2018)

## CONCLUSION

In several countries, rooted belief and culture result in interesting culture-bound disorder. The case example seen in Thailand and Laos mentioned in the present article is a good example that can demonstrate the effect of local belief on ghost and Buddhism that result in a manifestation of an interesting local – bound medical disorder. To manage those disorders, community nurse has to realize the rooted background. Learning on the local wisdom and adjustment for making advantage against the problem is recommended.

## CONFLICT OF INTEREST

None

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