

## An Indigenous Perspective on Chinese Depression

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### Editorial

Heinrich, Norenzayan & Heine (2010) published an article named "The weirdest people in the world?" in the Journal of Behavioral and Brain Sciences in 2010. They made strong critique of the "weird" phenomenon in psychology research area. They claimed that 96% samples of psychological research published 2003 to 2007 were drawn from Western, Educated, Industrialized, Rich, and Democratic (WEIRD) societies which house just 12% of the world's population. More and more psychologists became aware of the cultural bias of the western psychology and called for more cultural indigenous perspective to do research and clinical interventions.

According to Matsumoto's (1997) definition, culture is meant "the set of attitudes, values, beliefs, and behaviors shared by a group of people, communicated from one generation to the next". Based on this definition, Rubin (1998) believed that cultural beliefs and norms could help to interpret the individual's characteristics and relational interaction types and ranges.

There is no doubt that China culture has significant differences than western culture. The uniqueness of Chinese culture plays an important role in emotion, cognition and mental health. Many researchers agreed that Confucianism and Taoism as the core of traditional Chinese value system. They all advocate the rejection of individuality and self-assertion, and the maintenance of a balance among natural, human, and spiritual entities (Munro, 1985; Ryan, 1985). Taoism emphasizes self-control and interpersonal harmony, whereas Confucianism is concerned with fulfilling social obligations, establishing interrelationships with others, conforming to norms, respecting parents and elders, and achieving family reputation through individual achievement (Fung, 1983; King & Bond, 1985). The specific social values and norms affect how Chinese people view emotions. In China, there is a word called "xin ping qi he" 心平气和, means "is in a calm mood". Tsai's (2007) research found calmness is the most favorable emotion in China, because it will bring interpersonal harmony. Russell & Yik (1996) believed that moderation of affect is highly valued in China, due to the emphasis of modesty and self-effacement which is considered as a characteristic of personal cultivation and wisdom.

Kleinman and his colleagues (1986, 1992, 2007) did a series of researches of depression in China around 1980s'. Their study found that only 1% patients who attended psychiatric outpatient clinic in China were diagnosed as having "depression" as against 30% being diagnosed as having

neurasthenia (Chinese word is "shen jing shuai ruo" 神). And neurasthenia was used to describe a wide variety of somatic symptoms, like insomnia, dizziness, emotionality, and any kinds of depressive symptoms. Similarly, Ryder, Yang and Heine's (2002) surveys conducted in China and Taiwan around 1990 reported that only 1.5~2.3% of the sample developed depression, in contrast with 5.2~10.3% in the U.S. Why Chinese people inclined to somatize their depressive feelings? There are several possible cultural explanations. Firstly, Chinese culture views mind and body as one. It is called "xin shen he yi" (心身合一), means the body and mind are integrated with each other and cannot be separated. The harmony of this combination is considered as well-being.

The second reason is the Chinese way to describe the emotional experiences. Tsai, et al., (2004) studied how people in different cultures describe emotional experiences. They found that Chinese people use more somatic and social words than Americans do, while the latter used more emotional words. The traditional Chinese Medicine (TCM) believes that heart controls mental and emotional activities ("xin zhu shen ming" 心主神明). Chinese people inclined to connect "heart" with "feelings", such as "heart panic", "heart pain", "Heart vexed" etc. to describe their depressive feelings (Lee, et al., 2007). In outpatient clinic, many patients' first complain is physical pain or fatigue. After thorough physical check-up, they are more likely to be transferred to psychiatry clinic.

Thirdly, the stigmatization of mental diseases in China may also play an important role. Hsiao, et al., (2006) study, illustrated the narrative representation of the experiences of suffering by the Chinese patients with mental illness. They found Chinese people's well-being is significantly determined by a harmonious relationship with other in the social and cultural context. Mental diseases break harmony because the patients could not fulfill cultural expectations of appropriate behaviors and familial obligations. This will increase sense of guilt and shame in patients and their caregivers. Just like Ryder and his colleagues (2002) claimed, "The desire for harmony maintenance may help to explain why interpersonally disruptive mental disorders are particularly stigmatized; a notion is consistent with previous work on stigma in Chinese culture."

The stigmatization of depression may also a product of Chinese historic movement. During the Chinese Cultural Revolution (1966-1976), it was claimed by the communist that "only counter-revolutionaries are unhappy". Depression and other forms of mental distress were viewed as an expression of wrong political thinking. So Lee (1999) thought neurasthenia

("shenjing shuairuo") functioned as a social mantle for psychosocial distress, enabling people to avoid political denunciation as well as social stigma (Parker, et al., 2001).

Along with the Chinese modernization and westernization, Chinese become more psychologically minded; affective expression will almost certainly gain legitimacy and have a considerable effect on the expression and identification of depression. The enterprise of psychology and psychiatry, bolstered by foreign pharmaceutical industry, grew rapidly. These factors de-stigmatize depression very much. Along with this, the rate of depression is much higher than 20 years ago.

In conclusion, depression in China has its own characteristic. We need a cultural sensitive and developmental perspective to study mental diseases especially emotional disorders in China.

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