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IV - Semester

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CROSS CULTURAL PSYCHOLOGY

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INTRODUCTION

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Cross-cultural psychology refers to a branch of psychology that looks at how cultural factors influence human behaviour. While many aspects of human thought and behaviour are universal, cultural differences can lead to often surprising differences in how people think, feel, and act. Contemporary cross-cultural psychology examines psychological phenomena in many cultures. It measures psychological constructs equivalently in different cultures.

Cross-cultural psychology emerged in the late 1960s as a self-conscious discipline, separate from both anthropology and psychology yet closely linked to both. Generally, the objective of cross-cultural psychologists is to look at both unique behaviours and universal actions to recognize the ways that culture influences behaviour, family interactions, education, social experiences, and other aspects.

The book, *Cross Cultural Psychology* is divided into 14 units. It is written with the distance learning student in mind. It is presented in a user-friendly format using a clear, lucid language. Each unit contains an Introduction and a list of Objectives to prepare the student for what to expect in the text. At the end of each unit are a Summary and a list of Key Words, to aid in recollection of concepts learnt. All units contain Self-Assessment Questions and Exercises, and strategically placed Check Your Progress questions so the student can keep track of what has been discussed.

BLOCK I
PSYCHOLOGY AND CULTURE

*Introduction to
Psychology and Culture*

**UNIT 1 INTRODUCTION TO
PSYCHOLOGY AND
CULTURE**

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Structure

- 1.0 Introduction
- 1.1 Objectives
- 1.2 Definitions of Culture
- 1.3 Interface between Psychology and Culture
 - 1.3.1 Approaches to Culture
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1.0 INTRODUCTION

The world is growing remarkably, and it is increasingly developing in terms of cultural diversity. Here in India, and all over the world, people stay, earn a living, and interact with people from different cultures, and countries. Cultural diversification is welcomed, but it also adds on challenges.

Culture goes beyond food, clothing, and festivals. In simple terms, culture includes values, beliefs, norms, and behavior shared by a group. Cultural diversity and complexity is expanding at a global level (Miller, 2008; Triandis, 1980). Culture refers to set of attitudes, behaviour, and symbols shared by a wide group of people and generally passed on from generation to generation. Attitude includes values, opinions, beliefs, irrational notions, and stereotyped patterns. Behavior includes practices like habits, roles, customs, traditions, and norms. Symbols include ideas or things. People assign specific meaning to symbols and pass it on to future generations and those symbols become cultural symbols. Chi-Yue Chiu, a social psychologist said “People are active cultural agents, rather than passive recipients of cultural influences. They create, apply, reproduce, transform, and transmit their cultural routines in their daily social interactions.”

Culture has both explicit and implicit characteristics. Explicit characteristics are set of observable customs created in the culture. For example, greeting a

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stranger with “hello” by shaking hands. Implicit characteristics are unuttered constructions which give direction to behavior. For example, grammar that controls speech, hidden norms of bargaining, or behavioral expectations in a particular situation may be viewed as examples of implicit culture.

1.1 OBJECTIVES

After going through this unit, you will be able to:

- Discuss the definitions of culture
- Analyze the interface between psychology and culture
- Examine the approaches to culture

1.2 DEFINITIONS OF CULTURE

Triandis, Kurowski, Tecktiel, and Chan (1993), defined culture “in terms of objective and subjective characteristics that increase the odds of survival, provide satisfaction for people sharing an environmental context, and are shared via language”.

Objective elements of culture include tangible objects of culture (such as, architecture, food, manufactured products), whereas subjective elements of culture include social, economic, political, and religious practices of people.

Berry, Poortinga, Segall, and Dasen (2002) defined culture as “the shared way of life of a group of people”.

Matsumoto and Juang (2013) offered extensive definition of culture as “a unique meaning and information system, shared by a group and transmitted across generations, that allows the group to meet basic needs of survival, by coordinating social behavior to achieve a viable existence, to transmit successful social behaviors, to pursue happiness and well being, and to derive meaning from life.” (p. 5)

In all of the above definitions, culture has been understood as having a blend of behavioral norms, beliefs and ideas shared by an individual. Also, these norms and beliefs provide resources to understand individual goals and collectivistic goals (Hofstede, 1980; Mead, 1955).

Marsella (2013) stated the following propositions:

- Humans beings have an inherent need to explain, understand and predict the world over the order of stimuli.
- The brain responds to stimuli. Also, it organizes, connects, and symbolizes stimuli. It generates patterns of implicit and explicit meanings to promote adaptation.

- The process of this activity is culturally investigated, developed, and shaped through language, behaviour, and interpersonal practices which are part of the socialization process.
- Life experiences generate a shared cognitive and affective process which creates cultural continuity for both individual and the group. Individual and collective cultures are colored through this process.
- By socializing, individual and group priorities are either rewarded or punished, thus modifying the cultural constructions of reality (i.e., values and behaviour patterns etc.).

Across the countries, psychologists have been working to address questions like “what is the origin of culture?”, “How does culture persist?”, “What are cultural norms?”, “How are they widely shared within populations?” “How are certain psychological processes different across cultures?” etc. Many studies in psychology have studied the effect of culture on cognition, emotion, and behaviour drawing both similarities and differences across populations.

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1.3 INTERFACE BETWEEN PSYCHOLOGY AND CULTURE

The field of psychology is fitted for challenges of cultural diversity. The two main goals of psychology are:

1. To seek explanation behind behaviour. They conduct research to understand behaviour.
2. Psychologists take that knowledge of behaviour and apply it on people’s lives. They direct people’s lives by working as therapists, counsellors, and consultants.

Most research on human behaviour is conducted on WEIRDO (Western, educated, industrialized, rich, and democratic cultures). Researchers have also identified that WEIRDOS do not represent humans as a whole and we should not make claims about human behaviour based on such a data (Henrich, Heine, & Norenzayan, 2010). Such findings should be replicated across multiple cultures using different methodology. Psychologists widened their horizon and started studying people in various cultures and not just WEIRDOS.

Cultural psychologists started questioning whether human behaviour is true for all or varies across culture. They study people of different cultural backgrounds and use cross-cultural research method. Cultural psychology is an interdisciplinary field which keeps together anthropologists, psychologists, philosophers, and linguists to study the relationship between cultural practices and individuals’ psychology. It is a branch of psychology which views culture and individual as inseparable (Jahoda, 1992; Shweder, 1990). Cultural psychologists assume that psychological phenomena of one culture is less applicable to a different culture. Richard Shweder

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said, “Cultural psychology is the study of the way cultural traditions and social practices regulate, express, and transform the human psyche, resulting less in psychic unity for humankind than in ethnic divergences in mind, self, and emotion” (1991, p. 72). In simple words, cultural psychologists examine one culture at a time and examine how cultural processes modify psychological phenomenon. It does not assume the psychic unity of mankind (Shweder, 1990; Scribner, 1984). It stood out in the 1980s and 1990s. The classic texts on cultural psychology are written by well-known authors like Shweder and Levine (1984), Triandis (1989), Markus and Kitayama (1991), Nisbett & Cohen (1996), to name a few. Cultural psychologists utilize ethnographic and experimental methods for research.

Cultural psychology differs from cross-cultural psychology in that the cross-cultural psychologists generally use culture as a means of examining universality of psychological phenomenon whereas cultural psychologists examine how culture shapes psychological processes. For example, a cross cultural psychologist would want to study how Piaget’s stages of development are universal across cultures whereas a cultural psychologist would examine the role of a culture in shaping the stages of development in distinct ways. Triandis (1980) defined cross-cultural psychology as “the systematic study of behaviour and experience as it occurs in different cultures, is influenced by culture, or results in changes in existing cultures”. Cross-cultural research is a scientific philosophy which studies both similarities and differences in beliefs and actions between various cultures, thus contributing to cultural psychology (Gudykunst & Bond, 1997). In simple words, it means cross-cultural studies collect data from sample of more than one culture and draw its conclusion by comparing those cultural groups. It attempts to identify all psychological phenomena universal to all people and groups (Costa & McCrae, 1997; Berry et al., 1992; Lonner, 1980). One noticeable tool employed by cross-cultural psychologists is to classify individualistic and collectivistic cultures. Research has shown that Western cultures tend to be relatively individualistic in nature while Eastern cultures tend to be collectivistic. Cross-cultural research helps psychologists yield definite knowledge for all because it tests if this is true for some, is it also true for others (Matsumato & Juang, 2016).

Over the past few years, psychologists outside Europe and North America started conducting research relevant to local cultures (e.g., Allwood and Berry, 2006; Kim and Berry, 1993; Kim, Yang, and Hwang, 2006; c.f. Matsumato et al., 2016). Such advocates gave rise to indigenous psychology (Rao, Paranjpe, and Dalal, 2008). It has been defined by Kim and Berry (1993) as “the scientific study of human behavior or mind that is native, that is not transported from other regions, and that is designed for its people.” Indigenous psychology represents how local context affects psychological concepts of Indigenous people namely, Native Americans, Latin Americans, Indian-Asians, Africans, Filipinos. Dr. Aruna Broota, Delhi-based psychologist considers belief systems of indigenous population in a doctor patient relationship. She says “Whereas in India, we try to look into

the belief system of the client. I was being ancient as well as modern to create peace in the house” (Clay, 2002).

There is another field called cultural neuroscience which investigates the relationship between the brain and the culture. In other words, it outlines the ways in which culture “both constructs and is constructed by the mind and its underlying brain pathways” (Kitayama & Park, 2010). The findings from cultural neuroscience indicated possibilities that cultural scripts learnt during childhood and the cultural practices observed as adults influence our neuroarchitecture. FMRI studies have indicated that cultural background influences neural activity over distinct cognitive functions (e.g., Han & Humphreys, 2016). The kick-start of cultural psychology and cross-cultural psychology on general psychology is tremendous. Academicians felt cultural perspective to be of prime importance in psychology. We have an inherent curiosity to know that the information we have learned, or will learn, is shared by all people across cultures or only a section of people (Matsumoto et al., 2016). The Journal of Cross-Cultural Psychology is a flagship journal of cross-cultural research studies. Other journals like Cross-Cultural Research, Culture and Psychology also exist. Models of psychology are incorporating cultural perspective and similarly, culture has become a topic of interest in many books of psychology.

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1.3.1 Approaches to Culture

Understanding culture starts with understanding approaches to culture. In the final part of the 20th century, four approaches to study culture in social sciences gained a lot of attention. The approaches are primarily oriented towards four things given below:

1. Meaning
2. Symbolism
3. Language
4. Discourse

The approaches to culture are grounded in broad philosophical traditions and most of them originated in European tradition. Every approach includes strong theoretical framework, and leading authors. **Peter L. Berger, Mary Douglas, Michel Foucault, and Jurgen Habermas** made significant contributions to **study of culture**.

Following are the approaches discussed briefly:

- 1. Cultural Evolution:** Cultural evolution is a theory of social change. It believes culture as “*information capable of affecting individuals’ behaviour that they acquire from other members of their species through teaching, imitation and other forms of social transmission*” (c.f. Peter, 2005). Cultural evolution means the change of this wisdom by time. Cultural evolution was put forward in the 19th century by

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anthropologists. It stemmed from Darwin's research on evolution. Currently, it is considered a flourishing field of scientific research in the social sciences. Earlier, it was believed that social change comes from biological adaptation, whereas anthropologists indicated that social change stems from a combination of evolutionary, biological, and social influences (c.f. Britannica, 2017; ThoughtCo, 2017).

2. **Anthropological Perspective of Culture:** Anthropologists like Alfred Kroeber and Clyde Kluckhohn proposed holistic approach of culture including biological, psychological, social, and material factors (Beldo, 2010). Cultural anthropology focuses on studying cultural variation among human beings. Anthropologists suggested that human beings can adapt to culture. Anthropology uses ethnography in explaining culture (George and Fischer, 1999).
3. **Structural Functionalist Perspective:** It recognizes that several segments of culture function together as a system to accomplish needs of society and to build society. Societies require culture to stay. The perspective gives importance to cultural norms and values. Cultural norms help to support society and cultural values direct people in making choices.
4. **Conflict Theory:** The theory views that social structure is natively unequal based on power distinction related to age, gender, class, and race. In simple terms, it means inequalities exist in culture. For a follower of conflict theory, culture supplements privilege for certain groups, gender, race, class etc. For example, women seek equality, senior citizens strive to preserve their rights, autonomy, and prevent health, gay and lesbian community are struggling for their marital rights etc. Cultural norms within a society support some groups while oppose other groups. Some norms, formal and informal, are practiced at the expense of others.
5. **Symbolic Interactionist Viewpoint:** It focuses on understanding daily face to face interactions between representatives of the society. Believers of Interactionist viewpoint say that people create culture by interacting with each other. People assign meaning to objects and the actions of others by using language. Culture is perceived as dynamic, as it is modified by how individuals interpret it, mean it, and how they interact while they carry and negotiate meanings.

1.4 PAN-CULTURAL PRINCIPLES VERSUS CULTURE

Lexico dictionary defines the term “pan-cultural” as “elements common to all cultures”. Anthropologists call it ‘Human universals’. In evolutionary psychology,

it is referred to as "behavioural or cognitive traits common to all neurologically normal humans". Thinkers like Emile Durkheim, George Murdock, Donald Brown discussed a cultural universal as "an element, pattern, trait, or institution that is common to all human cultures worldwide".

In 1991, Donald Brown published a book called *Human Universals* where he listed 100 human universals emphasizing on commonalities. He described human universals as "those features of culture, society, language, behavior, and psyche for which there are no known exceptions". The list includes human universals like myths, legends, daily routines, pretend play, rituals, food sharing, social structure, gender roles, marriage, incest avoidance, territoriality, fear of death, childcare, mourning, kin groups, reciprocity, collective decision making, etiquette, envy, weapons, aesthetics, to name a few. The approach of "Human universals" is a challenge to cultural relativism, which suggests differences among humans (c.f. Anissimov, 2021). Steven Pinker, a cognitive theorist at Harvard, popularized the approach of "human universals". He argued that human beings share similar basic biological features likewise, they share cognitive features. He said "The psychological differences between human beings are more of differences of degree, not in kind". (c.f. Anissimov, 2021). Other universals include music, dance which are found in all societies (Brown, 1991).

Geher (2014) had put forward a list of 10 human universals given below:

- Across cultures, infants cry when their basic needs are not met.
- Emotional expressions like joy, happiness, surprise, and anger remain constant across cultures.
- Human beings form groups based on shared religion, political affiliation etc.
- Across cultures, specific traditions related to events like marriage, birth, or death exist.
- Liking for music exists across cultures.
- Across cultures, people show disliking and fear of life threatening stimuli.
- Across cultures, people value kinship.
- Human beings across cultures, are capable of learning language.
- Humans across cultures, have a strong need to build connections.
- Human beings everywhere are capable of laughter.

As per another view, cultural relativism views human behaviour as not universal but deviant and must be understood with respect to specific cultural context. This view also supports the belief that mental health practice should be understood within a specific culture. Psychotherapeutic interventions need to entwine cultural patterns so that they can be more effective. Multicultural research in psychology considers both culturally universal and culturally specific contexts in understanding human behaviour (c.f. iresearch.net, 2021).

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Check Your Progress

1. Which process do life experiences generate?
2. What is cultural psychology?
3. What are the approaches to culture grounded in?
4. How did Donald Brown describe human universals?

1.5 ANSWERS TO CHECK YOUR PROGRESS QUESTIONS

1. Life experiences generate a shared cognitive and affective process which creates cultural continuity for both individual and the group.
2. Cultural psychology is an interdisciplinary field which keeps together anthropologists, psychologists, philosophers, and linguists to study the relationship between cultural practices and individuals' psychology.
3. The approaches to culture are grounded in broad philosophical traditions and most of them originated in European tradition.
4. Donald Brown described human universals as “those features of culture, society, language, behavior, and psyche for which there are no known exceptions”.

1.6 SUMMARY

- The world is growing remarkably, and it is increasingly developing in terms of cultural diversity. Here in India, and all over the world, people stay, earn a living, and entertain with people from different cultures, and countries. Cultural diversification is welcoming, but it also adds on challenges.
- Culture has both explicit and implicit characteristics. Explicit characteristics are set of observable customs created in the culture. For example, greeting a stranger with “hello” by shaking hands.
- Implicit characteristics are unuttered constructions which give direction to behavior. For example, grammar that controls speech, hidden norms of bargaining, or behavioral expectations in a particular situation may be viewed as examples of implicit culture.
- Triandis (1980) defined cross-cultural psychology as “the systematic study of behaviour and experience as it occurs in different cultures, is influenced by culture, or results in changes in existing cultures”.

- Cross-cultural research is a scientific philosophy which studies both similarities and differences in beliefs and actions between various cultures, thus contributing to cultural psychology (Gudykunst & Bond, 1997).
- Another field called cultural neuroscience which investigates the relationship between the brain and the culture. In other words, it outlines the ways in which culture “both constructs and is constructed by the mind and its underlying brain pathways” (Kitayama & Park, 2010).
- The approaches to culture are grounded in broad philosophical traditions and most of them originated in European tradition. Every approach includes strong theoretical framework, and leading authors. Peter L. Berger, Mary Douglas, Michel Foucault, and Jurgen Habermas made significant contributions to study of culture.
- Lexico dictionary defines the term “pan-cultural” as “elements common to all cultures”. Anthropologists call it Human universals”. In evolutionary psychology, it is referred to as “behavioural or cognitive traits common to all neurologically normal humans”.
- As per another view, cultural relativism views human behaviour as not universal but deviant and must be understood with respect to specific cultural context. This view also supports the belief that mental health practice should be understood within a specific culture.

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1.7 KEY WORDS

- **Cultural Psychology:** It is the study of the way cultural traditions and social practices regulate, express, and transform the human psyche, resulting less in psychic unity for humankind than in ethnic divergences in mind, self, and emotion.
- **Cross-cultural Psychology:** It is the scientific study of human behavior and mental processes, including both their variability and invariance, under diverse cultural conditions.
- **Human Universals:** These comprise those features of culture, society, language, behavior, and psyche for which there are no known exception.
- **Interactionism:** It is a theoretical perspective that derives social processes from human interaction. It is the study of how individuals shape society and are shaped by society through meaning that arises in interactions.
- **Ethnography:** It is the scientific description of peoples and cultures with their customs, habits, and mutual differences.

1.8 SELF ASSESSMENT QUESTIONS AND EXERCISES

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Short-Answer Questions

1. List the two main goals of psychology.
2. What do cultural psychologists examine?
3. How does cultural psychology differ from the cross-cultural psychology?
4. Write a short note on the Symbolic Interactionist Viewpoint.
5. List any five human universals as given by Geher.

Long-Answer Questions

1. Discuss the propositions stated by Marsella.
2. Examine any three approaches to culture.

1.9 FURTHER READINGS

Dalal, A.K. 2016. *Cultural Psychology of Health in India: Well-Being, Medicine and Traditional Health Care*. New Delhi: Sage Publications India.

Singh, K., Junnarkar, M., & Kaur, J. 2016. *Measures of Positive Psychology: Development and Validation*. New Delhi: Springer.

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UNIT 2 SPECIFIC DIFFERENCES OF CULTURE

NOTES

Structure

- 2.0 Introduction
- 2.1 Objectives
- 2.2 Etics and Emics Methods of Understanding Culture
- 2.3 Scope of Cultural Psychology
- 2.4 Answers to Check Your Progress Questions
- 2.5 Summary
- 2.6 Key Words
- 2.7 Self Assessment Questions and Exercises
- 2.8 Further Readings

2.0 INTRODUCTION

The emic-etic distinction refers to two traditional research strategies used in the ethnographic study of cultures. The terms “emic” and “etic” are derived from the field of linguistic study. Etic research is the study of cross-cultural differences whereas emic research is the study of one culture with no or only a secondary cross cultural focus. Etic research focuses on how the phenomenon is used across cultures while emic research is concerned with the phenomenon as it is used within each culture. Cross cultural psychology explores how individual behaviour can be affected by cultural reality. Despite virtually uniform aspects of human nature, cultural differences can lead to often unexpected differences in how people think, feel and act.

Cross cultural psychology is also becoming increasingly important as researchers try to understand how we vary from each other and how we are the same. The International Association of Cross- Cultural Psychology (IACCP) was established in 1972 and since then it has continued to grow and evolve. Today psychologists are investigating behavioural differences between different cultures throughout the world.

2.1 OBJECTIVES

After going through this unit, you will be able to:

- Discuss the difference between etic and emic approaches
- Analyze the scope of cross- cultural psychology

2.2 ETICS AND EMICS METHODS OF UNDERSTANDING CULTURE

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Pike (1967) attempts to explain emic and etic viewpoints as the internal perspective of ethnographers attempting to describe a single culture from their own viewpoint and the external viewpoint of comparativist scholars trying to describe differences between cultures as a common external norm. The emic or inner perspective continues the pattern of psychological analysis of people's perceptions (Wundt, 1888) and cultural anthropologists striving for the "native's point of view" interpretation of history (Malinowski, 1922). The etic or outside perspective follows the tradition of behavioural psychology (Skinner, 1938) and anthropological approaches relate cultural practises to external, historical & economic factors that are not or specific relevance to cultural insiders. (Harris, 1979)

Emic scholars believe that a society is better interpreted as an integrated whole or structure whereas etic scholars are more inclined to isolate individual cultural elements and state theories from their distinctive history and implications.

Etic

A descriptive system which is equally valid for all cultures, representing similarities & differences between individual cultures. Etic research compares psychological phenomena across cultures with the goal of finding out if they are universal or culture specific. The aim is to compare & contrast behaviours in culture.

Emic

The emic approach defines culture not as an external factor but rather as an integral part of human behaviour. It studies one culture alone to understand culture specific behaviour. It studies behaviour through the perspective of the people who live in the culture. Further, how behaviour is linked to the culture and the meaning it has in the culture is emphasised.

Difference in Etic and Emic Approaches

While Emic focuses on "culturally specific behaviours", etic lays emphasis on "universal behaviours". Emic aims to bring an inside perspective while etic brings an outside perspective. Emic focuses on uniqueness of cultural similarity, etic focuses on similarities and differences between different cultures.

Berry (1999) suggests that emic & etic approaches are important in cultural psychology where the emic approach is that of "local knowledge & interpretations" and the etic approaches go beyond and etic and are consistently replicated in many studies across several cultures such that patterns of action can be correlated in cultural contexts.

Table 2.1 Differences between Etic and Emic

FEATURES	EMIC/INSIDE VIEW	ETIC/OUTSIDE VIEW
Defining assumptions & goals	Behaviour described as seen from the perspective of cultural insiders, in aspects drawn from their self understandings. Describing the cultural system as a working whole	Behaviour described from a vantage external to the culture, in constructs that apply equally well to other cultures. Describing the ways in which cultural variables fit into general causal models of a particular behaviour
Typical features of methods associated with this view	Observations recorded in a rich qualitative form that avoids imposition of the researcher's constructs. Long standing, wide ranging observation of one setting or a few settings.	Focus on external, measurable features that can be assessed by parallel procedures at different cultural sites. Brief, narrow observation of more than one setting, often a large number of settings.
Examples of typical study types	Ethnographic fieldwork, participant observation along with interviews.	Multi Setting survey, cross-sectional comparison of responses to instruments measuring justice perceptions & related variables. Comparative experiment treats culture as a quasi-experimental manipulation used to assess whether the impact of particular factors varies across cultures.

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2.3 SCOPE OF CULTURAL PSYCHOLOGY

Cultural psychology discusses the centrality of culture that is important to grasp an individual's personality fundamentally and his social behaviour. According to Shweder (1991), "Cultural psychology is the study of the way cultural traditions and social practises regulate, express & transform the human psyche, resulting less in psychic unity for humankind than in ethnic divergences in mind, self & emotion." In simple words, it is a comparative study of the way culture & psyche make each other up. Cole (1996) defined cultural psychology as the study of the culture's role in the mental life of human beings. Cross cultural psychology has the features of international psychology & interdisciplinary business. The field is related to a number of population level disciplines (anthropology, sociology, ecology, linguistics, biology) that are concerned with describing, analysing and understanding the traits of population at large or groups as the discipline is not concerned with a specific individual. The field also integrates psychology distinctive frameworks such as development, social habits, personality, intellect, language, emotion, perception and so on.) Cross – cultural psychology can derive a significant amount of knowledge from these disciplines. In order to gain insight into human behaviour as it applies to population level phenomena, the field of cultural psychology aims to connect these population levels and individual levels.

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According to Berry, Poortinga, Segall & Dasen (2002), cross cultural psychology is the study of

- a) Similarities & differences in individual psychological functioning in various cultural and ethnocultural groups
- b) The relationships between psychological variables & socio-cultural, ecological & biological variables
- c) The ongoing changes in psychological, socio-cultural, ecological & biological variables. (Morris, Leung, Ames & Lickel)

Applications

Let us discuss the applications of cultural psychology.

Cross-Cultural Training-Programmes

Cross-cultural training programmes have several features that are shared by all programmes. They are built to prepare people to live and work successfully in societies other than their own, and they are staffed by people who are well-versed in conducting training and coping with cultural issues. Programs have a budget, a schedule of operations, a time and place for their execution. Programs often have an assessment process to assess whether the approach and outcomes have been successful. Beyond these generalisations, various training directors use different approaches in presenting the information and involving people in activities to resolve upcoming intercultural experiences.

The demand for cross cultural training is increasing. According to Brislin, Landis & Brandt (1983), set the goal of cross- cultural training as producing significant change in the judgements of the actor's social or skill competence by people from another cultural background. The six kinds of culture training includes,

- 1. Attribution Training-** This is designed to teach a person to look at other social behaviours from the point of view of members of another culture i.e. isomorphic attribution. Attribution preparation focuses on people judging others by explicitly recognising cultural differences.
- 2. Information of fact oriented training-** Trainees are presented with facts about other cultures, through lectures, videos, tapes and reading material.
- 3. Cultural Awareness-** Focus on the values of their own culture as a means of becoming sensitive to cultural differences and to absorb information from other cultures.
- 4. Cognitive Behaviour modification-** The learning principles are used to shape trainees to extract more reinforcements from other cultures.
- 5. Experiential Learning-** Active experiencing of other cultures or simulations of life in that culture are used.
- 6. Interaction approach-** interacting with other cultures.

Cross-cultural psychologists are expected to perform the following daily tasks:

- Studying the human mind and actions.
- Investigating the changes and similarities between different societal norms.
- Advancing means of contact
- Encouraging acceptance and understanding between different cultures.
- Utilizing various metrics to determine the impact of ecological features.
- Working with clients/patients to discuss feelings of depression, anxiety, phobias, etc., through a cultural or social context.
- To study fundamental emotions and attitudes, and the societies that carry them.

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Cultural psychologists are working in a number of contexts. The demand for cultural psychologists in the field of therapy has gained popularity, for example, with the increase of immigrant communities in all societies. It is not possible to overstate the need for people who can advise individuals from all cultures and appreciate the difficulties they can face. In mental health centres, hospitals, different government organisations, and private practise, counselling psychologists who specialise in cultural psychology work.

In study at a college or university, or in a research facility, many cultural psychologists work. Cultural psychologists have the rare ability to make valuable contributions to individuals from all backgrounds in this way. They perform studies, frame experiments, employ people from various cultural backgrounds, test theories, and analyse their data in these settings to discover ways in which different cultures influence human behaviour.

Cultural psychologists are in broad demand in the field of practise. Most researchers, however, work in psychology. Of the research conducted in the field of cultural psychology, it focuses on the effect of culture in the way that different people think and act.

Researchers undertake cross-cultural studies about how various cultures portray feelings, such as anger and sorrow. They will plan an experiment and recruit a sample of different people of various cultural backgrounds. Cultural psychologists will analyse the data and use this knowledge to better understand how culture affects behaviour.

Some cultural psychologists are working at universities. The research may be linked to the teaching of classes that concentrate on the study of society and culture. Sometimes, professors have to use some of their time for teaching and study while using other time for writing posts.

There are many opportunities for cultural psychologists to work in politics, government administration, and industry. In this sense, cultural psychologists might perform research on a problem and report on their findings, which they ultimately

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use in designing programmes and services to meet the needs of particular groups of people.

A cultural psychologist will discuss the most critical problems facing urban minority youth, such as poverty and delinquency. The researchers will then apply the findings of their studies to lobby for government intervention to counter urban poverty. This includes developing a programme to provide urban minority communities with basic needs such as food, water, and medical supplies.

Both clinical and counselling psychologists are employed increasingly in the field of cultural psychology. The population in the United States continues to grow and become more diverse, thus necessitating more psychologists to have training and experience in cultural issues. Cognitive scientists with education expertise may build more successful methods of helping clients with challenging life issues.

A cultural psychologist can see how the social and cultural mores are at play during an encounter with Native American clients. Rather than involving the client in one-on-one therapy, in which the client is expected to talk about themselves and respond directly to the therapist while keeping eye contact, a counsellor with experience in this area will consider the influences of collectivism on the Native American client. Taking into account the fact that having eye contact with a member of a foreign community is rude, a cultural psychologist would advise the patient individually.

Education

While a bachelor's degree in cultural psychology will give someone a place in the profession, many will go on to get a master's or a doctoral degree in psychology with a focus on cultural psychology. Undergraduate studies typically include subjects such as social science, basic research methodology, statistics, pathological psychology and therapies.

Graduate School programmes in Cultural Psychology continue to grow in popularity. However, some colleges and universities encourage students to obtain a PhD to gain advanced training in cultural psychology. As of now, many cultural psychologists are employed as counsellors, or in clinical psychology after earning a master's degree in the field.

Some students can also opt to take courses with the intention of obtaining a degree with a co-concentration of cultural and clinical psychology. Students looking to extend their career opportunities are able to double major by also seeking a degree in counselling and cultural psychology. Overall, the highest number of career openings is the graduate level of psychology. In order to complete a degree in cultural psychology, one may need to take additional courses in areas of science, social change, and personality psychology.

Many colleges also offer arts-based psychology courses or concentrations in the field. Cultural psychologists can prefer to work in academia teaching courses

for students at the undergraduate and graduate levels. Additionally, many psychologists who work in academia also combine teaching with study or writing, and many universities allow their faculties to do so.

Counseling

Owing to the growing number of immigrant communities, there is a need for culturally responsive therapy practitioners. Culturally-minded counsellors who understand the value of cultural issues in mental health can find fulfilling careers helping people from diverse cultural backgrounds adapt and cope with the challenges that immigration life poses. Counseling psychologists work in private practise, mental health centres, hospitals, and community care departments, working with clients face-to-face.

In academia, cultural psychologists might also work. Many departments of college and university psychology have developed courses and specialisations in the area of cultural psychology over the past decade, and many practitioners prefer to teach at the undergraduate and graduate level. Similarly, many cultural psychologists employed in academia combine their teaching duties with publishing papers and research on this subject.

In the field of public policy, several cultural psychologists have also made worthwhile contributions. They can, for example, raise public awareness of underrepresented groups within the US, or they may work with other government officials at the local, state, or national level to help hammer out immigration issues and set new policies for public education initiatives.

Research

The field of cultural psychology provides psychologists an opportunity to make a substantial contribution toward improving the lives of underserved, under-represented individuals. In an article for the “Journal of Counseling & Development,” a team of authors recommend that cultural psychology research be undertaken to encourage racial and ethnic sensitivity in the field of psychology, and counteract racial and ethnic stereotypes. Cross-cultural psychologists can work in a variety of settings such as universities, research institutes, and research laboratories.

Policy

Cultural psychologists have a positive influence on the everyday lives of culturally diverse people by working in the field of public policy. They could moderate public discussions about concerns or policies that impact immigrant communities or people from diverse backgrounds by analysing studies, working in governmental agencies or non-profit organisations or designing public education programmes. Cultural psychologists may contribute to government policy by educating policymakers about the problems. They can perform certain tasks like helping to develop new governmental policies by working with government officials and elected officials.

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They might provide public education about multicultural issues and/or participate in non-profit research and outreach.

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Check Your Progress

1. What do emic scholars believe about the interpretation of society?
2. How does the emic approach define culture?
3. What does cultural psychology discuss?
4. Where do counselling psychologists work?

2.4 ANSWERS TO CHECK YOUR PROGRESS QUESTIONS

1. Emic scholars believe that a society is better interpreted as an integrated whole or structure whereas etic scholars are more inclined to isolate individual cultural elements and state theories from their distinctive history and implications.
2. The emic approach defines culture not as an external factor but rather as an integral part of human behaviour.
3. Cultural psychology discusses the centrality of culture that is important to grasp an individual's personality fundamentally and his social behaviour.
4. Counseling psychologists work in private practise, mental health centres, hospitals, and community care departments, working with clients face-to-face.

2.5 SUMMARY

- The emic or inner perspective continues the pattern of psychological analyses of people's perceptions (Wundt, 1888) and cultural anthropologists striving for the "native's point of view" interpretation of history (Malinowski, 1922).
- Etic research compares psychological phenomena across cultures with the goal of finding out if they are universal or culture specific.
- According to Shweder (1991), "Cultural psychology is the study of the way cultural traditions and social practises regulate, express & transform the human psyche, resulting less in psychic unity for humankind than in ethnic divergences in mind, self & emotion." In simple words, it is a comparative study of the way culture & psyche make each other up.
- The field also integrates psychology distinctive frameworks such as (development, social habits, personality, intellect, language, emotion,

perception and so on.) Cross – cultural psychology can derive a significant amount of knowledge from these disciplines.

- In order to gain insight into human behaviour as it applies to population level phenomena, the field of cultural psychology aims to connect these population levels and individual levels.
- Beyond these generalisations, various training directors use different approaches in presenting the information and involving people in active activities to resolve upcoming intercultural experiences.
- They are built to prepare people to live and work successfully in societies other than their own, and they are staffed by people who are well-versed in conducting training and coping with cultural issues.
- They perform studies, frame experiments, employ people from various cultural backgrounds, test theories, and analyse their data in these settings to discover ways in which different cultures influence human behaviour.
- In mental health centres, hospitals, different government organisations, and private practise, counselling psychologists who specialise in cultural psychology work.
- Students looking to extend their career opportunities are able to double major by also seeking a degree in counselling and cultural psychology.
- Culturally-minded counsellors who understand the value of cultural issues in mental health can find fulfilling careers helping people from diverse cultural backgrounds adapt and cope with the challenges that immigration life poses.
- In an article for the “Journal of Counseling & Development,” a team of authors recommend that cultural psychology research be undertaken to encourage racial and ethnic sensitivity in the field of psychology, and counteract racial and ethnic stereotypes.
- Cultural psychologists have a positive influence on the everyday lives of culturally diverse people by working in the field of public policy.
- Cultural psychologists can prefer to work in academia teaching courses for students at the undergraduate and graduate levels.

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2.6 KEY WORDS

- **Culture:** It refers to an underlying value framework that guides an individual behaviour.
- **Anthropology:** It is the scientific study of humanity, concerned with human behavior, human biology, and societies, in both the present and past, including past human species.

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- **Linguistics:** It is the scientific study of language. It involves analysis of language form, language meaning, and language in context, as well as an analysis of the social, cultural, historical, and political factors that influence language.
- **Ecology:** It is a branch of biology concerning the spatial and temporal patterns of the distribution and abundance of organisms, including the causes and consequences.

2.7 SELF ASSESSMENT QUESTIONS AND EXERCISES

Short-Answer Questions

1. What is the etic approach of cultural understanding?
2. List the daily tasks that cross-cultural psychologists are expected to perform.
3. What is the scope of research in cultural psychology?

Long-Answer Questions

1. Differentiate between etic and emic approaches of culture.
2. Discuss the six kinds of cultural training.
3. Discuss the scope of cross-cultural psychology.

2.8 FURTHER READINGS

Dalal, A.K. 2016. *Cultural Psychology of Health in India: Well-Being, Medicine and Traditional Health Care*. New Delhi: Sage Publications India.

Singh, K., Junnarkar, M., & Kaur, J. 2016. *Measures of Positive Psychology: Development and Validation*. New Delhi: Springer.

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UNIT 3 CULTURE AND PERCEPTION

NOTES

Structure

- 3.0 Introduction
- 3.1 Objectives
- 3.2 Perception and Experience
 - 3.2.1 Influence of Culture on Visual Perception
 - 3.2.2 Cognition and Culture
- 3.3 Answers to Check Your Progress Questions
- 3.4 Summary
- 3.5 Key Words
- 3.6 Self Assessment Questions and Exercises
- 3.7 Further Readings

3.0 INTRODUCTION

Perception is the phenomenon of interpreting environmental cues and actively constructing the reality around us. The process begins with the information striking our sensory receptors (i.e. sensation) and leads to interpretation of this sensory information by the brain. The whole process is a complex one not only because of the underlying biological processes but also because of the cultural factors that influence it. How we perceive the world is a factor of our cultural background. Culture is as influential in shaping our life experiences as is evolution (Mesoudi, 2009). After reading this unit, you will develop an understanding of the relationship between culture and perception. In addition to that, you will be able to understand how culture and cognition are interlinked. We are a combined product of our environment (culture) and our inherent personality traits.

3.1 OBJECTIVES

After going through this unit, you will be able to

- Describe the concept of perception and illusion
- Analyze the influence of culture on visual perception
- Discuss the relationship between culture and cognition

3.2 PERCEPTION AND EXPERIENCE

The emerging field of cultural neuroscience has contributed to our understanding of how culture influences the workings of our brain. We are constantly bombarded

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by various stimuli present in our environment. We attend to some while ignoring others. There is a major way in which culture influences our perceptions. It is important to study both i.e. culture and perception together because our perceptions are coloured by our culture and that may sometimes lead to bias and a conflict of opinions. It is important to understand cultural differences in various psychological phenomenon because people from different cultural backgrounds are coming together in neighbourhoods, classrooms, workplaces etc. due to increase in immigration. The socio-cultural approach facilitates our understanding of others and discourages us from making sweeping generalizations about others.

Bruner (1990) theorised that one's experiences influence perception. Do you remember the definition of culture? Culture is an interplay of multiple factors. It can be understood as "shared elements that provide standards for perceiving, believing, evaluating, communicating, and acting among those who share a language, a historical period, and a geographical location" (Shavitt et al., 2008). Cultural differences in perception are stark among the Western versus Eastern cultures because of their collectivistic or individualistic orientation.

On the basis of a large amount of research, it is safe to say that perception comes about as a result of incessant interactions between incoming sensory stimuli and prior experiences (Bastos et al., 2012). Garcia and colleagues (2018) conducted a study to investigate how prior knowledge influences our perceptions. They concluded that the information that shapes our current perceptions comes from our past experiences rather than from the present information.

When we study the cross cultural differences in perception, what we are actually trying to do is to determine whether people from different cultural backgrounds perceive the same stimuli as similar or otherwise. Do you remember the phrase '*tabula rasa*' by John Locke? The phrase *tabula rasa* means an empty slate. When a child is born he/she is an empty slate upon which experience writes. There are two schools of thought that investigate the role of experience in perception (Segall et al. 1990):

- **Nativists:** According to nativists, experience has a minor role in the mechanism of perception and the stimuli in themselves carry all the characteristics essential for a perceptual process. And that perception is majorly determined by the characteristics of the stimuli. Perception is as the stimuli are.
- **Empiricists:** According to empiricists, perception is a function of prior experiences and not solely determined by the stimuli.

There are two approaches that explain cross cultural differences in perception:

- **Ecological approach:** This approach can be understood by referring to the field dependence and field independence. According to this approach, perceptual processes are a function of one's habitat.

- **Semiotic approach:** This approach suggests that people perceive the world by tapping into a meaning system that they share with the members of their culture. This meaning system is historically and collectively maintained.

There is another dimension that determines our perceptual styles:

- **Field dependence/independence-** Field dependence/independence refers to the cognitive style one uses in perceiving one's surroundings. People interpret the information from their surroundings in either of the two ways: analytically and individually, or globally and collectively. When people employ the former way to perceive the information from their environment, it is termed as field independence. And when people employ the latter way, it is termed as field dependence.

How do individualistic and collectivistic cultures differ in their perceptual processes? In an experimental study by Kuhnen and colleagues (2001), participants from four nations were observed using the Embedded Figures Test. The participants from individualistic cultures- U.S. and the Germany, were found to be higher in field independence than the participants from two collectivistic countries- Russia and Malaysia. In support to the above findings, another study reported similar results. The participants hailing from individualistic cultural backgrounds were more likely to see objects as unrelated to their backgrounds or surroundings. People from individualistic cultures are more field independent than people from collectivistic cultures (Ji et al.2000).

3.2.1 Influence of Culture on Visual Perception

Markus and Kitayama (1991) noticed in their research that culture shapes our perception and cognition by equipping us with a set of values, expectations from life and needs. In experimental studies involving tracking of eye movements, the Americans were found to be able to concentrate on the central object more quickly and for longer span as compared to the East Asians. The latter were noticed to be more focused on the background of the picture (Chua, Boland, & Nisbett, 2005). These findings may imply that the Eastern cultures use more of the stimuli from the environment in perceptual processes and also there is more focus on the whole rather than the parts.

There is a large body of experimental research exploring the cultural differences in the perception of colour, depth, pictures, faces and on people's susceptibility to visual illusion (Berry et al., 2012). The culture we are raised in influences our perception by giving rise to some kind of perceptual expectations in us. We expect to see things in a certain way and this is called our perceptual set. Our perceptual sets are unique to our culture and not all elements of a perceptual set are shared by other cultures than our own (Blakemore and Cooper, 1970).

You have read about Muller-Lyer Illusion- an illusion in which a horizontal line ending in inward-pointing arrows is perceived to be longer than a horizontal

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line of equal length but with outward pointing arrows. What makes them so? What are illusions? Who is immune to such illusions? We are going to find answers to that. Illusions are discrepancies from truth, distortions of perception. When a sensory stimulus is misperceived, illusion occurs. There are multiple kinds of illusions with multiple causal factors.

- Toda tribe of Nilgiri hills in Tamilnadu state of India show significantly smaller errors in Muller-Lyer illusion than the British. Also, children of hunter-gatherers in Kalahari Desert in South Africa were found to be immune to it.
- **The carpentered world hypothesis:** This hypothesis states that there is tendency in the people living in carpentered environment to interpret non rectangular retinal images as rectangular. What it means is that people living in rectangular houses have a perceptual set that makes them susceptible to Muller-Lyer illusion.
- **The foreshortening hypothesis:** In a horizontal-vertical illusion, in a horizontal plane, the line extending away from the observer is perceived as horizontal and a short vertical line may be represented to appear as a long horizontal line. In simpler terms, people perceive vertical lines as horizontal lines extending towards the horizon. Can you guess who is immune to this illusion? The people living in relatively closed environments such as rainforests and valleys are immune to this illusion whereas the people living in wide, open spaces such as flat planes with open landscapes are susceptible to it.
- People from collectivistic cultures are more prone to vertical/horizontal illusion. They tend to perceive a vertical line as taller than the horizontal line when both lines are equal in length (Shiraev & Levy, 2007). This phenomenon can be explained by ecological approach (flat rural environments with wide landscapes in collectivistic countries).
- Field independent learners can quickly and easily break up a complex visual stimulus as they use analytical cognitive style. On the other hand, the field dependent learners view a stimulus in relation to its constituent units (Zhang, 2004).
- There is another interesting way that culture influences our perception. The way we perceive others' emotions differs across cultures. The researchers gave a task to the American and Japanese participants: to judge the central figure's emotional state from her facial expressions while she was surrounded by other figures. These figures had the same or different emotional expressions than the central figure. The results showed that the Japanese were influenced by the surrounding figures' emotional expressions in perceiving the emotions of the central figure whereas the Americans were not (Mesuda et al., 2008).

- In another study, the American and Japanese participants were shown facial expressions of a solitary figure and asked to report what emotion they perceived regarding what the figure was experiencing. Some of the Japanese participants reported that they could not tell without knowing the background and the context. The American participants did not face any difficulty in perceiving emotions from the facial expressions of a solitary figure (Leu et al., 2007).

3.2.2 Cognition and Culture

Our cognitions are culturally conditioned. East Asians (Japan, China, Taiwan, Korea etc.) and Westerners exhibit differences in cognition (Zajonc, 1984). Westerners tend to exhibit higher levels of fundamental attribution error than the Easterners. Fundamental attribution error is a cognitive bias that manifests itself as a tendency to attribute internal (dispositional) and global causes to other people's behaviours and discounting the situational causes (Ross, 1977). There is controversial *linguistic relativity hypothesis* by Benjamin Whorf. According to this hypothesis, the language one speaks has an influence on his/her thoughts.

Nisbett and colleagues propounded the theory of holistic and analytic reasoning. According to them, the cross cultural differences in reasoning and perceptual processes among the Eastern and the Western cultures can be accounted for by their different philosophical traditions (Nisbett & Mesuda, 2003). The Greek philosophical tradition has influenced the Western thought while ancient Chinese philosophy (you will read about Taoism and Confucianism in Unit 5) has influenced the Eastern culture. The holistic or the analytic cognitive styles of perception develop in early childhood years (Duffy et al., 2009). The two cognitive styles are:

- (i) **Holistic cognitive style:** The people with holistic cognitive styles prefer to focus on the background of the picture surrounding the central object, relationship between the units of the stimuli in question, and the relationship between the background and the central object.
- (ii) **Analytic cognitive style:** The people with analytic cognitive style prefer to focus on the central object rather than the periphery or the background.

Several researchers have tried to examine the ways in which culture may be instrumental in causing individual differences in cognitive processes. Most of these researchers have established cultural differences in cognitive processes among Easterners and Westerners.

- In a study by Masuda and Nisbett (2001), Japanese and American participants were shown animated videos of some underwater scenes. The participants were asked to narrate what they had seen. The Japanese participants reported having concentrated more on the field and on the relation between objects and their surroundings. The American participants focused more on the salient objects in the animated video

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(salient object meant larger, faster moving and more brightly coloured object than other objects in the animated video). In cultures where the allocation of attention is higher towards contexts or backgrounds, the recognition memory tasks revealed that they are more affected by the change of surroundings in the images. They exhibited impaired recognition memory when the background contexts of the objects were changed from the original ones.

- In some studies, the Easterners have been found to focus more on the group relevant information, similarities and contextual details while the Westerners have been found to focus more on the self-relevant information and information about individual items with no regard to their context (Masuda & Nisbett, 2001). Interestingly, the individuals comprising East Asian sample had difficulty in recognising the object when its background was changed or removed as compared to the Americans.
- The way the people focus their attention varies across cultures. The East Asians focus more broadly while the Americans attend more focally (Boduroglu et al., 2009). It can be inferred from an ample amount of research that Westerners tend to focus on the parts whereas Easterners tend to focus on the whole or on the relations between the parts. This difference can be accounted for by the individualistic cultural norms in the former versus collectivistic cultural norms in the latter.
- Studies have indicated cultural differences in where our attention goes during information processing. In some early researches using Rorschach cards on European Americans and Chinese Americans, the former gave more ‘whole-card’ responses (Abel & Hsu, 1949).
- There are differences in one’s semantic memory storehouse depending upon his/her culture. The education system in Chinese culture is virtue-oriented whereas Western education is mind-oriented in its approach (Li, 2005).

Conclusion

We are a combined product of our environment (culture) and our inherent personality traits. Superficially, we can say that culture determines our academic choices, career paths, our age of settling down in matrimony and starting a family etc. Deeper down, culture influences our cognitions and perception. Cultural differences in perception are stark among the Western versus Eastern cultures because of their collectivistic or individualistic orientation. The culture we are raised in influences our perception by giving rise to some kind of perceptual expectations in us. We expect to see things in a certain way and this is called our perceptual set. Our perceptual sets are unique to our culture and not all elements of a perceptual

set are shared by other cultures than our own. The cross-cultural differences in reasoning and perceptual processes among the Eastern and the Western cultures can be accounted for by their different philosophical traditions.

Check Your Progress

1. What is the meaning of the phrase *tabula rasa*?
2. What tendency do people living in a carpentered environment have?
3. What are illusions?
4. What is the foreshortening hypothesis?
5. What do people with holistic cognitive styles prefer to focus on?
6. What is fundamental attribution error?

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3.3 ANSWERS TO CHECK YOUR PROGRESS QUESTIONS

1. The phrase *tabula rasa* means an empty slate. When a child is born he/she is an empty slate upon which experience writes.
2. There is a tendency in the people living in a carpentered environment to interpret non-rectangular retinal images as rectangular.
3. Illusions are discrepancies from truth, distortions of perception. When a sensory stimulus is misperceived, an illusion occurs.
4. In a horizontal-vertical illusion, in a horizontal plane, the line extending away from the observer is perceived as horizontal and a short vertical line may be represented to appear as a long horizontal line.
5. The people with holistic cognitive styles prefer to focus on the background of the picture surrounding the central object, relationship between the units of the stimuli in question, and the relationship between the background and the central object.
6. Fundamental attribution error is a cognitive bias. It is the tendency to attribute internal (dispositional) and global causes when explaining other people's behaviours and discounting the situational causes.

3.4 SUMMARY

- Perception is the phenomenon of interpreting environmental cues and actively constructing the reality around us. Culture is as influential in shaping our life experiences as is evolution.

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- According to nativists, experience has a minor role in the mechanism of perception and the stimuli in themselves carry all the characteristics essential for a perceptual process. According to empiricists, perception is a function of prior experiences and not solely determined by the stimuli.
- According to Ecological approach, perceptual processes are a function of one's habitat. The semiotic approach suggests that people perceive the world by tapping into a meaning system that they share with the members of their culture.
- The participants hailing from individualistic cultural backgrounds were more likely to see objects as unrelated to their backgrounds or surroundings. People from individualistic cultures are more field independent than people from collectivistic cultures
- The people with holistic cognitive styles prefer to focus on the background of the picture surrounding the central object, relationship between the units of the stimuli in question, and the relationship between the background and the central object. The people with analytic cognitive style prefer to focus on the central object rather than the periphery or the background.

3.5 KEY WORDS

- **Culture:** Culture is an interplay of multiple factors such as language, religion, tradition, belief systems that are shared among people of a geographical area.
- **Perception:** Perception is the phenomenon of interpreting environmental cues and actively constructing the reality around us.
- **Cognition:** Cognition is all mental activity or process of thinking involving attention, memory, language, problem solving and decision making.

3.6 SELF ASSESSMENT QUESTIONS AND EXERCISES

Short-Answer Questions

1. Why is it important to understand cultural differences in various psychological phenomenon?
2. Write a short note on the two schools of thought that investigate the role of experience in perception.
3. How does the culture we are raised in influence our perception?
4. Write a short note on the carpentered world hypothesis.

Long-Answer Questions

1. Elaborate upon the role of experience in perception with a mention of nativist and empiricist school.
2. Write in detail about the influence of culture on visual perception.
3. Discuss the influence of culture on cognitions citing empirical evidence.

Culture and Perception

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3.7 FURTHER READINGS

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UNIT 4 CATEGORIZATION OF CULTURE

NOTES

Structure

- 4.0 Introduction
- 4.1 Objectives
- 4.2 Categorization and Concept Formation
- 4.3 Culture and Memory
- 4.4 Culture and Consciousness
- 4.5 Culture and Dreams
- 4.6 Culture and Time
- 4.7 Culture and Perception of Pain
- 4.8 Answers to Check Your Progress Questions
- 4.9 Summary
- 4.10 Key Words
- 4.11 Self Assessment Questions and Exercises
- 4.12 Further Readings

4.0 INTRODUCTION

Culture is a challenging concept to define as it is so wide in its operation. Several scholars have defined it in various ways, but the basic idea essentially remains the same. It is a multi-factor phenomenon that is used to understand and explain the background of people's behaviour. Kroeber and Parsons put forth a definition of culture as "a complex of values, ideas, attitudes, and other meaningful symbols created by a man to shape human behaviour and the artefacts of that behaviour as they are transmitted from one generation to the next". On the human rights' website of United Nations, it has been displayed that culture should be understood as "the set of distinctive spiritual, material, intellectual and emotional features of society or a social group, and that it encompasses, in addition to art and literature, lifestyles, ways of living together, value systems, traditions and beliefs".

You read in unit 3 that culture shapes our cognitions. In this unit you will learn how culture influences the processes of categorization and concept formation, the formation and retrieval of memories, consciousness, dreams, perception of time, and experience of pain.

4.1 OBJECTIVES

After going through this unit, you will be able to

- Analyze the categorization and concept formation of culture
- Understand the role of culture in memory formation and consciousness

- Understand the role of culture in dreams and our perception of time and pain

4.2 CATEGORIZATION AND CONCEPT FORMATION

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We try to put things into categories for our social and professional convenience. Some examples are: we sort the clothes in our wardrobes into different colours, we organize our work documents year-wise, some of us even arrange books on the shelf genre-wise. Human beings categorise things on the basis of similarities and give them a label. For example, when we see a chair that may not completely resemble a prototype of a chair, we still know it is something to sit upon and we categorise it as a chair. Concept formation is another cognitive process by which we learn the defining features that are characteristic of a class. These features or sometimes a combination of features are required to identify members of a class.

- Piaget (1962), the founder of the theory of Genetic Epistemology had expressed his beliefs regarding the wide variation in the acquisition of different cognitive operations in children among various cultures. He suggested that this may be due in part to the cultural and/or educational differences in emphasis that is put on the development of cognitive abilities.
- Lopez and colleagues (1997) conducted a study comparing Itza's Mayan people and undergraduate students of Michigan University on sorting/categorization and reasoning tasks involving their local mammals. The Mayans were seen to be lacking the diversity effect. The diversity effect can be defined as the tendency of most people to generalize a novel property to the members of a category when that property is seen to be shared by a diverse set of categories rather than a non-diverse set. In simpler terms, it is the tendency to generalise a novel property when you perceive that it is shared by a sample composed of a diverse set rather than when it is composed of similar set.
- Chiu (1972) examined East Asians' and Westerners' categorization strategies among the samples drawn from Chinese and American children. The participants in the study were shown pictures of artifacts, plants, and animals. Next, they were asked which two pictures they thought best belonged together and why. The participants gave four kinds of responses. In descriptive-analytic responses, the similarities between stimuli were used for categorization. In inferential-categorical responses, inferences are drawn about the stimuli and those inferences are used for categorization of objects. In descriptive-whole responses, the participants tried to see if the two stimuli are similar to each other as a whole. In relational-contextual responses, the pictures were grouped together on the basis of functional and thematic relationships among them. The American children were seen significantly more likely to exhibit descriptive-analytic, inferential-categorical and

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descriptive-whole ways of categorization. On the other hand, the Chinese children were significantly more likely to exhibit relational-contextual ways of categorization i.e. they tend to identify relationships among the stimuli to group them together while American children try to identify the similarities among the stimuli to group them together.

- In a study conducted on Americans and Turks, the Americans were found to use categories to organize memory more than Turks (Schwartz, Boduroglu, & Gutchess, 2014). It was also found that organizing memory in categories takes place in accurate memory (Gutchess et al., 2006) and it also influences the memory *errors* that occur across cultural groups. It is important to note that the cross cultural differences in memory errors popped up despite matching the American and Turk samples on cognitive ability.

4.3 CULTURE AND MEMORY

Memory is the medium through which culture travels. It is the ability to remember and recall information when required. Semantic memory is a collection of knowledge. It is based on our experiences and our experiences stem from our culture. Culture is a lens that we use to view and understand the world around us. It colours our perceptions and memory by impacting what is remembered and what is retrieved (Gutchess and Indeck, 2009).

- In a study by Masuda and Nisbett (2001), Japanese and American participants were shown animated videos of some underwater scenes. The participants were asked to give a record of what they had seen. The Japanese participants focused more on the field and on the relation between objects and background. The American participants focused more on the salient objects in the animated video (salient object meant larger, faster moving and brightly coloured than other objects in the video). In cultures where the allocation of attention is higher towards contexts, the recognition memory tasks revealed that they are more affected by changing backgrounds in the images. They exhibited impaired recognition memory when the background contexts of the objects were changed from the original ones.
- Research has indicated that the Caucasian Americans recall different kinds of memories than the Asians do. The former are more likely to recall the memories emphasizing the individual while the latter are more likely to recall the memories in which many people feature i.e. memories involving social interactions (Wang & Conway, 2004; Wang & Ross, 2005).
- If the semantic information related to a concept is activated, other similar or semantically related concepts are also activated (Roesch-Ely, & Weisbrod, 2002; Kiefer, 2002; Kintsch, 2000).
- The things that people commit to memory, including their false memories, may be a reflection of their value systems, beliefs, and customs of their

cultures (Gutchess & Indeck, 2009; Gutchess, Schwartz, & Boduroglu, 2011). The reason for this lies in the fact that the details or information about the environment that we deem important vary across cultures. So, how reliable can the eyewitness testimony be? That is food for thought.

- Researchers reveal that there are stark differences in the ways the world is perceived by people coming from different cultures. People from Western cultures are more likely to let their attention be drawn to what is categorically related, or self-relevant. On the other hand, people from Eastern cultures are more likely to let their attention drawn to contextual details, similarities between things, and group-relevant information (Gutchess & Indeck, 2009). So, they are likely to remember the same details about the stimuli in their surroundings as what they focus more upon.
- There are an interesting set of studies that investigated the cultural differences in the reports of the earliest memories people could remember, also called childhood amnesia or infantile amnesia. Childhood amnesia is the inability to retrieve the episodic memories before the age of two to four years. The results of these were dramatic. The earliest memories of Asian adults were from 57 months (4 years and 9 months) while for the Caucasians the first memories were from the age of 42 months (3 years and 6 months) (Hayne, 2000). In another comparative study, it came to light that the Asian and Asian-American students' first memories occurred six months later than their Caucasian counterparts (Mullen, 1994). Among Caucasian Americans and native Koreans, the difference between the earliest memories was 16 months (Mullen, 1995).

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4.4 CULTURE AND CONSCIOUSNESS

The question that whether culture affects consciousness is like asking whether the 'outside' affects the 'inside'. Consciousness has been a subject matter of psychology for quite a long time now. It is defined as our subjective awareness of ourselves and our environment (Koch, 2004). There is a lot of debate on the concept of consciousness. Descartes (1596-1650), a French philosopher, proposed the idea of dualism i.e. mind and body are although two separate entities but they are interconnected.

The modern-day psychologists think in direct contrast to him i.e. consciousness exists in the brain, not separate from it. Psychologists conceive of consciousness as an activity of the numerous nerve cells and their connections in the brain. (Koch & Greenfield, 2007). Freud, in his personality theory, talked about the unconscious and the conscious aspects of mind. According to Vimal (2009), there are 40 different meanings of consciousness and are yet not exhaustive. twenty of these are related with function of consciousness and the rest twenty are related with experience of consciousness. Jonkisz (2012) distinguished between five forms of consciousness (called orders of consciousness): a) sensorimotor

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consciousness, b) perceptual consciousness, c) meta-perceptual consciousness, d) self-consciousness, e) Meta-self-consciousness. Rao (1998, 2001, 2002, 2011b) divided consciousness into two transcendental and transactional categories. In the era of globalization, immigrations and migration, we live in multicultural societies, so, it becomes imperative to understand how one expresses his reality under the influence of cultural forces.

- Consciousness in Indian tradition can be understood from Vedic ontology. Aurobindo derived his consciousness from *vedas*. Consciousness according to him, is not limited to an individual experience but it is an essence of everything. Buddhism has a concept of mindfulness that one can use to understand consciousness.
- When it comes to altered states of consciousness, almost all the cultures report and accept their existence. Bourguignon and Evascu (1977) conducted a large scale study of 488 societies. They noticed that the trance states/possession trance states were found in 90% of the societies and they were invariably explained by reference to the supernatural. Hallucinations are another altered state of consciousness. These are considered to be associated with the religious beliefs, social background and cultural learning (Ward, 1994). Some other phenomena viz. hypnotic experiences, out of body experiences (OBEs), and peak experiences etc. are also noticed (Kokoszka, 1992; 1993).
- Some altered states are viewed very favourably by certain cultures. For instance, in Eastern tradition the practice of yoga asanas, Buddhism, and Vedanta Hinduism are considered favourable for achieving “higher” states of consciousness (Shear, 2011).
- In rural parts of Laos and East Africa, hallucinations, even when experienced by many patients, are not considered as a diagnostic criteria for mental illness (Westermeyer & Wintrob, 1979).
- Bauer et al. (2011) found that culture may be one of the factors implicated in the degree of experiences with hallucinations in schizophrenia patients in seven cultures in Asia, Europe, and Africa. Another study was conducted on participants from three different cultural groups- the British living in Britain, Pakistanis living in Britain, and Pakistanis living in Pakistan. The results revealed that hallucinations in schizophrenia patients were more strongly influenced by their immediate and current cultural environment.
- Members of two different cultures (here indigenous and non-indigenous Australians) may experience similar hallucinations but their interpretations will be determined by cultural norms (Badcock, Clark, and Morgan (2018).
- Hypnosis, an altered state of consciousness involves absolutely focused attention, reduced peripheral awareness, and enhanced suggestibility

(Elkins, Barabasz, Council, & Spiegel, 2015). The phenomenon of hypnosis has its origin in Europe but it has commonalities with practices of Eastern tradition such as Buddhist meditation (Otani, 2003).

- There was a research study in mid-20th century that revealed that in ‘primitive’ cultures the belief in the supernatural predisposes the members of these cultures to be more hypnotizable as compared with the members of ‘modern’ cultures (Devereux, 1966).
- Sapp (2016) argued that “hypnosis is a technique that allows culturally distinct clients to experience the past, present, and future in phenomenologically unique ways” and therefore hypnotic therapy can afford patients a culturally-sensitive individual attention much more than the mainstream therapies do.

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4.5 CULTURE AND DREAMS

We all dream during sleep. Although we dream during Non-Rapid Eye Movement (NREM) also, but most vivid dreams take place in the Rapid Eye Movement (REM) sleep. Dreams are our personal moments of manifestation that are beyond the constraints of rationality and emerge from the activities of our brain. They stem from our personal experiences yet they reflect our cultural background in a way that our language, schemas, customs etc. are reflected in the manifest content of our dreams. We hold this belief that our dreams are a uniquely personal thing. But dreams can be used to understand individual as well as collective psyche of a culture. Dreams involve one’s cultural reality as well as his or her daily life experiences and their unique interpretation by the dreamer (Hartmann, 1989). In *Rig veda*, there is a hymn in the tenth *mandala* that when recited is believed to chase away the bad dreams.

There are many superstitions or myths around dreams. Many people from scientifically advanced cultures also believe in those myths. How many of you have ever bought a dream catcher? A dream catcher is believed to catch good dreams and prevent nightmares. We will not debate the superstition behind it. We are here to focus on how culture influences our dreams.

- In Freudian tradition, the dream is understood as a manifestation of the repressed content. Freud (1929) made dreams such a fancy subject that everyone has at least once or twice tried to analyse his or her dreams. He said that ‘*dreams are a royal road to unconscious*’. The hidden or latent content of a dream is different from the manifest content. The latent content of a dream would mean the symbolic meaning of a dream. It appears in disguised or hidden form because it might be traumatic in nature. The manifest content of a dream is the literal or actual content of the dream as it appears to the dreamer. There is a theory called dream rebound theory that supports Freudian claims. This theory states that suppression of some thought may lead to dreaming about it at night (Wegner, Wenzlaff, & Kozak, 2004).

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- Hobson and McCarley (1977) proposed an activation-synthesis model of dreaming. According to this model, the neural circuits get activated in the brain during REM stage and in brain synthesises this activity tries to find a meaning in these signals. It follows from there that dreams are a result of subjective interpretation of one's brain activity.
- In Indian culture, it is inauspicious to dream of a temple car in motion and it means death of a near relative. Many native Americans think that they can predict future from dreams. They take decisions based on their dreams (Wogan, 2017).
- The Yagwoia people, who live in the highlands of Papua New Guinea consider dreams to be of practical use. They believe that their souls wander in the exterior world. At the same time, they express the knowledge that they are not sure about the certainty of their dreams (Mimica, 2006).
- The Parintintin people of an indigenous tribe in Brazil believe that to have erotic dreams of someone may mean that the person one is seeing in dreams is thinking about the dreamer with desire. Interestingly, among Arapesh people of Papua New Guinea, an erotic dream may be considered an act of adultery. In Moroccan culture, there is a concept of a possessive female spirit called Aisha Qandisha. Some men report having sexual encounters with her in their dreams and she then reportedly, commands their utmost loyalty to her (Kracke, 1981; 1987).
- Asabano people of Papua New Guinea report that their night time dreams affect their day-life activities. Lohman (2007) called it the "night residue effect" i.e. the memories of their dreams have a direct impact on their behaviour.
- Being a witness to the instances of violence can affect the manifest content of dreams. A study was done on Gaza, Palestine and Finnish children (Punamaeki & Joustie, 1998). The participants' dreams from last seven nights were analysed and coded for their manifest content. The dreams of Gaza children contained more vivid scenes replete with aggression and persecution themes.
- In the Middle East, dreams have been believed to be a message from the sacred to the dreamer and his family i.e. dreams originate from outside the individual (Dittmar & Moore, 1957). The Western culture on the other hand subscribes to the Freudian notion of dream originating from inside i.e. one's repressed unconscious psychological realities (Tedlock, 1992).

4.6 CULTURE AND TIME

The one thing we hear a lot about time is that time is money. We run our lives based on time. We have deadlines to meet, we have goals to get up early in the

morning, we eat our lunch according to the timely lunch break we get at work and we have a timer on our oven that signals to us when our cake has been baked. From about mid to late 19th century, psychologists conducted several experiments to investigate the relationship between time perception and exact time measurement based on Fechner's field of work- Psychophysics. Philosophically speaking, time is a concept that we measure using motion (revolution/rotation). As there are cultural differences upon pretty much every aspect of our being, time perception is no exception. Different cultures conceive of time and treat it differently. Within cultures also, there are differences in people's treatment or utilization of time.

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- Affluent people exhibit a lack of satisfaction with the amount of time they have at their disposal as their incomes rise. This is due in part to the fact that as riches increase, the opportunities or work assignments increase, but the supply of time remains the same causing frustration and dissatisfaction (Hamermesh, 2003).
- Westerners insist upon precise measurement of time, also, researchers found that in European and North American cultures, time is considered as a commodity. It would mean that someone's time is sold or bought like any other commodity. It is not so in African cultures (Akbar, 1991).
- The Khasi people of a tribe in Meghalaya, India, hold their periodic markets every eighth day. To make things easier, their week has eight days and they have named the each day of their week after the places where the main market is held (Levine, 2005).
- There is an interesting cultural difference in time-keeping. People in some cultures keep time using a clock and in others, they measure time using social events (Lauer, 1981). In the former case, the events start and end according to the clock time whereas in the latter case, the events are considered over when the participants mutually consent that it is over (Levine, 1997).
- Hall (1983) suggested that two types of cultures or approaches to work patterns when it comes to understand the concept of multi-tasking. There are monochronic versus polychronic work patterns. The monochronic cultures prefer doing one thing at a time. It is observed in clock-time cultures that people finish one thing before starting another and believe that there is a time and place for everything. On the other hand, the event time cultures emphasize polychronic approaches i.e. they prefer to do several things at once. A task goes on until there is another task to capture the fancy of the doer or there is an inspiration to turn to another. Actually, there is lot of switching in between the tasks in polychronic work patterns.
- There are differences in how time is perceived in Aborigines and Judeo-Christians. For the Aborigines, time is non-linear. They don't perceive time as linear sequence of past, present and future. They place events in a circular pattern i.e. time circles. The more important and relevant (to the individual

and his community) events are placed in the closer time circle and addressed first (Janca & Bullen, 2003).

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4.7 CULTURE AND PERCEPTION OF PAIN

The experience of pain is a natural and normal human experience. It is an alarm for threat and has an evolutionary value. A given individual's experience of pain is a function of the sensory experience, his/her background, the interpersonal context at that given time, and lastly, the meaning of the painful experience for the individual (Kraig, 1984). Similarly, Gijsbers and Niven (1993) defined pain perception as a combination of emotional, cognitive and sensory components. From the above two definitions, the experience of pain seems like a complex phenomenon which is influenced by both physiological and non-physiological factors.

You must have noticed that some cultures encourage concealing of pain, some cultures encourage expression of pain, yet some other cultures have painful procedures integral to them like female circumcision or female genetic mutilation, fire-walking, self-flagellation etc. Xygalatas and colleagues (2019) conducted a research on *Kavadi Attam* a ritual performed in every year by Tamil Hindus. The male devotees pierce their bodies using skewers, hooks and other sharp objects during the worship of Lord Murugan. Are they immune to pain or are there other factors at play? Go seek an answer to that. Meanwhile, let's look at cultural differences in pain perception. According to Pugh (1991), culture influences the experience and perception of pain in the following ways:

- a) the sensation of pain is culturally constructed
- b) the semiotics (signs, symbols, grimaces, gestures) of pain expression, and
- c) the structure of pain's causes and cures
 - Ethnic differences have been seen in experimentally induced pain in laboratory settings (Edwards, Fillingim, & Keefe, 2001). African-Americans exhibited more pain sensitivity to experimentally induced pain as compared to the non-Hispanic Caucasians (Sheffield et al., 2000).
 - South Asian males exhibited significantly lower thermal pain threshold as compared to White British males although, no differences were found on cold pain threshold (Watson et al., 2005).
 - African-American patients reported higher pain intensity in post-operative pain, low back pain and exercise induced angina as compared to Caucasian patients (Edwards et al., 2005).
 - What is perceived as a threat to life and warrants health care differs across cultures. In case of Australian aboriginal people, a large number of males and females who reported having back ache never sought clinical help because they did not perceive it to be a health problem

that would warrant a redressal (Honeyman & Jacobs, 1996; Zborowski, 1952).

- Similarly, in Nepal, even when people had access to medical facilities, no one sought help as back pain was not perceived to be a health problem but a normal part of ageing (Anderson, 1984).
- Apart from the studies on voluntarily seeking medical help, there is research evidence available on ethnic differences in dispensing medical help to people on the basis of their racial background. Black and Hispanic patients are significantly more likely to be discriminated against when it comes to treating their pain (Bonham, 2001) as a probable result of the stereotypes surrounding their race, language barriers, and socio-economic status.
- The cultural differences in the experience of pain are not limited to adult populations. In a comparative study, the Chinese and non-Chinese Canadian two-month olds during routine immunization, pain response was measured from facial grimaces and crying. The Chinese babies exhibited more response to the pain stimuli (Rosmus et al., 2000).
- **Sapir-Whorf hypothesis** states that how we perceive the world around us is majorly a factor of our thought processes. Our thought processes are run in our language, so our language limits our thought processes. Hence, it can be derived from the above statement that our language shapes our reality. Simply put, the language we use shapes our thoughts and perceptions about the world around us (Cussing is not a good idea after all!!). From the Sapir-Whorf hypothesis, it follows that people speaking different languages would have different pain experiences (Fabrega, 1989)
- Cultural differences can also be seen in the cultural display rules. As cultures differ in the expression of emotions, they must also differ in the overt expression of pain i.e. whether it's appropriate to express one's suffering or not. In a study conducted on college students, the Indian students exhibited higher pain tolerance and were less likely to express their pain overtly than American students. Also, the less they believed in the overt expression of pain, the higher was their pain tolerance (Nayak, Shiflett, Eshun, & Levine, 2000).
- Pain tolerance may be ingrained in the cultural values. Some cultures idealize remaining stoic in pain and bearing it with honour as is the case of Bariba Culture of Benin, West Africa (Sargent, 1984). Also, in Finnish culture, women view labour pains associated with childbirth as natural and that they should accept and bear these pains as a will of God (Callister, Vehvilainen-Julkunen, & Lauri, 2001, p. 30).

Culture conditions our cognitions. It is a lens that we use to view the world around us. It influences categorization/concept formation, memory, consciousness,

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dreams, time perception, pain perception and every cognitive activity of our mind. Concept formation is cognitive process by which we learn the defining features that are characteristic of a class. We sort objects, we put them into categories for our convenience. Culture colours our perceptions and memory by impacting what is remembered and what is retrieved. Dreams can be used to understand individual as well as collective psyche of a culture. A given individual's experience of pain is a function of the sensory experience, his/her background, the interpersonal context at that given time, and lastly, the meaning of the painful experience for the individual. Ethnic differences have been seen in experimentally induced pain in laboratory settings. Clinicians should consider one's ethnic and cultural background when treating someone with chronic pain. As we have seen repeatedly in cross cultural studies that the focus majorly remains on Eastern versus Western cultures, we need to broaden our horizon and study cultural differences more broadly instead of limiting our research to East versus West (Henrich, Heine, & Norenzayan, 2010).

Check Your Progress

1. Give a definition of culture.
2. What is the diversity effect?
3. What is monochronic work culture?
4. What are latent and manifest contents of a dream?
5. Define consciousness.

4.8 ANSWERS TO CHECK YOUR PROGRESS QUESTIONS

1. Culture is “a complex of values, ideas, attitudes, and other meaningful symbols created by a man to shape human behaviour and the artefacts of that behaviour as they are transmitted from one generation to the next”.
2. Diversity effect is the tendency to generalise a novel property when you perceive that it is shared by a sample composed of a diverse set rather than when it is composed of similar set.
3. The monochronic cultures prefer doing one thing at a time. In these cultures, people finish one thing before starting another and believe that there is a time and place for a everything.
4. The latent content of a dream would mean the symbolic meaning of a dream. It appears in disguised or hidden form because it might be traumatic in nature. The manifest content of a dream is the literal or actual content of the dream as it appears to the dreamer.

5. Psychologists conceive of consciousness as an activity of the numerous nerve cells and their connections in the brain. It can be defined as our subjective awareness of ourselves and our environment.

4.9 SUMMARY

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- Human beings categorise things on the basis of similarities and give them a label. Chinese children are more likely to exhibit relational-contextual ways of categorization i.e. they tend to identify relationships among the stimuli to group them together while American children try to identify the similarities among the stimuli.
- Piaget (1962), the founder of the theory of Genetic Epistemology had expressed his beliefs regarding the wide variation in the acquisition of different cognitive operations in children among various cultures.
- Memory is the medium through which culture travels. Semantic memory is a collection of knowledge. It is based on our experiences and our experiences stem from our culture. Culture is a lens that we use to view and understand the world around us. It colours our perceptions and memory by impacting what is remembered and what is retrieved.
- Psychologists conceive of consciousness as an activity of the numerous nerve cells and their connections in the brain.
- Dreams can be used to understand individual as well as collective psyche of a culture. Dreams involve one's cultural reality as well as his or her personal experiences.
- Psychologists conceive of consciousness as an activity of the numerous nerve cells and their connections in the brain. When it comes to altered states of consciousness, almost all the cultures report their existence.
- Different cultures conceive of time and treat it differently. Within cultures also, there are differences in people's treatment or utilization of time.
- A given individual's experience of pain is a function of the sensory experience, his/her background, the interpersonal context at that given time, and lastly, the meaning of the painful experience for the individual. the experience of pain is a complex phenomenon which is influenced by both physiological and non-physiological factors.

4.10 KEY WORDS

- **Dualism:** It denotes either the view that mental phenomena are non-physical, or that the mind and body are distinct and separable.
- **Ontology:** It is the branch of philosophy that studies concepts such as existence, being, becoming, and reality.

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- **Hypnosis:** It is a human condition involving focused attention, reduced peripheral awareness, and an enhanced capacity to respond to suggestion.
- **Peripheral Awareness:** It is the ability to see action or objects that are not in your direct line of vision. Instead, they take place on the sides and outskirts of your field of vision.
- **Suggestibility:** It is the quality of being inclined to accept and act on the suggestions of others.

4.11 SELF ASSESSMENT QUESTIONS AND EXERCISES

Short-Answer Questions

1. Why are rich people unhappy with the amount of time at their disposal?
2. What are the five forms of consciousness as per Jonkisz?
3. List one difference between polychronic and monochronic work cultures.
4. Write a short note on the concept of consciousness.
5. How does categorization and concept formation of culture take place?
6. Define childhood amnesia.
7. Define the Sapir-Whorf hypothesis.

Long-Answer Questions

1. Discuss how culture influences consciousness.
2. Analyze how culture influences our memories and perception of time.
3. Culture influences the experience of pain. Discuss with empirical evidence.
4. Explain how culture shapes our dreams.

4.12 FURTHER READINGS

- Dalal, A.K. 2016. *Cultural Psychology of Health in India: Well-Being, Medicine and Traditional Health Care*. New Delhi: Sage Publications India.
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BLOCK II CULTURAL INFLUENCES

UNIT 5 CULTURE AND INTELLIGENCE

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Structure

- 5.0 Introduction
- 5.1 Objectives
- 5.2 Culture and Intelligence
- 5.3 Cross Cultural Research on Intelligence
- 5.4 Cultural Differences in the Meaning and Concept of Intelligence
- 5.5 Answers to Check Your Progress Questions
- 5.6 Summary
- 5.7 Key Words
- 5.8 Self Assessment Questions and Exercises
- 5.9 Further Readings

5.0 INTRODUCTION

Culture and intelligence are two separate concepts that will be discussed in relation to each other in this unit. The reason that these two different concepts are linked to each other is that intelligence is influenced by cultural context. Every culture has a different perception of intelligence as what is considered intelligent in one culture might not be considered so in another. It depends on various social and ecological factors as well as other demands of a particular culture for an individual to adapt.

5.1 OBJECTIVES

After going through this unit, you will be able to:

- Describe culture and intelligence
- Evaluate culture's role in intelligence
- Analyze cross cultural research
- Examine the cross cultural differences in intelligence

5.2 CULTURE AND INTELLIGENCE

In earlier units, you have acquainted yourself with the definition of culture. What constitutes culture according to you? Oftentimes the definition of culture is reduced

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to our food practices, neglecting other components: marriage culture, need culture, desires culture, constraints culture, taboos culture. Ask a layman what culture is, and they are likely to respond with- what we eat, what we wear, what our rituals are, our dance forms and music etc. This description is not necessarily erroneous but it lacks the depth required to define plus understand what comprises culture. One widely accepted definition of **culture** is that of Kroeber and Kluckhohn (1952):

“Culture consists of patterns, explicit and implicit, of and for behaviour acquired and transmitted by symbols, constituting the distinctive achievements of human groups, including their embodiments in artifacts: the essential core of culture consists of traditional (i.e., historically derived and selected) ideas and especially their attached values; cultural systems may on the one hand be considered as products of action, on the other as conditioning elements of further action” (p. 181).

Culture can also be defined as “the set of attitudes, values, beliefs and behaviors shared by a group of people, communicated from one generation to the next via language or some other means of communication” (Barnouw, as cited in Matsumoto, 1994, p. 4). Apart from the above mentioned observable components, culture holds at its centre- our beliefs, our ways of thinking, our customary practices, social interactions (transactions) etc.- which then influence how we behave, how we conduct ourselves in society and also all the prejudices we hold collectively. All our social evils are also a part of our culture. Sometimes culture remains evident, sometimes subtle, and invisible at other times.

Intelligence

The literature in psychology is replete with the definitions of **intelligence**. It refers to our intellectual functioning, ability to adapt to new surroundings, and learn from past experience. Aristotle came close to the modern day term of intelligence and called it “*rational soul*”. Boring (1923) defined intelligence as “Intelligence is what intelligence tests measure”. In Wechsler’s views, “Intelligence is the aggregate or global capacity of the individual to act purposefully, to think rationally and to deal effectively with his environment (Wechsler, 1944, p. 3).” According to Terman (1921), “an individual is intelligent in proportion as he is able to carry out abstract thinking” (Terman, 1921, p. 128). Cattell gave the idea of fluid and crystallized intelligence. He postulated that intelligence consisted of fluid abilities such as abstract reasoning, and crystalized abilities such as learned knowledge of culturally relevant facts (Gustafsson & Wolff, 2015). Porteus (1965) believed that foresight and planning were fundamental components of intelligence.

Why are we studying the culture and intelligence together? Because intelligence is defined as well as influenced by the cultural context one is placed in and both are inextricably linked. Also, it is ‘displayed in a cultural context’ (Sternberg & Grigorenko, 2004). What is considered intelligent in one culture might be viewed

as unintelligent in another. Cultures ascribe different meanings to intelligence depending on their ecological and social demands. Also, among different cultures, there is a lot of variation in the kinds of cognitive processes required to adapt to the ecological and social demands of respective cultures (Georgas et al., 2003).

Have you ever read this term ‘culture-fair’ test of intelligence? What does it mean? A culture fair test of intelligence is a test that is free from culture bias. It is an attempt to reduce the culture bias in human intelligence testing by including items that are familiar to more than one culture. Such tests elicit scores that reflect the ability of the examinees regardless of their cultural background. Culture bias figures in intelligence testing because of our assumption that every examinee has access to the knowledge and skills being tested by the IQ tests (Scarr, 1981).

Vygotsky’s Cognitive Development Theory (1978) conceptualizes the role that culture plays as a mediator in the formation and development of specific abilities. According to him, the cognitive abilities such as learning, memory, attention, and problem solving etc. are socially guided and constructed and it is attained with the help of culture-specific tools. The culture specific tools are books, computers, and even our cultural traditions (Berk, 2004). It would not be wrong to say that intelligence develops and is displayed in a cultural context.

To elaborate more upon it, consider Sternberg’s Triarchic theory of intelligence (1985). He postulated that intelligence has three elements i.e. componential intelligence, experiential intelligence and contextual intelligence. The componential or analytical intelligence is the ability to think analytically and critically to solve problems. The experiential or creative intelligence involves the use of existing knowledge in novel ways to deal with new problems. Lastly, the contextual or practical intelligence involves being adept at successfully dealing with environment on daily basis or being *street smart*. Of the above three components, the contextual intelligence can be said to be a product of one’s culture. Does it mean that some cultures raise more intelligent people in one or other aspects? This question is for the readers to ponder and answer.

5.3 CROSS CULTURAL RESEARCH ON INTELLIGENCE

Researchers across the globe have been conducting research on intelligence since the advent of psychological testing and contemplating on the topic since even before that. Cross cultural researches attempt to document the cultural differences among different populations. Methodologically, in such studies cultural group is the independent variable and psychological variables are dependent variables. The cultural groups under investigation in cross cultural researches are national groups, ethnic groups, and language and race based groupings.

Cross cultural research brings authenticity to the investigation because when a research is limited to one culture and its results are generalized across global

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cultures, there is a major risk of generating unwarranted, biased and sometimes unfounded assumptions about the phenomena being investigated (Sternberg, 2004).

As Berry (1986) contended that the current notion of intelligence in psychology was “culture-bound, ethnocentric and excessively narrow” (p.35), the critics often point out that the most widely accepted definitions or viewpoints of intelligence subscribe to the western notions of intelligence (Berry & Bennet, 1992). And in order to broaden the understanding of intelligence other cultural perspectives should also be considered (Sternberg & Grigorenko, 2001).

Cross-cultural research on intelligence gave rise to different schools of thought. One is the *Relativists’* and the other is *Universalists’ perspective*. The Relativists contend that intelligence is nothing but that act which is valued as intelligent in a culture. On the other hand, the Universalists argue that there are universal abilities that transcend cultures.

One fundamental issue that arises while conducting cross-cultural research is of racial differences. Nisbett (2003) suggested that the people in Eastern and the Western cultures have different viewpoints regarding intelligence and these differences stem from the different cognitive styles of both cultures. He further suggested that in western cultures, intelligence is reflected in an individual’s ability to engage in rational debate and devise categories. On the other hand, in eastern cultures, intelligence is viewed as an individual’s ability to exhibit social competence.

Nevo and Khader (1995) investigated the notion of intelligence among Chinese, Malay and Indian mothers in Singapore. The findings suggested that intelligence was perceived to include social competence, appropriate behaviour and cognitive and academic ability by these women. In another study by Chen and Chen (1988), a comparison was made between conceptions of two groups of Chinese graduates. Both these groups described non-verbal reasoning ability as a representation of intelligence. Zhang and Wu (1994) found that Mainland Chinese people perceive intelligence as an ability to reason logically, adapting to new environments, exhibiting creativity, being insightful, possessing a sense of humour and being energetic and self-confident. Yang and Sternberg (1997) found that the Taiwanese-Chinese people conceive intelligence as the interpersonal intelligence as discussed in Gardner’s Theory of Multiple Intelligences (1983).

Nisbett (2003) suggested that the people in Eastern and the Western cultures have different viewpoints regarding intelligence and these differences stem from the different cognitive styles of both cultures. He further suggested that in western cultures, intelligence is reflected in an individual’s ability to engage in rational debate and devise categories. On the other hand, in eastern cultures, intelligence is viewed as an individual’s ability to exhibit social competence.

In some cultures, such as Taiwan and Zimbabwe, cognitive and social skills taken together figure as ‘wisdom’. Wisdom is characterized by the knowledge along with the ability to use that knowledge in moral and socially responsible ways

(Yang & Sternberg, 1997; Serpell & Jere-Folotiya, 2008). This led to an attempt to incorporate the concept of wisdom in a western theory of intelligence (Sternberg, 2003).

Research abounds to showcase that different specific skills (s factors of intelligence) are valuable to different cultures (Mpofu, Ntinda, & Oakland, 2012; Sternberg & Grigorenko, 2001; Vernon, 1969). In research study conducted by Berry (1966), the Inuit (Eskimo) people of Arctic region outperformed the rural Sierra Leone people in the tasks measuring spatial ability. This probably can be explained on account of the Inuit environment and culture which foster the development of spatial ability in its population to navigate the tough terrain of Arctic. The indigenous Cree people of Canada, it is the traits like patience, deliberation, and persistence that characterizes cognitive competence (Berry & Bennett, 1992).

Have you ever heard of the Panga Munthu Test (PMT)? It is a non-verbal test of cognitive ability and was devised to provide an accurate and culturally appropriate assessment of intelligence for children in a non-Western society. It was developed in response to Zambian children's unfamiliarity with drawing with a pencil and paper in the draw-a-person test. Kathuria and Serpell (1998) found that Zambian children were good at moulding clay but they could not draw with a pencil on paper. The PMT requires a child to mould a human figurine using clay or plasticine.

There is so much variation in what different cultures value and conceive of intelligence that some researchers have gone as far as to say that comparing scores of intelligence across cultures is a nonsensical exercise (Vernon, 1965a). Some researchers suggest that examinees from different cultures require different intelligence tests to measure their intelligence (Bernardoni, 1964; Sternberg & Grigorenko, 2001). Some researchers insist that intelligence tests are completely inappropriate for some cultures (Kwate, 2001; Ngara & Porath, 2004; Nsamenang, 2006).

5.4 CULTURAL DIFFERENCES IN THE MEANING AND CONCEPT OF INTELLIGENCE

Why would Intelligence mean different things in different cultures? The answer lies in part in the following definitions of intelligence: "Intelligence comprises the mental abilities necessary for adaptation to, as well as shaping and selection of, any environmental context." (Sternberg, 1997, p.1030). Because different cultures would require different kinds of adaptations from the individuals along with shaping and selection of environmental contexts. Also, "Intelligence is a general capacity of the individual consciously to adjust his thinking to new requirements" (Stern, 1914).

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Every culture poses different problems and requirements, so intelligence in one culture would differ from intelligence in another culture because it is culture that pegs an act as intelligent or unintelligent by providing a context.

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Asian notion of Intelligence

There are vast cultural differences in Asia on account of multitude of prevalent religions and beliefs in the continent. India, a Hindu-majority nation is a cauldron of various cultures with its long history of invasions and foreign migrants. Other nations in the continent also embrace their distinct cultural traditions and beliefs such as Confucianism, Taoism, and Buddhism. The intelligence is inseparable from religion and morality (Das, 1994). Non-western cultures have different notions of intelligence but there are some commonalities also amongst them such as emotional competence. For instance, people in India and East Africa value accomplishing a task (Berry & Bennett, 1992; Jones, Rakes, & Landon, 2013; Srivastava & Misra, 2001).

Confucian Notion of intelligence

Confucius was an ancient Chinese philosopher and teacher, whose teachings founded the belief of Confucianism. In Confucian tradition, intelligence encompasses the qualities such as (a) the ability to identify areas of intelligence in others, (b) self-knowledge, (c) problem-solving skills, (d) verbal fluency, (e) the ability to think actively and flexibly, and (f) the ability to make healthy personal decisions (Pang, Esping, & Plucker, 2017). An intelligent individual devotes his/her life to build a moral character and maintains social relationships. Acquiring education is highly valued in this tradition. An educated individual is perceived as intelligent. Much value is ascribed to education for its role in self-cultivation and self-regulation (McLean, 1995). Confucius said that “the intelligent man is a person without perplexity” (*The Analects*, IX.29, XIV.28)

Hindu Notion of Intelligence

The Sanskrit word used to imply intelligence is ‘*buddhi*’ and it far more pervasive and wider in scope than the western notion of intelligence. Das conceptualized *buddhi* to include mental effort, determined action, feelings, opinions, knowledge, discrimination and understanding (Das, 1994; Das, Naglieri, & Kirby, 1994). Intelligence in Indian tradition puts emphasis on connecting with the social world and environment (NCERT, textbook of XII). It is termed as *integral intelligence*.

Taoist Notion of Intelligence

Taoism, also spelled Daoism, is another tradition originating in ancient China. It is a major belief in China, Japan, Korea, Vietnam and Korea. The Taoist philosophers pursue the understanding of *Tao* (the true greatness) and call it the ‘great understanding’. They differentiate it from all other kinds of knowledge which they

term as ‘little understandings’. An intelligent person, according to Taoism realises that he/she is part of the universe and hence models his/her behaviour after Tao. An intelligent person responds to situations objectively and adjusts according to the situations “with the immediacy of a shadow adjusting itself to a moving body” (Graham, 1990, p. 4).

Buddhist Notion of Intelligence

In Buddhist tradition, intelligence is in attaining enlightenment stage which is characterized by wisdom, focused attention, morality and generosity. An enlightened state entails letting go of ego-centric thoughts to attain real knowledge as a poor temperament is a hurdle to assimilate knowledge (Das, 1994).

African Notion of intelligence

Africa is a continent with a large number of ethnic groups and cultures. For instance, the Yoruba people of Western Nigeria perceive a sensible behaviour or *ogbon* as intelligence. The Ibo culture views practical skills as intelligent (Ogbu, 1988). Zimbabweans value non-cognitive skills such as social competence, lovemaking and even witchcraft (Ngara & Porath, 2004). Serpell (1976) noticed that some African communities tend to view intelligence as social competence as there is an extended family system in those cultures. “When rural parents in Africa talk about the intelligence of children, they prefer not to separate the cognitive speed aspect of intelligence from the social responsibility aspect,” says Serpell (1976). Sternberg and Grigorenko (2004) investigated the concept of intelligence in the Luo people in rural Kenya. They found four concepts characterising intelligence: a) “*rieko*, which is similar to the Western idea of academic intelligence but also includes specific skills; b) *luoro*, which includes social qualities like respect, responsibility and consideration; c) *paro*, or practical thinking; and d) *winjo*, or comprehension”. Among these four, only *rieko* corresponds to the traditional Western standards of intelligence.

Western Notion of Intelligence

Western cultures are more technologically advanced than other cultures and are different from eastern cultures in their promotion of ‘technological intelligence’. Technologically advanced cultures promote and value the skills of generalization, abstraction, speed, minimal moves, mental manipulation, achievement orientation etc. whereas non-western cultures peg self-reflection, social and emotional competence as intelligent behaviour (Ogbu, 1988; Vernon 1969). Intelligence is viewed in such cultures as being adept in practical skills and abilities relevant to everyday life.

Conclusion

Culture provides us a context, and a worldview. It colours our perception of almost everything. The definition of intelligence has been a controversial topic since the

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beginning of the construction of the first intelligence tests. There is no consensus among thinkers on what intelligence is. Cultures define intelligence on the basis of their ecological and social demands. Intelligence cannot be understood out of the context where it originated. The people in different cultures not only think different things but also their ways of thinking about these things are different. Cross-cultural research has been invaluable in understanding psychological phenomenon across various cultures and would remain so.

Check Your Progress

1. Define culture.
2. What is Vygotsky's theory of cognitive development?
3. What is a culture-fair test of intelligence?
4. What is a cross cultural research?
5. Who is an intelligent person according to the Taoist notion of intelligence?

5.5 ANSWERS TO CHECK YOUR PROGRESS QUESTIONS

1. Culture is as “the set of attitudes, values, beliefs and behaviours shared by a group of people, communicated from one generation to the next via language or some other means of communication”.
2. Vygotsky's Cognitive Development Theory (1978) conceptualizes the role that culture plays as a mediator in the formation and development of specific abilities. The cognitive abilities such as learning, memory, attention, and problem solving etc. are socially guided and constructed and it is attained with the help of culture-specific tools.
3. A culture fair test of intelligence is a test that is free from culture bias. Such tests elicit scores that reflect the ability of the examinees regardless of their cultural background.
4. Cross cultural researches are the researches that attempt to document the cultural differences among different populations. Methodologically, in such studies cultural group is the independent variable and psychological variables are dependent variables.
5. An intelligent person, according to Taoism realises that he/she is part of the universe and hence models his/her behaviour after Tao. An intelligent person responds to situations objectively and adjusts according to the situations “with the immediacy of a shadow adjusting itself to a moving body.

5.6 SUMMARY

- Culture comprises our beliefs, our ways of thinking, our customary practices, social interactions (transactions) etc.- which then influence how we behave, how we conduct ourselves in society and also all the prejudices we hold collectively.
- Intelligence refers to our ability to act rationally, adapt to new surroundings and learn from past experiences.
- Every culture poses different problems and requirements, so intelligence in one culture would differ from intelligence in another culture because it is culture that pegs an act as intelligent or unintelligent by providing a context.
- Cross cultural researches investigate the cultural differences among different populations. The cultural groups under investigation in cross cultural researches are national groups, ethnic groups, and language and race based groupings.
- The Eastern notion of intelligence is different from the western notion of intelligence. Western cultures are more technologically advanced than other cultures and are different from eastern cultures in their promotion of ‘technological intelligence’.

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5.7 KEY WORDS

- **Taoism:** It is a Chinese philosophy based on the writings of Lao-tzu, advocating humility and religious piety.
- **Universalism:** It is the philosophical and theological concept that some ideas have universal application or applicability. A belief in one fundamental truth is another important tenet in universalism.
- **Relativism:** It is a family of philosophical views which deny claims to objectivity within a particular domain and assert that facts in that domain are relative to the perspective of an observer or the context in which they are assessed.

5.8 SELF ASSESSMENT QUESTIONS AND EXERCISES

Short-Answer Questions

1. Define intelligence.
2. What is the perspective of Relativists and Universalists on intelligence?
3. What are the valued skills in technologically advanced cultures?

4. Define *buddhi*.

5. Write a short note on the Buddhist notion of intelligence.

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Long-Answer Questions

1. Discuss the ways in which culture influences intelligence.
2. Elaborate upon cross cultural research on intelligence.
3. Explain the cultural differences in the concept of intelligence.

5.9 FURTHER READINGS

Dalal, A.K. 2016. *Cultural Psychology of Health in India: Well-Being, Medicine and Traditional Health Care*. New Delhi: Sage Publications India.

Singh, K., Junnarkar, M., & Kaur, J. 2016. *Measures of Positive Psychology: Development and Validation*. New Delhi: Springer.

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UNIT 6 CULTURE AND HEALTH

Structure

- 6.0 Introduction
- 6.1 Objectives
- 6.2 Definitions of Health
- 6.3 Historical Viewpoint of Health Psychology
 - 6.3.1 Culture Influences Attitudes and Beliefs towards Health and Diseases
 - 6.3.2 Sociocultural Influences on Health and Illness
- 6.4 Answers to Check Your Progress Questions
- 6.5 Summary
- 6.6 Key Words
- 6.7 Self Assessment Questions and Exercises
- 6.8 Further Readings

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6.0 INTRODUCTION

An individual is a part of community. Thus, mapping of health issues is done within the context of culture. Researchers, policymakers, and practitioners have found a link between sociocultural variables and health and well-being of individuals. Angel and Williams said ‘the subjective experience of illness, the help-seeking behaviour it elicits, as well as the response of society to an individual’s symptoms and behaviour reflect more than purely scientific or clinical criteria. Cultural beliefs and practices, language, social norms, and even potential factors also come into play’. Government actions i.e. formulation of national health policies play an important role in designing health prevention and health promotion interventions.

6.1 OBJECTIVES

After going through this unit, you will be able to:

- Analyze the definitions and historical viewpoint of health
- Discuss the goals and current status of health psychology
- Examine the cultural influences on attitudes and beliefs related to health and diseases
- Describe the sociocultural influences on physical health and medical disease process

6.2 DEFINITIONS OF HEALTH

Health and well-being is one of the top goals of human beings. It strives to help people achieve good life or experience optimal level of physical and psychological

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functioning. The paradigm of positive psychology drew attention towards human strengths and virtues and well-being (Peterson and Seligman 2004; Peterson et al. 2007). Martin Seligman's PERMA Model of well-being works on 5 core elements of well-being: Positive Emotions, Engagement, Relationships, Meaning, and Achievement. The model very well considers the role of social elements (relations) in the pursuit of health and well-being. Similarly, Carol Ryff's six-factor model of psychological well-being focuses on social well-being element for optimal functioning of human beings (Ryff 2014). Another well-being enthusiast, Diener (1984) asserted that people's subjective well-being is affected by internal causes (both affective and cognitive) and external causes (circumstances of their lives).

The most widely used and accepted definition of health is given by World Health Organization. According to World Health Organization (1948), health is "a state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity." The definition of health is closely related to the concept of health defined in Indian medical texts. Most of the times, the term "wellness" is used synonymously with "optimum state of health".

Let us understand the meaning of above given definition of health. It focuses on the following parameters of health:

1. If I have good health, then I can do what I want to do.
2. I experience optimal state of physical and psychological well-being.
3. I can utilize my body parts to energize myself.
4. I can perform normal daily routine activities at an optimal level.

Joseph Matarazzo (1980) defined health psychology as "the aggregate of the specific educational, scientific and professional contributions of the discipline of psychology to the promotion and maintenance of health, the prevention and treatment of illness, the identification of diagnostic and etiologic correlates of health, illness and related dysfunction, and the analysis and improvement of the healthcare system and health policy formation."

In a review of "*Current Trends in Health Psychology*" at the Annual BPS Conference held in 1993, Health psychology was proposed to be "the study of psychological and behavioural processes in health, illness and healthcare." (c.f. Johnston, 1994).

In Sanskrit and Hindi, health is also called "swastha" and is defined as 'being in one's self; being in one's natural state; relying upon one's self and self-sufficient' (Moneire-Williams Dictionary 2008; revised; c.f. Misra, 2018).

Sushruta (ancient surgeon) defined health as "prasannan-mendriyamanah swastha" meaning "health is a state of happiness and a feeling of spiritual, physical and mental well-being." (Sharma, 1981, pp. 239–240).

As discussed by Verma (1979), Sushruta elaborated the definition of health by incorporating the following parameters:

- Samdosha - Balance of bodily humours
- Samagni - Kindred healthy digestion
- Samadhatu - Typical body tissues
- Malakriya – Typical process of excretion
- Prasannatmanendriyamana - coordination of mind, body, and soul to sustain happiness

In, Charaka Samhitā (the ancient text on the Indian system of medicine), a description on the characteristics of happy (sukhswarup) and unhappy (dukhsvarup) life is given. Happy life constitutes that the person is not suffering from any psychiatric disorder, has strengths, energy, knowledge, efficient sense organs, wealth and other favourable enjoyments, (Srivastava & Misra, 2011).

Patanjali has defined health as ‘optimal utilisation of one’s physical, intellectual and emotional faculties to maintain harmony with self without undue preoccupation with the environment.’ (Verma, 1979) (c.f. Abhyankar, 2015).

Patanjali conceptualized healthy mind as having consistent rhythmic interaction and harmony between all the components (such as cognitive self, psychological self, physical self, and social self). The interaction of six foes or the primary instincts also known as shat ripus (Kama: lust, Krodha: anger, Lobha: greed, Mada: Pride or aggression, Moha: desire and Matsar: jealousy) make the individual vulnerable to psychological problems (Verma, 1979). Individual’s swabhaava or personality has been discussed as the concept of triguna in scriptures like Atharva Veda, Bhagwad Gita and Sankhya Darsana (c.f. Srivastava, 2012).

Health can also be understood by The Health Belief Model (Rosenstock et al., 1974) and history of Health-Illness Continuum.

The Health Belief Model illustrates the perception of health and illness from individuals’ point of view, modifying factors provided by health care professionals and expected actions. In simple terms, on the one hand, it focuses on people’s perception of illness and on the other hand, it encourages them to seek and follow advice of medical help. The model throws light on perceived threats and benefits in relation with four constructs given below:

1. Perceived susceptibility of affliction by a condition.
2. Perceived severity of condition and its consequences.
3. Perceived benefits of advised action to reduce risk or severity.
4. Perceived costs to advised action.

Evaluation of given four constructs determines to individuals’ degree of compliance with recommended treatment programme. Two other constructs were added in the model i.e. ‘cues to action’ and ‘perceived self-efficacy’ determining individuals’ readiness. The model has been widely applied in preventing illness, enhancing compliance with recommended medical treatment, and maintaining regular follow-up (c.f. Mehta and Kapoor, 2018).

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Health and Illness Continuum focuses on questions, responses and experiences people have towards states of health and illness. It also discusses the active role of individuals in managing health and the course of illness (c.f. Spector, 2019).

The theoretical perspective of health discussed above supports the notion that health is understood from biological and socio-cultural viewpoint, both.

6.3 HISTORICAL VIEWPOINT OF HEALTH PSYCHOLOGY

Literature review clearly tells us that within Eastern culture, classical treatment paradigm was guided by cultural belief systems for curing any illness. Medical treatment was considered as a last refuge for treating mental illness (Frankel, 1986; Hamnett & Connell, 1981; Stavovy, 1996; Decock, Hiawalyer, & Katz, 1997; Macfarlane, 2009).

During ancient times, most cultures acknowledged the connection between mind and body. The origin of disease in body were thought to be caused by evil spirits, and exorcism and shamanism were practised to treat diseases. Greek philosophers identified that imbalance in four bodily humors (blood, black bile, yellow bile, and phlegm) causes illness. Thus, the goal of treatment is restoration of balance in bodily humors. Greek philosophers believed in the connection between personality types and four bodily humors e.g. blood is associated with passionate temperament, yellow bile is associated with anger, black bile is associated with sadness, and phlegm is associated with a relaxed approach to life. During Middle Age, disease was thought to be caused by God for immoral deeds, and remedy consisted of pushing out supernatural forces by harming the body. Slowly, such belief system faded away. Instead of torturing the body, prayer and adopting moral deeds were thought to be a better treatment for eradicating disease from the body. During this time, the priests at the Church played the role of a physician and thus, medical practice and the practice of religion became alike. As Renaissance age started, great progress was made in advancing in medical sector. Medical practitioners focused on biomedical model i.e. illness can be explained on the basis of abnormal bodily or organic factors or biochemical imbalances. The biomedical model assumed that other factors like psychological, social and cultural are unimportant in explaining disease process. The biomedical model lost its relevance with breakthrough of modern psychology, especially with Sigmund Freud's early work on conversion hysteria. According to Freud, specific unconscious conflicts can produce physical disturbances that symbolize repressed psychological conflicts. Although this viewpoint is no longer central to health psychology, it gave rise to the field of psychosomatic medicine. The Indian school

of thought goes beyond biomedical approach and gives importance to *Ayurveda*, which follows a holistic approach in healing or achieving an ideal state of health or *swastha* (Jaipal 2013). Also, the approach takes into account the environment, changing seasons and circumstances while studying health. In the United States of America, around the 1970's, health psychology started making its appearance as a different discipline of psychology. William Schofield had been a pioneer in bringing attention to *The Role of Psychology in the Delivery of Health Services* in 1969. He proposed novel form of education and training for future psychologists. In 1973, APA considered his proposal and established a task force to acknowledge the role of psychologists could be to help people in managing their health-related behaviours, help patients manage their physical illness and also, to train healthcare professionals to work more productively with patients (Johnson, Weinman, & Chater, 2011; Schonfield, 1969). The outcomes of the Alameda County Study (1960) indicated that people who ate proper meals and exercised regularly, maintained a healthy weight, took adequate sleep, avoided smoking and reduced their intake of alcohol were found to be in better health and lived longer (Belloc & Breslow, 1972). Ader and Cohen (1975) studied and understood the impact of psychosocial stress on immunity and cardiovascular system. The Surgeon General's seminal report, "*Healthy People: The Surgeon General's Report on Health Promotion and Disease Prevention*" published in 1979 initiated national strategy "*Healthy People 2000: National Health Promotion and Disease Prevention Objectives*" for improving the health of the American people. They acknowledged the impact of lifestyle and environmental factors in prevention of illness and health promotion. In 2011, *Healthy People 2020* was released to keep up the momentum (c.f. Spector, 2012).

Sterling and Eyer (1981) studied the relationship between physiology and psychology. In United Kingdom, Marie Johnston and John Weinman, felt a great need for a separate section for Health Psychology in *The BPS Bulletin*. In 1986, it came into existence (Johnston et al., 2011). In 1997, Health Psychology became a separate division in UK which took care of professional training needs and practice of health psychologists (Johnston et al., 2011). Health psychology has come a long way. Advancement in research and practice in health psychology is rapidly growing (Johnston et al., 2011; Fishbein & Ajzen, 1975).

Goals of Health Psychology (Ogden, 2012; Taylor, 2015)

1. It aims to study physiological, psychological and behavioural aspects in the aetiology of any illness. **Matarazzo (1980)** proposed that health psychologists aim for "the identification of etiological and diagnostic correlates of health, illness and related dysfunction, and the analysis and improvement of the health care system and health policy formation." (c.f. Pitts, 2001). (The term "etiology" refers to "causes of illness").

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2. It aims in prevention of illness and promotes physical and psychological health and well-being.
3. It aims to guide people on developing stress management skills so that it does not adversely affect their health.
4. It aims to help people already struggling with illness to follow-up their treatment plan.
5. It aims to train medical professionals to improve communication skills with patients and implement interventions to help prevent illness.

Role of Health Psychologists

Health psychologists work in a variety of settings: in hospitals, private clinics, public health departments, universities, schools, medical schools, global organizations, and non-governmental organizations. Health psychologists strive to understand the impact of biological, psychological, and social factors influencing health and illness. In United States of America, health psychologist is also called clinical health psychologist, professional health psychologist.

Various roles of health psychologists are given below:

1. They are specialists in helping people deal with managing stress emanating from psychological and emotional aspects of health and illness (The British Psychological Society, 2011).
2. They play an important role to apply their knowledge to improve health care system and offer recommendations for health policy. For example, they may advise general physicians about better ways to communicate and empathise with their patients (The British Psychological Society, 2011).
3. They work closely with other healthcare professionals (like physicians, dieticians, occupational therapists etc.) in conducting research, assessments and providing treatment services (The British Psychological Society, 2011).
4. They focus on enhancing prevention and design interventions related to lifestyle modification. For example, they direct and encourage people to maintain weight, stop smoking, drinking etc. (The British Psychological Society, 2011).

Health psychologists work with people on individual basis as well as in a group setting.

Current Status of Health Psychology

Health psychology has its roots in the field of clinical psychology (Rogers, 1983). Health psychology is both a theoretical as well as an applied field. It has expanded across the globe, UK, USA, Europe, Australia, New Zealand etc. It has four different divisions to its credit which are given below:

1. Clinical Health Psychology
2. Public Health Psychology
3. Community Health Psychology
4. Critical Health Psychology

In Europe and North America, Occupational Health Psychology have also emerged (Marks, Murray, & Estachio, 2018; Schonfield, 2018; Quick, 1999; Raymond, Wood, & Patrick, 1990; Everly, 1986). The Government of India promoted research and practice in AYUSH (Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homoeopathy) which is believed to follow a holistic approach. Also, Central Council of Indian Medicine promotes research in the above areas. The US National Institute of Health (NIH) acknowledged the importance of alternative therapies and founded National Centre for Complementary and Alternative Medicine. Gradually, the use of alternative therapies is spreading at a global level (Sunderrajan et al. 2013).

There are a number of leading health psychology journals like *Journal of Health Psychology*, *Health Psychology Journal*, *Frontiers in Psychology*; *Health Psychology*, the *British Journal of Health Psychology*, *Psychology and Health*, and *Applied Psychology: Health and Well-Being*. Health psychology has a special position in *Division 38 of the American Psychological Association (APA)*. Other organizations like *the British Psychological Society (BPS)*, *the European Health Psychology Society*, and *the College of Health Psychologists of the Australian Psychological Society (APS)* also include the Division of Health Psychology (Belar, Mendonca McIntyre, & Matarazzo, 2003).

Health psychologists use distinct qualitative, quantitative and action research methods such as experimental research studies, quasi-experimental studies, cross-section research design, longitudinal studies, case studies etc. Universities have begun to offer doctoral and postdoctoral level training programs in health psychology.

6.3.1 Culture Influences Attitudes and Beliefs towards Health and Diseases

Cross-cultural research has offered convincing evidence that attitudes and beliefs towards health and diseases differ in cultural setting (Black 2013; Huey and Jones 2013; Misra, 2018). To understand cultural differences, firstly we need to understand **The Health Traditions Model**. It gives importance to understand peoples' cultural beliefs towards health and illness. According to this model, individuals use physical, psychological and spiritual methods for maintaining, protecting, and restoring health. Individuals explore available resources within the family context and community to meet health needs. They may prefer to use traditional healing methods to maintain health or combine them with modern medical methods.

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In psychology, widely studied constructs to explain cultural similarities and differences are *Individualism* and *Collectivism* (Uskul and Sherman, 2009).

Other constructs include, *masculinity*, *power distance* and *uncertainty avoidance*, (Hofstede, 1980), *survival versus self-expression* (Inglehart, 1997) and *tightness versus looseness* (Triandis, 1995). For the current unit, we will focus on differences between *individualism* and *collectivism* cultures and their perception of health and illness.

Individualistic cultures (e.g., The United States, The United Kingdom) focus on “*the self*” or *independent self*, autonomy, personal goals, self-satisfaction, and personal decision-making (Triandis, 1995; Markus & Kitayama, 1991; Kim & Sherman, 2007; Oyserman, Coon, & Kimmelmeier, 2002). Lee, Aaker, and Gardner (2000) identified people living in individualistic cultures focus on the positive outcomes. They are free to choose relationships. They can smoothly make entrances and exits in relationships (Adams, 2005). Whereas, Collectivistic cultures, (e.g., East Asian cultures) focus on *interdependent self*, relationships, and are oriented towards societal goals and social harmony (e.g., Markus & Kitayama, 1991; Triandis, 1995). People’s decisions are influenced by social, moral, communal obligations and group expectations (Oyserman et al., 2002; Triandis, 1995). They try to avoid behaviours that might cause harm to society (Markus & Kitayama, 1991). They tend to focus on the negative outcomes they want to avoid (Lee et al. , 2000). Relationships are less voluntarily chosen as compared to individualistic cultures. People find it difficult to leave any relationship (Adams, 2005) (c.f. Uskul et al. 2009). In collectivistic cultures, there is a support for component of spirituality and its positive effects on well-being. Indian model of well-being views human being as “*a biopsychosocial-spiritual entity*” (c.f. Misra, 2018; Misra 2005).

Historical literature of mental health practice tells us that different cultures and ethnic groups have different views regarding illness (Edman & Koon, 2000; Edman & Kameoka, 1997; Narikiyo & Kameoka, 1992; Kleinman, 1980). Thus, it is important for health professionals to understand cultural/ethnic norms and beliefs, and patients’ presentation of somatic complaints as it affects diagnosis and management of illness. Many cultures put their faith in supernatural agents as causes of illness. Before we move ahead, we need to understand the term “*ethnicity*”. Culture is a primitive part of one’s ethnic background. The classic definition of “*ethnic*” is “*of or pertaining to a social group within a cultural and social system that claims or is accorded special status on the basis of complex, often variable traits including religious, linguistic, ancestral, or physical characteristics*” (Davies, 1976, p. 247).

As discussed in Al-Krenawi (2019), in Papua New Guinea, Swahili people of Kenya, Middle East, Africa, mental illness is caused by possession of evil spirits, witches or supernatural agents. In Malaysia, people assign meaning to black magic and religious causes as well. In India, various mental illnesses like schizophrenia and other illnesses like epilepsy are caused by demons/spirits, and bad karma

(c.f. Al-Krenawi, 2019). Spirits are named as “Jinn” (Watt & Montgomery, 1970, p. 153). People in such cultures turn to traditional healers or spirit healers also known as a “Darvish,” for mental health treatment (Banerjee & Banerjee, 1995). The “*Darvish*” (religious authority) holds a status of a physician who also tries to offer healthy lifestyles to patients for preventing illness (Al-Krenawi, 2019). The “Darvish” performs a ceremony (called “*Hadrh*” or “*Dhikr*”) with a group of patients to bring them close to God. (c.f. Al-Krenawi, 2019). A spirit healer tends to communicate with spirits and blows them away. Research evidence from different cultures across 26 countries (including India) indicated that rural communities rarely preferred psychiatric medication and mostly reached for alternate medical treatment (Sorsdahl, Stein, & Flisher, 2010; Sartorius et al., 1996; Jablensky et al., 1992). Gorkin and Othman (1994) observed people prefer traditional healers as they believe them in using non-stigmatizing and culturally acceptable approaches.

In Arab Bedouin society, a healing ritual called “*Rijal Allah Al-Salhin*” (which means invocation of saints/God/of the Prophet Muhammad) is performed at patients’ house involving close family members. A special technique is used in this ritual called “*The Tazeem*” (a kind of dialogue or conversation with the spirit). It allows spiritual healer to understand the reason of patients’ possession and paves a way for him/her to resolve it (c.f. Al-Krenawi, 2019). The process is accompanied by music as it is believed that spirits are allured by the sound of music and come to terms with communication. The drum (also called “*The Dg Altaar*”) is used to drive the spirit out of patients’ body. In some cases where spirits resist to leave patients’ body, the healer uses a stick to “beat it out” (c.f. Al-Krenawi, 2019).

As discussed in “*How Culture Influences Health*”, an article published by ‘Caring for kids new to Canada’ in 2018, cultural impact in shaping our attitude towards health and illness is huge, For example:

- It influences individuals’ perception of health and illness.
- It influences individuals’ belief system regarding causes of diseases. Belief systems regarding illness differ among different ethnic migrant and native groups. For example, In USA and UK, several studies indicate ethnic American students, Japanese American, Filipino American, Caucasians, and Koreans demonstrate different cultural beliefs regarding causes of mental illness (Edman, Danko, McArdle, Foster, & Glipa, 1999; Dein & Stygall, 1997; Tabassum et al., 2000; Wong, Tran, Kim, Van Horn, & Calfa, 2010). Ethiopian Jews in Israel understand mental health from a cosmological perspective (Youngmann & Zilber, 2014) (c.f. Al-Krenawi, 2019). Culturally determined belief systems about health and illness are important factors to explain and predict health behaviour (Mishra and Awasthi 2004; Rosenstock et al. 1988). In India, cancer is also believed to be caused from supernatural forces, past sins, curses, and evil eye (Dubey 2003).

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- It impacts individuals' willingness to express and discuss about psychiatric conditions because they are stigmatized. According to Erving Goffman (1963), social stigmas hold up individuals from conforming to society. For example, mental illness is considered to be a shameful thing in Vietnam. Due to stigma associated with it, Vietnamese tend to somaticize mental illness and avoid visiting mental health clinic (LaBorde, 2010). Chinese, Indian, and Pakistani patients are reluctant to share about symptoms of mental illness because of stigma that may cause shame and guilt (Laughlin and Braun, 1998).

Kapil (2019) reported that according to research done by The Commonwealth Fund, minorities in the United States (Hispanics and Asians) are less likely to choose mental health treatment.

- It impacts individuals' choice towards health promotion activities.
- It impacts an individual's 'choice of help seeking behaviour. For example, in some cultures, individuals prefer to consult alternate medical practitioners over medical doctors for any disease. For example, Chinese believe in holistic approach to illness and healing such as acupuncture, massage, herbs etc. (Do, 2014). Asian/Pacific Islanders take opinion of older family members in seeking recommendations of health care professionals (Laughlin et al., 1998).
- It influences communication style between health care providers and patients.
- It impacts individuals' degree of compliance with treatment options recommended by medical health professionals. Cultural beliefs can inhibit the use of modern healthcare services (Edman and Koon, 2000; Razali and Najib, 2000; Tabassum et al., 2000). For example, in a study, it was found that U.S. Latino population shows a high rate of non-adherence towards medical treatment of major depressive disorder due to lack of knowledge and familiarity regarding medicine, stigma, fear of side-effects etc. (Price, 2014).
- It influences individuals' acceptance of preventive measures of diseases and also, diagnosis of any disease.
- It influences individuals' perceptions of death.
- It impacts the family's choice to support individuals' illness. For example, mental health of LGBT individuals is greatly affected by family and social acceptance towards sexual orientation (US Department of Health and Human Services, 2010).

6.3.2 Sociocultural Influences on Health and Illness

The document Healthy People 2020 considered the interaction between "the range of personal, social, economic, and environmental factors that influence health status."

Social psychologists understood the role of social and cultural variables as important determinants of health. Socio-cultural determinants of health influence every area of our life (e.g., the way we live, the way we interact with others, the meaning of lifestyle, our health and well-being, and how we learn and work etc.). The role of psychosocial factors in therapy is well-researched and established. **Biopsychosocial Model of Health and Wellness** proposed by Engel (1977) focuses on the interaction between physiological, psychological and social factors in understanding health, illness and management (Mehta and Kapoor, 2018). The model holds a good applied value in mental health care practice. While preparing DSM-IV, American Psychological Association (2000) acknowledged psychological factors affecting mental health (which involve *'occurrence of one or more emotional or behavioural factors that aggravate or adversely affect the physical health problem or condition'*) (c.f. Mehta and Kapoor, 2018).

Here are some important socio-cultural determinants of health:

1. **Socioeconomic Status (SES):** Diener and Seligman (2004) suggested that a certain amount of income is necessary to feel satisfied with life. However, having a lot of money can have a debilitating effect on subjective well-being. Conditions like a safe society, having access to healthy grocery, and having more opportunities for physical exercise have a direct effect on people's health (American Academy of Family Physicians, 2020). Poor living conditions can cause health problems and thus, affect quality of life and help-seeking behaviour. (American Academy of Family Physicians, 2020).
2. **Education:** Extensive literature shows a relationship between level of education and people's perception and decision-making towards their health and well-being. NCHS (1998) reported that Caucasian infants (whose mothers received less than 12 years of education) were high on mortality rate before their first birthday. Similar pattern was observed for other ethnic groups (including Hispanic American, African American, American Indian, and Asian/Pacific Islanders) (NCHS, 1998). NCHS study also reported the effect of educational disparities on health in growing years (e.g., sedentary life-style, obesity, cigarette smoking, etc.), in midlife (e.g., high mortality rates), and at older age (prevalence of limited activity, suffering from chronic diseases like diabetes and hypertension) (c.f. Hernandez and Blazer, 2006). Tripathi (2013) reported that educated women of Sabia village of Kushinagar district of Eastern Uttar Pradesh engaged themselves in health-promoting behaviour more as compared to those with no formal education. Therefore, education is likely to help people participate in healthy behaviour and in seeking professional help during illness.
3. **Language:** Language can prevent people from different cultural settings to take treatment. It has been noted that lack of specific terminology for

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mental health issues can interfere with health related behaviours. For example, an Arab population suffers from describing mental health problems as many of them have not been introduced to mental health terminologies. They prefer to use limited social services as compared to general health services (Al-Krenawi, 2019).

4. **Gender Roles:** Existing evidence indicates gender differences affecting attitudes and beliefs related to health-related behaviours. For example, in developing countries, women patients’ disclosure of psychological issues is difficult, and is often stigmatized (c.f. Mental Health and Abuse, 2021).
5. **Social Support:** Evidence has indicated social network and social support are linked with wide range of health outcomes (Berkman and Glass, 2000; Cassel, 1976). A wealth of evidence indicates that social networks have been found to predict the risk of having chronic diseases like cancer, myocardial infarction, cardiovascular disease, cancer etc. (Berkman and Glass, 2000). On the other hand, social support acts as a buffer against stress and mental health disorders (Kawachi and Berkman, 2001). Cross-cultural studies indicate that the importance of social support differs in cultures. For example, Americans seek less social support (Kim, Sherman, Ko, & Taylor, 2006; Uskul et al., 2009). They fear losing their independence, criticism by others, and feel they might disrupt group harmony which discourages them from seeking social support to cope up with stressors (Kim et al., 2006; Taylor et al., 2004; Uskul et al., 2009). Research indicates that Asian groups avoid disclosure of stressful events and prefer *implicit social support* such as spending time with social groups without disclosing the stress (Kim et al., 2008).

The above discussion shows how important it is to integrate sociocultural knowledge in mental health practice. Recent research papers show that there is a rising trend in following culturally informed approach in psychiatry, counselling and psychotherapy (Raguram et al., 2001). Cultural studies in psychology is integrated in academic curriculum across the country as well as at a global level.

Check Your Progress

1. What are the five elements on which Martin Seligman’s PERMA Model of well-being works?
2. What does the health belief model illustrate?
3. What did the outcomes of the Alameda County Study indicate?
4. What do collectivistic cultures focus on?
5. State some factors that have a direct effect on people’s health.

6.4 ANSWERS TO CHECK YOUR PROGRESS QUESTIONS

1. Martin Seligman's PERMA Model of well-being works on five core elements of well-being: Positive Emotions, Engagement, Relationships, Meaning, and Achievement.
2. The health belief model illustrates the perception of health and illness from individuals' point of view, modifying factors provided by health care professionals and expected actions.
3. The outcomes of the Alameda County Study (1960) indicated that people who ate proper meals and exercised regularly, maintained a healthy weight, took adequate sleep, avoided smoking and reduced their intake of alcohol were found to be in better health and lived longer.
4. Collectivistic cultures, (e.g., East Asian cultures) focus on *interdependent self*, relationships, and are oriented towards societal goals and social harmony.
5. Conditions like a safe society, having access to healthy grocery, and having more opportunities for physical exercise have a direct effect on people's health.

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6.5 SUMMARY

- Angel and Williams (2013) said 'the subjective experience of illness, the help-seeking behaviour it elicits, as well as the response of society to an individual's symptoms and behaviour reflect more than purely scientific or clinical criteria. Cultural beliefs and practices, language, social norms, and even potential factors also come into play' (c.f. Misra, 2018).
- The most widely used and accepted definition of health is given by World Health Organization. According to World Health Organization (1948), health is "a state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity."
- In Sanskrit and Hindi, health is also called "swastha" and is defined as 'being in one's self; being in one's natural state; relying upon one's self and self-sufficient' (Moneire-Williams Dictionary 2008; revised; c.f. Misra, 2018). Sushruta (ancient surgeon) defined health as "prasannamendriyamanah swastha" meaning "health is a state of happiness and a feeling of spiritual, physical and mental well-being." (Sharma, 1981, pp. 239–240).

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- Literature review clearly tells us that within Eastern culture, classical treatment paradigm was guided by cultural belief systems for curing any illness. Medical treatment was considered as a last refuge for treating mental illness (Frankel, 1986; Hamnett & Connell, 1981; Stavovy, 1996; Decock, Hiawalyer, & Katz, 1997; Macfarlane, 2009).
- Matarazzo (1980) proposed that health psychologists aim for “the identification of etiological and diagnostic correlates of health, illness and related dysfunction, and the analysis and improvement of the health care system and health policy formation.” (c.f. Pitts, 2001). (The term “etiology” refers to “causes of illness”).
- Health psychologists work in a variety of settings: in hospitals, private clinics, public health departments, universities, schools, medical schools, global organizations, and non-governmental organizations. Health psychologists strive to understand the impact of biological, psychological, and social factors influencing health and illness. In United States of America, health psychologist is also called clinical health psychologist, professional health psychologist.
- Health psychology has its roots in the field of clinical psychology (Rogers, 1983). Health psychology is both a theoretical as well as an applied field. It has expanded across the globe, UK, USA, Europe, Australia, New Zealand etc.
- Cross-cultural research has offered convincing evidence attitudes and beliefs towards health and diseases differ in cultural setting (Black 2013; Huey and Jones 2013; Misra, 2018).
- The document Healthy People 2020 considered the interaction between “the range of personal, social, economic, and environmental factors that influence health status.” Social psychologists understood the role of social and cultural variables as important determinants of health.
- Recent research papers show that there is a rising trend in following culturally informed approach in psychiatry, counselling and psychotherapy (Raguram et al., 2001). Cultural studies in psychology is integrated in academic curriculum across the country as well as at a global level.

6.6 KEY WORDS

- **Collectivism:** It is a value that is characterized by emphasis on cohesiveness among individuals and prioritization of the group over the self
- **Shamanism:** It is a religious practice that involves a practitioner who is believed to interact with a spirit world through altered states of consciousness, such as trance.
- **Individualism:** It is the moral stance, political philosophy, ideology and social outlook that emphasizes the moral worth of the individual.

6.7 SELF ASSESSMENT QUESTIONS AND EXERCISES

Short-Answer Questions

1. Define health.
2. Write a short note on the health belief model.
3. What are the goals of health psychology?
4. Write a short note on the role of health psychologists.

Long-Answer Questions

1. Discuss the historical viewpoint of health psychology.
2. Analyze cultural influences on attitudes and beliefs towards health and illness.
3. Explain the socio-cultural determinants of health and medical disease process in India.

6.8 FURTHER READINGS

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UNIT 7 SELF CULTURE AND PERSONALITY

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Structure

- 7.0 Introduction
- 7.1 Objectives
- 7.2 Personality and Culture
 - 7.2.1 Origin of Culture and Personality
 - 7.2.2 Main Contributors
 - 7.2.3 Big Five Inventory and Culture
- 7.3 Culture and Gender
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- 7.4 Answers to Check Your Progress Questions
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- 7.8 Further Readings

7.0 INTRODUCTION

The Culture Personality Theory was developed in the 1920s & 1930s. It centred on the influence of culture on childrearing behaviours & personalities. The culture personality theory incorporated aspects of anthropology, sociology & psychology to describe culture & personality variations. This unit explores how anthropologists deal with this subject. Culture & Personality also known as Psychological Anthropology examines the role of culture in shaping personality in an evolutionary context and considers questions of transitions to the culture on an individual basis. The theory was based on contemporary psychoanalysis which centred on the primacy of childhood and infantile effects of personality. Since the school was founded, many anthropologists attempted to learn about the universal characteristics (representative personality types) across cultures. Anthropologists have employed the psychological concepts such as conditioned stimuli & responses, drives, punishments, rewards, id impulses etc.

7.1 OBJECTIVES

After going through this unit, you will be able to:

- Analyze the role of personality in culture
- Describe the role of gender stereotypes in culture
- Examine the influence of gender on culture

7.2 PERSONALITY AND CULTURE

The culture in which you live is one of the most important environmental factors that shapes your personality (Triandis & Suh, 2002). The patterns of feeling, along with thinking and behaving, are signatures of one's personality (McRae & Costa, 1999).

'Culture and personality' is the earliest name of the school of thought, also called psychological anthropology. The field of 'culture and personality' emerged in the first half of the 20th century driven mainly by psychoanalytic-oriented anthropologists, psychiatrists, and psychologists. This movement thrived in the 30s and 40s and was considered as an exciting and influential paradigm in the social sciences. (Benedict, 1934; Kardiner, 1939; Dubois, 1944)

Markus and Kitayama (1998) "A cultural psychological perspective implies that there is no personality without culture; there is only a biological entity." Thus, culture provides the context in which personality develops, is observed, and acquires meaning (for both the individual and the observer), and as a result, the existence of universal personality traits is questioned.

The Culture and Personality movement was at the core of anthropology in the first half of the

20th century. It examined the interaction between psychological and cultural forces at work on the human experience. Culture and Personality was too divided to really be considered a "school of thought", it had no orthodox viewpoint, centralized leadership, or coherent training program. However, there were also some basic ideas with which most practitioners would agree. According to LeVine (2001), at a minimum, these would include:

- (a) Adult behaviour is "culturally patterned,"
- (b) Childhood experiences influence the individual's personality as an adult, and
- (c) Adult personality characteristics prevalent in a nation directly impact its culture, institutions, historical and social trends, and psychopathology.

Later, Sapir (1956), Wallace (1961), and others emphasized within-culture individual variations in personality and argued for the concept of 'modal personality' which acknowledged the existence of both central tendencies (i.e., prevalent personality types in each culture) and individual variability.

The socialization process moulds a person's emotions, thoughts, behaviours, cultural values and norms, allowing the person to fit into and function as a productive member in the surrounding human society.

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7.2.1 Origin of Culture and Personality

The study of culture and personality assessed how various socialization activities resulted in different personality types. The field expanded more with later work by Margaret Mead and Ruth Benedict. Mead's work, "Coming of Age in Samoa" (1928) provided "the first sustained consideration of the relation between personality and culture" (Winthrop, 1991). Culture and Personality reached its highest point during the 1930s and 1940s but started to lose support in the 1950s. It was considered as being non-academic, and the handful remaining practitioners changed their approach's name to psychological anthropology to save themselves from the stigma (LeVine 2001). This also broadened its scope. Contemporary psychological anthropology, among other pursuits, tries to narrow the gap between anthropology and psychology by examining the "cross-cultural study of social, political, and cultural-historical constitution of the self" (Lindholm, 2001). There is a lot of debate on exactly how the field of Culture and Personality was born. Some believe it emerged as a result of an interaction between anthropology and Freud's psychoanalysis (Singer, 1961). Robert A. LeVine (2001) explains its emergence with the publication in 1918 of W.I. Thomas and Florian Znaniecki's *The Polish Peasant in Europe and America*. Thomas and Zaniecki (1918) stated that "when viewed as a factor of social evolution, the human personality is a ground of the causal explanation of social happenings; when viewed as a product of social evolution, it is causally explicable by social happenings."

7.2.2 Main Contributors

The main contributors of the field are as follows:

- 1. Sigmund Freud (1856-1939):** Freud was an Austrian-Jewish psychiatrist. He was the most influential 20th-century psychological theorist. He gave what is recognized as "critical—period hypothesis" that human infants have passed through a period or stage in which they knew what they were showing later in their adulthood. This affected early cultural and personality research that gave birth to what is known as "Psychoanalytic Anthropology." In his anthropological work, particularly in *Totem and Taboo*, Freud's long-sustained interests in anthropology are reflected.
- 2. Erik Erikson (1902-1994):** He was a neo-Freudian, Danish-German-American psychoanalyst who was more culture-oriented, and less psychologically reductive. He was known for his socio-cultural philosophy and its influence on human growth. Erikson developed the five psychosexual phases of Freud into eight phases of human socialization, which were characterized by internal conflicts. In structuring personality, Erikson believed that the coherence of beliefs and values was very important and that the frustrations during childhood were directly reflected in a culture's religion and ritual (Lindholm, 2001).

- 3. Edward Sapir (1884-1939):** Edward Sapir was born in Germany and was five years old when he came to the United States. Sapir has been recognized as the first to explore the relationship between anthropology and language. He saw language as an instrument for shaping the human mind and described language as a verbal symbol of human relationships. He was known for exploring the links between language, personality and social behaviour and promoting the idea that culture is best understood to be analogous to personality (Lindholm, 2001).
- 4. Ruth Benedict (1887-1948):** At Columbia University, Ruth Benedict was a Franz Boas student. She thought that culture, rather than cultural determinism, was the product of human choices. The trend that brings about integration is named “special genius” by Benedict. Apollonian (one who will see the existence of peace, discipline & kindness) and Dionysian are two kinds of geniuses found in human society (changes aggressiveness). These two geniuses mould the personality of their group’s members. Among American Indians, contemporary European and Asian communities, Benedict conducted fieldwork. The importance of culture in individual personality development was spread by her main works, *Patterns of Culture* and *The Chrysanthemum and the Sword*. *Patterns of Culture* summarized the views of Benedict on culture and was one of the best-selling anthropology books of all time.
- 5. Margaret Mead (1901-1978):** Mead was born in Philadelphia, USA. She was a student, a lifelong friend, and Ruth Benedict’s collaborator. Both examined the relationship between cultural configuration, socialization in each unique culture, and the development of individual personalities. From a cross-cultural viewpoint, Mead’s works examined human growth and covered questions of gender roles and child rearing, both in American and international cultures. Her first work, *Coming of Age in Samoa*, was a bestseller which Mead built up as a leading figure in cultural anthropology. The book described how cultural expectations determined individual development and were not determined biologically.
- 6. Abram Kardiner (1891-1981):** Kardiner, who was one of the founders of the New York Psychoanalytic Institute, was born in New York City. His contribution concerned the interplay between individual development of personalities and situated cultures. He put forth his own idea, “the basic structure of personality.” He established a psycho-cultural model for the relationship in the various cultures between child-rearing, housing and decent styles. He identified primary institutions, i.e. what shapes the fundamental personality (e.g. child training, toilet behavior and family structure) and secondary institutions, i.e. what is produced in the process of shaping the basic structure of the personality (such as religion and art). He clarified that

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the basic structures of personality in a society influenced the types of personality that further influenced secondary institutions. In psychoanalysis, he was also noted for researching object relations and ego psychology. His interpretations were mainly presented in *The Individual and His Society* (1939) and *Society's Psychological Frontiers* (1945).

7. **Ralph Linton (1893-1953):** Linton was one of the pioneers of the theory of the fundamental structure of personality. He worked on Melanesian and American Indian ethnography and collaborated with Abram Kardiner to develop the view of personality mediation.
8. **Cora-Du-Bois (1903- 1991):** In cross-cultural diagnosis and the psychoanalytic study of culture, she was influenced by her mentor and collaborator, Abram Kardiner. Between 1937 and 1939, using participant observation, detailed case studies, life-history interviews, and numerous personality assessments, Dubois studied the island of Alor (now part of Indonesia). She wrote a book entitled *The People of Alor*, based on her ethnographic and psychoanalytic studies (1944). She advanced the idea of modal personality structure in this social-psychological research. Cora Dubois said that there is individual variation within a culture, and each culture shares the growth of a specific type that may not exist in its individuals. In 1945, the book *The Psychological Frontiers of Society*, consisting of careful explanations and interpretations of three societies, was co-authored by Cora Dubois, Abram Kardiner and Ralph Linton (the Comanche culture, the Alorese culture, and the culture of an American rural community). It explained the basic personality formed in each culture by the diversity of subject matter. The need to understand Japan's national characteristics during the Second World War was felt by some of the American anthropologists who helped to analyze it through Japanese films and books on Japan's history and culture. They concluded that they were violent fighters in the war because of the strict toilet training among the Japanese. In Japan, she compares child-rearing practices to flower Chrysanthemum. Chrysanthemum symbolizes a child's socialization during childhood, Japanese parents take care of their children at the time of childhood to make them flower like a chrysanthemum flower. They have to face a hard life when the kids are fully blossomed like adolescents. Children become hostile and abusive as a result of this. A sword always hangs on their neck, as their elders do not seek cooperation.
9. **Clyde Kluckhohn (1905- 1960):** Clyde Kluckhohn was an American anthropologist and social theorist (1905-1960). He is known for his long-term ethnographic work on the Navajo, resulting in two books, *To the Rainbow's Foot* (1927) and *Beyond the Rainbow* (1933). He and Henry

Murray co-edited *Personality in Nature, Society, and Culture* (1953), demonstrating the diversity found in culture and personality.

- 10. Robert LeVine (1931-Present):** Robert LeVine received his degree from the University of Chicago and was also a teacher at Harvard University, University of Chicago, and North-western University. He took part in field research in Kenya, Nigeria, Mexico, Nepal, Zambia, and Venezuela. He is known for helping to resuscitate psychological anthropology and has outlined studies that can be applied to a wide variety of social context (Shweder, 1999).

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7.2.3 Big Five Inventory and Culture

A study by Schmitt et al., (2008) found that on the responses to the Big Five Inventory, women scored higher on neuroticism, extraversion, agreeableness, and conscientiousness as compared to men across most nations. In 37 cultures, men scored higher than women in BFI Openness to Experience (in 8 cultures this difference was statistically significant), but in 18 cultures, women's scores on openness to experience was higher than men's (in 4 cultures this difference was statistically significant). Across the International Sexuality Description Project (ISDP), women scored significantly higher (Big Five Inventory) BFI levels of neuroticism, agreeableness, extraversion, and conscientiousness than men. Women reported higher on BFI Agreeableness in 34 ISDP nations than did men, with only South Korea displaying a significant difference in men reporting more agreeableness than reported by women. Gender differences were most noticeable on the Neuroticism dimension; in 49 ISDP nations, women scored significantly higher in BFI Neuroticism as compared to men. Women scored higher than men in BFI Conscientiousness in 23 ISDP nations. Women scored higher than men did in BFI Extraversion in 25 ISDP nations.

There is another study by Ward, Leong & Low (2004) based on two samples of sojourners and hosts in Australia and Singapore. The objectives of this research are (a) to explore the relationship between the Big Five personality dimensions and cross-cultural adjustment and (b) to test the "cultural fit" hypothesis. The first sample included 165 Singaporean and 139 Australian students in Australia; the second included 244 Australian expatriates and 671 Chinese Singaporeans in Singapore. Correlation analyses were undertaken that examined the relationship between neuroticism, extraversion, openness, agreeableness, and conscientiousness, as well as their discrepancies from host-culture norms, and cross-cultural adjustment. Agreeableness and conscientiousness were also linked to psychological well-being in both samples and to sociocultural adaptation in the Singaporean sojourning group. Findings demonstrated that neuroticism and extraversion were related to psychological and sociocultural adaptation in both sojourning samples.

7.3 CULTURE AND GENDER

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Culture forms assumptions about characteristics and behaviors suitable for women or men and about the connections between women and men, in other words, gender. Essential aspects of culture are gender identities and gender relations because they form the way everyday life is lived in the home, but also in the broader society and the workplace. Because of the cultural meanings given to being either male or female, gender, like race or ethnicity, acts as an organizing principle for society. This is obvious in the separation of labour by gender. There are consistent “women’s work” and “men’s work” trends in most cultures, both in the home and in the larger society, and cultural reasons for why this should be so. The trends and explanations vary and change over time between cultures. The general trend is that women have less personal autonomy, less resources at their disposal, and less control over the decision-making processes that form their communities and their own lives, although the precise nature of gender relations differs between societies. This gender-based pattern of inequality is both a question of human rights and development.

7.3.1 Culture and Gender Stereotypes

A gender stereotype is a common perception or preconception of characteristics or features that are or should be carried by women and men or of the positions that are or should be played by men and women. In other words, the gender stereotype concerns the features of females and males, which differentiate the two sexes. Gender stereotypes, for example, “women are nurturing” or “women are weak” may be both positive and negative. Gender stereotyping is the practice of ascribing specific qualities, characteristics, or roles to a particular woman or man solely because of his or her inclusion in the social group of women or men. At its heart, a gender stereotype is a belief and that belief will cause its holder to make assumptions about subject group members, women and/or men. In comparison, the practice of applying the stereotypical belief to an individual is gender stereotyping.

Men are stereotyped as independent, agentic, and goal oriented; women are stereotyped as interdependent, communal, and oriented toward others (Eagly & Steffen, 1984; Spence & Helmreich, 1978). These stereotypes affect important life outcomes such as hiring and promotion (Cuddy, Fiske, & Glick, 2004; Gorman, 2005; Heilman, 2001), job performance evaluations (Fuegen, Biernat, Haines, & Deaux, 2004; Heilman & Okimoto, 2007), academic performance (Inzlicht & Ben-Zeev, 2000), and even sexual harassment (Berdahl, 2007). The contents of gender stereotypes are accepted as pervasive and universal (Heilman, 2001), and are endorsed by both men and women (Cuddy, Fiske, & Glick, 2007; Wood & Eagly, 2010) and across cultures (Williams & Best, 1990).

Given that men as a group possess higher status in virtually every nation in the world (United Nations, 2009), and that higher status groups tend to be viewed as possessing more of whatever skills their society most values (Ridgeway, 2001), cultural values and gender stereotypes seem to sometimes align. In cultures that value independence such as the United States, for example, men are seen as possessing more of the most culturally valued trait – independence. In those cultures where independence is not highly valued, however, a mismatch arises: If stereotypes of men do indeed reflect cultural values, then how should we expect Asian men to be stereotyped relative to Asian women – as more independent, consistent with the “universal” male gender stereotype, or as more interdependent, consistent with Asian cultural values?

Williams & Best (1982) used the Adjective Check List in 30 countries and found clear pan cultural agreement on the adjectives used to classify males and females where subjects characterized adjectives as male or female characteristics where males are typically seen as active, strong, essential and adult with needs such as dominance, autonomy, aggression, exhibition, achievement and endurance. Such researchers say that when it comes to gender roles, their results endorse a “psychological universal”. However, later studies found substantial cultural variations related to gender. These results indicate that distinction in gender stereotypes appeared to be higher in countries that were conservative and hierarchical with low levels of socio-economic growth, Christian membership, and the percentage of women attending university.

7.3.2 Culture Influence on Gender

Women and men around the world exercise dominance over varying degrees of wealth & authority, with women nearly often less powerful than men. Women have responsibility to comply with societal norms for physical appearance and are victims of sexual harassment in many countries. While educational prospects for women have increased in some countries, they are still very restricted in many cultures and both media and men control messages influencing women’s self-image, generating insecurity and decreased self-confidence. Women’s wages generally are lower than men’s and responsibilities like motherhood, although varying across cultures, nevertheless define the lives of many women. Women are often the victims of abuse by family members and associates. Women’s empowerment and their care are still big challenges in societies worldwide. According to Gupta, Chaturvedi, Chandarana & Johnson (2001) women between the ages of 18 & 24 in Canada report more dissatisfaction & concern for the weight of their lower torso whereas women in India report more concern for the weight of their upper torso. In many cultures, men are victims of male violence because many cultures stress a competitive, aggressive ideal of masculinity. (Archer, 1994; Gilmore, 1990)

Margaret Mead (1935) conducted a classic study of cultural differences in Papua New Guinea. She observed and examined three different tribes and found

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that the Arapesh men and women were gentle, responsive and cooperative; the Mundugumor men and women were violent and aggressive, seek power and position; and the Tchambuli showed opposite gender-role behaviours as compared to those seen in most cultures, as the women were dominant, impersonal and managerial and the men were more emotionally dependent. Mead originally concluded that these differences highlight the impact of culture on gender.

Culture is transmitted through language, media messages, cultural practices and institutions, values and artifacts, and through the modeling of behavior (Markus & Kitayama, 1994). Social scientists have recognized for decades that these influences have substantial psychological effects on individuals. However, culture does not have a deterministic influence on individuals' behavior. Rather, its influence is probabilistic (e.g., Allport, 1961; Stryker & Burke, 2000). Rohner's (1984) metaphor that compares culture to a game (with various rules) and people to its players clearly illustrates this point. Players can pick from different strategies and options, and sometimes even violate or modify the rules if they think they can get away with it. In other words, the degree to which players follow the rules differs across individuals, depending on their personal preferences, moods, and specific situations. This results in a great deal of within-culture heterogeneity and individual differences in the degree to which people endorse, internalize, and utilize particular rules (or norms, see Oishi, 2004 for a similar view). Cultural influences on personhood were a prevalent concern in early personality psychology (e.g., Allport, 1961; Kluckhohn & Murray, 1948; McClelland, 1961), but, for reasons we will discuss later, largely ignored in modern personality theory and research until the early 1990s. However, many cultural studies conducted during the last decade on issues such as self-processes, emotion, and personality traits have firmly established the following: culture is a key determinant of what it means to be a person (see reviews by Church, 2000; Diener, Oishi, & Lucas, 2003; Markus & Kitayama, 1998; Triandis & Suh, 2002)

Margaret Mead (1935) conducted a classic study of cultural differences in Papua New Guinea. She examined three different tribes and found the Arapesh men and women to be gentle, responsive and cooperative; the Mundugumor men and women were violent and aggressive, seeking power and position; and the Tchambuli showed the opposite gender-role behaviours to those seen in most cultures, as the women were dominant, impersonal and managerial and the men were more emotionally dependent. Mead originally concluded that these differences highlight the impact of culture on gender.

Yet little is known about the impact of culture and gender on Indian adults. Based on a cross-sectional survey of 450 Indian young adults, the present study examines the impact of culture and gender on why Indian individuals use the social networking sites. The present study found that consistently interdependent self-construal can predict the four motives for Indian young adults to use social

networking sites: socialization, entertainment, self-status seeking and information seeking. The study also found that there was a gender difference in information seeking and self-status seeking; with male adults being higher in self-status seeking and female adults higher in information seeking. (Narasimhamurthy, 2014)

Check Your Progress

1. When did the field of ‘culture and personality’ emerge?
2. How does the socialization process allow an individual to function as a productive member of society?
3. What did Margaret Mead’s works examine?
4. What were the objectives of the research by Leong and Low?
5. What are the essential aspects of culture?
6. Which important life outcomes do gender stereotypes affect?

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7.4 ANSWERS TO CHECK YOUR PROGRESS QUESTIONS

1. The field of ‘culture and personality’ emerged in the first half of the 20th century driven mainly by psychoanalytic-oriented anthropologists, psychiatrists, and psychologists.
2. The socialization process moulds a person’s emotions, thoughts, behaviours, cultural values and norms, allowing the person to fit into and function as a productive member in the surrounding human society.
3. From a cross-cultural viewpoint, Margaret Mead’s works examined human growth and covered questions of gender roles and child rearing, both in American and international cultures.
4. The objectives of the research by Leong and Low are (a) to explore the relationship between the Big Five personality dimensions and cross-cultural adjustment and (b) to test the “cultural fit” hypothesis.
5. Essential aspects of culture are gender identities and gender relations because they form the way everyday life is lived in the home, but also in the broader society and the workplace.
6. Gender stereotypes affect important life outcomes such as hiring and promotion job performance evaluations, academic performance and even sexual harassment.

7.5 SUMMARY

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- The culture in which you live is one of the most important environmental factors that shapes your personality. ‘Culture and personality’ is the earliest name of the school or thoughts of school, also called psychological anthropology.
- According to LeVine (2001), at a minimum, these would include: (a) Adult behaviour is “culturally patterned,” (b) Childhood experiences influence the individual’s personality as an adult, and (c) Adult personality characteristics prevalent in a nation directly impact its culture, institutions, historical and social trends, and psychopathology.
- Modern psychological anthropology tries to narrow the gap between anthropology and psychology by examining the “cross-cultural study of social, political, and cultural-historical constitution of the self” (Lindholm, 2001).
- It was viewed as being non-academic, and the handful remaining practitioners changed the name of their approach to psychological anthropology to save themselves from the stigma (LeVine 2001), but also to widen its scope.
- Mead’s *Coming of Age in Samoa* (1928) provided “the first sustained consideration of the relation between personality and culture” (Winthrop, 1991).
- The study of culture and personality examined how different socialization practices resulted in different personality types.
- Across the International Sexuality Description Project (ISDP), women reported significantly higher (Big Five Inventory) BFI levels of neuroticism, agreeableness, extraversion, and conscientiousness than did men.
- Women scored higher than men did in BFI Conscientiousness in 23 ISDP nations.
- Women scored higher than men did in BFI Extraversion in 25 ISDP nations.
- Gender identities and gender relations are critical aspects of culture because they shape the way daily life is lived in the family, but also in the wider community and the workplace.
- Williams & Best (1982) used the Adjective Check List on 30 countries and found high pancultural agreement on the adjectives used to describe males & females where subjects characterized adjectives as male or female characteristics where, Men are generally viewed as active, strong, critical, and adult like with needs such as dominance, autonomy, aggression,

exhibition, achievement and endurance while women are viewed as passive, weak, nurturing, and adaptive with needs such as abasement, deference, nurturance, affiliation, and heterosexuality.

- While educational prospects for women have increased in some countries, there are still very restricted in many cultures and both media & men control messages influencing women's self images, generating insecurity & decreased self confidence.
- Culture is transmitted through language, media messages, cultural practices and institutions, values and artifacts, and through the modeling of behavior (Markus & Kitayama, 1994) Culture is transmitted through language, media messages, cultural practices and institutions, values and artifacts, and through the modeling of behavior (Markus & Kitayama, 1994).

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7.6 KEY WORDS

- **Psychopathology:** It refers to either the study of mental illness or mental distress or the manifestation of behaviours and experiences which may be indicative of mental illness or psychological impairment.
- **Individualism:** It is a social theory favouring freedom of action for individuals over collective or state control.
- **Collectivism:** It is the practice or principle of giving a group priority over each individual in it.
- **Self-construal:** It refers to the grounds of self-definition, and the extent to which the self is defined independently of others or interdependently with others.

7.7 SELF ASSESSMENT QUESTIONS AND EXERCISES

Short-Answer Questions

1. Write a short note on Sigmund Freud's contribution to 'Personality & culture'?
2. Which hypothesis did Freud give?
3. Which two institutions did Kardiner identify?
4. What is gender stereotyping?
5. How does culture influence gender?
6. What are the various gender differences in personality?

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Long-Answer Questions

1. Elaborate upon the main contribution of theorists on culture and personality.
2. Explain the concept of culture and its effect on gender stereotypes.

7.8 FURTHER READINGS

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BLOCK III
INDIAN CULTURE

UNIT 8 CULTURE IN INDIA

NOTES**Structure**

- 8.0 Introduction
- 8.1 Objectives
- 8.2 History of Mental Health Practices in West and India
- 8.3 Indigenous Healing Traditions in Mental Health
- 8.4 Current Status of Mental Health Practice in India
- 8.5 Key Issues in the Theory and Practice of Mental Health in India
- 8.6 Answers to Check Your Progress Questions
- 8.7 Summary
- 8.8 Key Words
- 8.9 Self Assessment Questions and Exercises
- 8.10 Further Readings

8.0 INTRODUCTION

India is a multicultural country with various socioeconomic discrepancies. Since ancient times, the goal of Indian society has been to attain freedom from suffering and heal human psyche. 'Mental health is the foundation for emotions, thinking, communication, learning, resilience and self-esteem. Mental health is also key to relationships, personal and emotional well-being and contributing to community or society.' Cultural diversity is an integral part of mental health practice. Researchers and practitioners have tried to examine the role of culture on health and well-being practices. This unit will discuss the history of mental health practices in India and the West. The indigenous healing tradition in India will also be examined. Furthermore, the current status of mental health practice in India and the prevalent issues will also be highlighted.

8.1 OBJECTIVES

After going through this unit, you will be able to:

- Discuss the history of mental health practices in the West and India
- Explain some of the indigenous healing traditions
- Describe the current status of mental health practice
- Examine the key issues in theory and practice of mental health in India

8.2 HISTORY OF MENTAL HEALTH PRACTICES IN WEST AND INDIA

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The concept of ‘mental health’ attained recognition with foundation of the United Nations.

According to World Health Organization (1978), health is ‘a state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity.’ The definition of health is closely related to the concept of health defined in Indian medical texts.

According to Parekh (2018), mental health illness ‘involves effective functioning in daily activities resulting in productive activities (work, school, care-giving), healthy relationships, and ability to change and cope with adversity.’

According to World Federation for Mental Health, optimum mental health ‘refers not to an absolute or ideal state but to the best possible state insofar as circumstances are alterable.’ (Britannica, 2021).

Dr. Govindaswamy (1964) wrote,

‘The field of mental health in India has THREE objectives. The first of these has to do with mentally ill persons; for them the objective is the restoration of health. A second has to do with those people who are mentally healthy, but who may become ill if they are not protected (prevention) from conditions that are conducive to mental illness, which however, are not the same for every individual. The third objective has to do with the promotion of mental health to normal persons, quite apart from any question of disease or infirmity. This is positive mental health. It consists in the protection and development of all levels of human society of secure, affectionate, and satisfying human relationships and in the reduction of hostile tensions in the community.’

The contribution of the West in psychiatry can’t be ignored. The earliest mental hospitals were established in Baghdad and Cairo, with the notion that disoriented people are ‘afflicted of Allâh’. In some part of African culture, hallucinations were thought to be conversations from the spirits. Mental hospitals were called madhouses. Bedlam in London and the Bicêtre in Paris were perfect examples of madhouses where mental health patients were routinely and brutally exploited. In British colonial America, mentally ill were exploited by farmers. Some of them were also forced to leave town by law and order. Until the 17th century, atypical behaviour or mental illness was understood as an act of the ‘evil’ or ‘demonic possession’. In the modern era, there was a shift from ‘evil’ to ‘ill’. Mentally ill were called ‘mad’ or ‘insane’ and were confined to ‘asylums’ and subjected to exploitation. Philippe Pinel, a French physician, was involved in bringing reform in the management of psychiatric patients. He followed a more humane or moral psychological approach and liberated mentally ill from iron shackles of asylum

(Weiner, 2010). William Tuke, an English tradesman and a Quaker, supported humane treatment of mentally ill patients and established 'The Retreat' in York (England) to provide gentle care to the mentally ill patients. His approach was also known as 'moral treatment'. In the 18th century, Benjamin Rush, a physician, social reformer (especially in medicine and education), and a signer of United States Declaration of Independence led a campaign to build a mental ward for humane treatment for the insane. In 1840's, Dorothea Dix reformed the care of mentally ill patients and renamed 'Dix Hill Asylum' as 'Dorothea Dix Hospital'. She founded the first public mental health hospital in Pennsylvania. She expanded institutional reform in Nova Scotia and England as well (Tiffany, 1890).

Clifford Whittingham Beers had been influential in starting 'mental hygiene' movement although the term 'mental hygiene' was first used by William Sweetzer in 1843. His struggles with mental illness also included maltreatment at mental institutes. His sufferings are openly shared in his autobiography, *A Mind That Found Itself*. His work raised an alarm in psychiatric community and caught the attention of mental health professionals. He founded the Connecticut Society for Mental Hygiene (1908), the National Committee for Mental Hygiene (1909) and International Committee for Mental Hygiene (1930). Soon after this, World Federation for Mental Health was formed in London in 1949. Dr. J.B. Gray thought of 'mental hygiene' movement as an educational movement (Mandell, 1995). Isaac Ray (1893) defined the term 'mental hygiene' as 'the art of preserving the mind against all incidents and influences calculated to deteriorate its qualities, impair its energies, or derange its movements. The management of the bodily powers in regard to exercise, rest, food, clothing and climate, the laws of breeding, the government of the passions, the sympathy with current emotions and opinions, the discipline of the intellect—all these come within the province of mental hygiene.' (Rossi, A., Some Pre-World War II Antecedents of Community Mental Health Theory and Practice. *Mental Hygiene*, 1962, 46, 78-98) (Mandell, 1995). Thus, mental hygiene incorporates all measures taken to support mental health. With growing popularity of this movement, people in almost every country, started promoting mental health and educated the common man to value surroundings productive for growth and development. Around the 19th century, few physicians and psychologists supported the notion that aberrant behaviour was an expression of illness which lies at the other end of a continuum of mental health. G. Stanley Hall persuaded that early treatment might reduce both the severity and frequency of mental illness. His views were supported by Adolph Meyer who reached out to the community to shield mental health (Mandell, 1995). Soon, scientific psychology started to emerge.

With the establishment of psychological laboratory at Leipzig in 1879, Wundt started probing the contents of consciousness of human mind. Behaviourists B. F. Skinner & J. B. Watson brought to light the role of environmental mechanisms in mental illness. During and after the World War I, Sigmund Freud started psychoanalysis and proposed childhood experiences as major factors in psychiatric

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illness. Such insights led to uproar in psychiatric community to analyse social-environmental and psychological factors in determining mental illness.

During the 18th century, under the rule of British Commissioner Sir Mark Cubbon, healthcare system witnessed vast amount of development in terms of modern medicine and opening of hospitals.

In India, the Indian Association for Mental Hygiene was founded in 1929. The Indian division of the Royal Medico-Psychological Association was founded in 1935, and the Indian Psychiatric Society (IPS) was founded in 1947 (Trivdei, Gupta, & Saha, 2010). Indigenous psychology recognizes cultural factors while dealing with human behaviour. The work of Indian psychiatrists in psychopathology has contributed to World psychiatry (Neki, 1973). A good interpretation of Indian concepts and their applicability in understanding mental health has been discussed in Wig (2010), Kapur (2009), Chakraborty (2010), Sebastia (2009). India has a tradition of understanding mental health disorders as part of traditional medicine as well as from other treatment approaches (i.e. pharmacological, psycho-social, and spiritual) (Neki, 1973).

Indian psychiatrists made significant contribution in classifying mental health disorders. They acknowledged transcultural variations in symptoms of psychiatric disorders (Wig & Singh, 1967; Murthy, 2010). An important psychiatric illness ‘acute psychosis’ was added to classification which is now included in international classification of psychiatric disorders (Wig & Singh, 1967; Murthy, 2010). Indian psychiatrists challenged the way some psychiatric conditions in developing countries like India were viewed. Some conditions were seen as exotic and psychiatrists tried to change this perception by arriving at specific diagnosable conditions (Chakraborty, 2010). Leading psychiatrists in India, namely Professor Vidyasagar, recognized family as an important partner in mental health care (Murthy, 2010). Dr. Shaila Pai, Dr. Kapur and Dr. Sethi made a significant contribution by involving family in community care of mental health patients (Pai & Kapur, 1981; Sethi, 1989). The role of culture in depression was examined by Dr. Venkoba Rao in 1963.

The importance of psychotherapy was recognized by Indian psychiatrist long back. Vahia, Vinekar and Doongaji (1966) shared, ‘As most of the psychiatric disorders are a direct result of social and psychological stress, most of us devote some of our time in psychotherapy and yet most of us feel that we are not able to practice it as widely as we would like to. There is an urgent need to devise some methods of psychotherapy that would be useful to a large majority of our patients by the personnel in our country’. (Murthy, 2010). Dr. Surya emphasised the relevance of ‘dependence’ in social and therapeutic journey in Indian culture (Wig, 1966; Murthy, 2010). Indian psychotherapy approach considers the principles of the *Bhagwad Gita*. Dr. Venkoba Rao brought attention of Indian psychiatrists to ‘the ideals of Gita’ to be considered for improving mental health (Neki, 1967). The strategies used by Lord Krishna to direct his disciple Arjuna in war are

considered to have a transformative influence in psychotherapy (Murthy, 2010). Indian psychiatry places high emphasis on promoting positive mental health. The importance of positive mental health has been the drive of many leading mental health institutes in India like National Institute of Mental Health and Neuro Sciences (NIMHANS) Bangalore, VIMHANS Delhi, etc. There is an increasing popularity of yoga, meditation, life-style modification to improve the well-being of Indians. Large amount of data have been available on the success of yoga interventions in treatment of mental health disorders. It is noted in *Patanjali Sutras* that Yoga is the practice of quieting the mind. (Shroff & Asgharpour, 2017; Duraiswamy, Thirthahalli, Nagendra, & Gangadhar, 2007; Patanjali 2003). The efficacy of transcendental meditation in mental health practice is fruitful (Yunesian, Aslani, Vash, and Yazdi, 2008).

Along with practice, Indian psychiatrists focused on conducting epidemiological studies, descriptive studies, systematic analysis of clinical records, etc. to spread the awareness of Indian concept of understanding psychiatric disorders. Govindaswamy (1964), Dube (1970), Sethi, Gupta, and Kumar (1967), Sethi, Gupta, Mahindru, and Kumari (1974) made huge contributions in advancing epidemiological research in psychiatry. The Great Universe of Kota was a milestone in epidemiological study and it hugely impacted the thoughts of psychiatrists in West (Cairstars & Kapur, 1976). Dr. Dube's international study on schizophrenia known as 'Study of factors associated with the course and outcome of schizophrenia (SOFACOS)' supported by WHO and ICMR contributed towards understanding the course of schizophrenia (ICMR, 2005; Murthy, 2010). Dr. Bagadia, Dr. Bhaskaran, Dr. Sethi, Dr. Vahia, and Dr. Hoch recognized the different ways psychiatric disorders were presented in north-south cultures (Murthy, 2010).

Earlier, there was a lack of trained personnel in mental hospitals to take care of psychiatric patients. There was a huge shortage of community care centres where patients could live and engage in work during and post-treatment. Vahia (1966) shared in his presidential address the need to engage mental health patients in work in the community during and post-treatment. Bhaskaran (1971) addressed the same in 'The Unwanted Patient' and called for interventions to address needs of the patients. He felt that a mentally ill person can work in community as a useful citizen (c.f. Murthy, 2010). Dr. Bhaskaran believed in the rehabilitation of chronically ill psychiatric patients and urged the need to launch pilot projects for home care of schizophrenic patients, hiring social workers and nurses for after-care of patients and engaging college students/volunteers in the resocialization of schizophrenic patients. Indian psychiatrists felt that hospitals were dumping grounds for mental health patients. Professor D. Satyanand collaborated with psychiatrists from AIMS and conducted one of the first studies in community psychiatry (Murthy, 2010). National Mental Health Program (NMHP) was founded with efforts of esteemed Indian psychiatrists in 1982. NMHP was started to integrate mental health services into general health services. It was initiated firstly in Chandigarh and Bangalore. The small movement of NMHP turned big i.e. covering over 125 districts in the

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country (Agarwal et al., 2004). The success of movement influenced the development of mental health services in other countries like Afghanistan, Bangladesh, Bhutan, Islamic Republic of Iran, Nepal, Pakistan, Palestine, Srilanka, Sudan, and Yemen (Murthy, 2010; Wigg, 1993).

Check Your Progress

1. Who founded the first public mental health hospital in Pennsylvania?
2. In which year was the Indian Association for Mental Hygiene founded?
3. When and why was the National Mental Health Programme started?

8.3 INDIGENOUS HEALING TRADITIONS IN MENTAL HEALTH

Cultural diversity is seen throughout the history of mental health. Researchers and practitioners in this field continue to examine the role of culture on health and well-being practices. Sociocultural belief system and help-seeking behaviour are interdependent and vital component of Indian health-care system (Patel, Musara, Butau, Maramba, Fuyane, 1995; Sargent & Johnson, 1990). Such belief systems greatly influence diagnosis and management of mental illnesses (Glick, 1967). **Hunter and Whitten (1976)** said that human beliefs are ‘thoughts that are based on the uncritical acceptance of the inherent truth or correctness of the cognitive categories of one’s culture.’

In simple terms, cultural belief systems have their explanation of:

1. What causes the illness?
2. How can an illness be cured?
3. How and who can help?
4. How the patient responds to treatment?
5. What is the role of family in managing illness?

Indigenous healing systems follow a holistic approach toward well-being (Singh, 1999; Sue & Sue, 1999). The term health is known as ‘*swasthya*’ in Indian culture; where ‘*swa*’ means ‘self’ and ‘*stha*’ means ‘one who is located in one’s own self’. Thus, the term ‘health’ takes into account internal state as well as the external state of individuals. The term ‘healing’ is also known as *sukha*, *samridhi*, *santosh*, *shanti*, *nirog* in Indian texts (Dalal, 2016). The ‘healing’ process enables individuals to deal with crisis with acceptance and hopeful attitude, releasing of psychic energy, and gaining new insights (Dalal, 2016).

Helms and Cook (1999) defined Indigenous healing as ‘helping beliefs and practices that originate within a culture or society, that are not transported

from other regions, and that are designed to treat the inhabitants of a given group.’ (c.f. Yeh, Hunter, Madan-Bahel, Chiang, & Arora, 2004).

The alternate term for Indigenous healing is Folk healing traditions or traditional healing systems. The practices of such traditions can be found in the relics and artefacts of Harappan culture and Mohenjo-dâro. The Harappan cultural beliefs emphasized on performance of rituals (e.g. dancing, chanting, animal sacrifice, administering local herbs etc.) in the healing process (Zysk, 1998; Chattopadhyay, 1982). Between 1900 and 1500 B.C.E., Harappan civilization died and the Aryan culture came into existence. The Aryans migrated to North-India from Iran and Afghanistan. Shaman, Bhisaj or Medicine men of the Aryan culture carried out Shamanism. Singh (2018) defined shamanism as ‘a religious practice that involves a practitioner who is believed to interact with a spirit world through altered states of consciousness, such as trance.’ The goal of the given practice is ‘to direct the spirits or spiritual energies into the physical world, for healing or some other purpose.’ (Singh, 2018). Shamans, spirits and local deities are all part of such healing practices. These practices were considered unscientific by urban people (Simpson, 2001). Kakar (1982, 2003) and Kleinman (1980, 1988) discuss traditional practices in the light of practical solutions to personal, familial and social problems. Traditional medical practitioners are also known as healers or hakims, vaidas, amans, gurus, ojhas, tantrics, priests, faith healers, alternate medicine practitioners (Kakar, 1982). Healers deal with psychological issues and offer healing services. Such practices thrive on wisdom, intuition, trust, inspiration, and faith in supernatural/higher energies. Diversity of traditional and modern healers and healing centres (commonly called temples, majars, shrines, local deities) are found all over the country (Tirthalli et al., 2016; Padmavati, Thara, & Corin, 2005). Such places are always filled with people standing in hope. Even in the current century, more than two-third of people in India strongly believe in supernatural causes behind mental health issues and resort to healers for interventions despite advanced modern medicine (Kar, 2008).

Arthur Michael Kleinman (1980) proposed a culture-based model of local health care system. The model consists of three overlapping categories known as sectors (popular sector, professional sector, and folk sector). Every sector retains explanatory system, social roles, communication settings, and institutions. The model is universal in nature although contents of each category vary with respect to social, cultural, and environmental circumstances. This model is relevant to classical, post-traditional, or folk healing societies. The categories are explained as follows:

1. Popular sector is the biggest category. For choice of treatment of disease/disorder, advice from non-professional or ordinary people e.g. family, society, neighbourhood, community, relatives, friends, older and experienced people etc. is sought after. Based on their advice and decision, the patient chooses either professional or folk sector for

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managing illness. Afterwards, the patient revisits the popular sector for interpretation of the condition in order to decide the next course of action.

2. Professional sector takes into account standardized healing practices or in other words, modern medical practices. Countries like China and India consider indigenous medical system, i.e., traditional Chinese medicine and Ayurveda, respectively for managing illness.
3. Folk sector acknowledges the treatment of non-professional healers. It combines the belief systems of both professional and popular sector. It considers shamanism and ritual curing, etc.

Folk sector and popular sector are considered supreme in societies with unsubstantial people from professional sector (Kleinman, 1980).

The Veda of Atharvanis, the *Atharvaveda* (oldest literary monument of Indian medicine) was compiled in about 1200 BC-1000 BC in which the question of the status of healers was raised.

Charaka Samihita discouraged the treatment by traditional healers and advised to consider only *Atharvaveda* to deal with management of diseases. The Aryans moved towards Gangetic plains and started establishing small kingdoms with diverse cultures with different lifestyle and thoughts about health and well-being (Dalal, 2016). In the confluence of Gangetic plains, other philosophical movements like Buddhism and Jainism contributed towards medicine. Such movements recognized the importance of use of medicines and surgical procedures, trepanation, purges, emetics, cultivating compassion and other humanistic values in healing practices (Dalal, 2016). Buddha himself was also known as 'healing guru'. Chinese Buddhist traveller Fa-Hsien established healing centres (arogyashalas) for the care of poor and diseased. They were given basic food, nursing and care by Vaidyas who received training at Taxila (now in Pakistan) and Nalanda Universities. Ayurveda was being practiced for sick at Buddhist monasteries, temples and shrines. During the times of Buddhist philosophy, Ayurveda and folk healing traditions were separated.

Literature states that healing practices in Ayurveda follow a holistic approach as it focuses on healing mind and body. Dube (1979) studied the etiology and therapeutic management of psychiatric illness in Ayurveda and compared it with the International Classification of Diseases (Dube, Kumar, & Dube, 1985). Ayurveda is an alternative medicine system that has its roots in the Indian subcontinent (Meulenbeld, 1999). Medical knowledge of diseases in Ayurveda comes from Gods, sages and medical physicians. The well-known texts of Ayurveda are *Sushruta Samhita* and *Charaka Samhita*.

According to the *Charaka Samhitâ*, human body is made of five elements or *mahabhutas* (*Akasa, Vayu, Tejas, Ap, and Prithvi*). Five elements combine to form bodily humours or *tridoshas* (*Vatta, Pitta, & Kapha*) (Dalal, 2016). The elements are present in varying proportions and none of *it* is absent completely.

Internal causes of mental illness were thought to be an imbalance of internal bodily humours or *tridoshas*. In *Charaka Samhita*, insanity or *Unmad* was also attributed with possession of certain mythological gods or demon. The term *Unmad* was understood as ‘psychosis’ (Gupta, 1977). Schizophrenia was known by terms like *Bhujang graha vyadhi*, *Rakshasa graha vyadhi*, etc. Mania was known by terms like *Daiva graha vyadhi*, *Yaksha graha vyadhi* etc. Depression was known by terms like *Pitru Graha Vyadhi* (Gupta, 1977). Every individual’s personality or psychological nature constitutes *triguna* i.e. *sathvik* (purity) *rajasik* (activity and affectivity) and *tamasik* (passivity and darkness). The interaction between them *triguna* gives birth to 16 types of personalities i.e. 7 types of *Sathvik*, 6 kinds of *Rajasik*, and 3 kinds of *Tamasik*. The *trigunas* are associated with *tridoshas* or physical characteristics and together, they determine physical and psychological nature of an individual. Individuals differ in physical and psychological characteristics due to preponderance of one or the other *guna*.

Ayurvedic therapy aims at improving *achar* (daily activities or routine), *vihar* (relaxation), *ahaar* (diet) and *vichaar* (attitude) (Dalal, 2016). Hence, the Ayurveda wellbeing model focuses on maintaining good health, good dietary habits, cultivating positive emotions and thoughts, deep breathing and yoga practices to enable individuals to lead a happy life. Plant-based treatments are also used in Ayurveda. Around 25,000 plant-based drug formulations are codified in Ayurveda (Dalal, 2016).

As we have seen, diverse therapy systems of healing have existed in Indian culture. In the next section, current status of mental health practices in India will be discussed.

Check Your Progress

4. Name two prominent texts on Ayurveda.
5. What is Ayurvedic therapy aimed at?

8.4 CURRENT STATUS OF MENTAL HEALTH PRACTICE IN INDIA

In Indian culture, the ideal mental health consists of: ‘the degree to which you have an inner sense of comfort in as many situations as possible is the measure of your mental health; the faces of your intimate associates are an index of your level of mental health. The more unhappy and tense they look, or the more happy and relaxed they look in your presence is the minus and plus of your store of mental health; your account may be very poor in the above two but the degree and duration of your aspiration and effort to change for the better is the most positive index of the state of your mental health.’ (c.f. Murthy, 2010).

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In contemporary scenario in India, medical pluralism is very well accepted (Ruhil, 2016). Medical Pluralism is defined as ‘the employment of more than one medical system or the use of both conventional and complementary and alternative medicine (CAM) for health and illness’ (Shih, Su, Liao, & Lin, 2010). The term ‘medical pluralism’ was first introduced in 1970’s at a time when people resorted to diverse healthcare options apart from biomedical healthcare system (Sujatha & Abraham, 2009).

Indian people use Ayurvedic treatment extensively, exclusively and also in combination with modern medicine. Indian government has supported the practice of Ayurveda and The Central Council of Indian Medicine (CCIM) was established under Department of Ayurveda, Yoga and Naturopathy, Unani, Siddha medicine and Homoeopathy (AYUSH), Ministry of Health and Family Welfare in 1971 (AYUSH, 2014). Yoga has its roots in pre-Vedic Indian traditions. The benefits of yoga date back to ancient texts like *Rigveda*, *Upanishads*, and *Yoga Sutras of Patanjali*. The technique is used to heal mind, body, and soul. Yoga practices are widely used in Indian and Western culture. Practices focus on variety of physical postures, breathing techniques, meditation and chanting (Burley, 2000; Jantos, 2012). According to the Yoga Philosophy, mental health is maintained by practicing eight steps called the *Ashtanga Yoga*. (c.f. Singh, Junnarkar, & Kaur, 2016). Naturopathic practitioners believe in using herbs, hydrotherapy, nutrition advice, acupuncture, reflexology, meditation, relaxation, etc. (Young, 2007). Homeopathy is another system of alternate medicine founded by German doctor Samuel Hahnemann in the 19th century. The practitioners use homeopathic dilutions to balance biochemistry in human body to treat diseases. *The Unani system* has its roots in Muslim culture and is also based on the teachings of Greek philosophers Galen and Hippocrates. The system is based on the concept of four bodily humours (phlegm, blood, yellow bile, and black bile) and pulse reading (*nâdi parikshana*). *The Siddha system* originated in South India. It is also based on theory of balancing five basic elements (earth, water, fire, air, sky) (AYUSH, 2016).

Many indigenous beliefs acknowledge the interconnectedness of cosmic forces or energies, the physical body and the psychological well-being. Acceptance of the ancient Chinese practices (acupuncture, *qigong*) to heal body and mind is seen in Indian texts (Highlen, 1996; Sue et al., 1999).

Reiki Healing

Reiki Healing is based on using universal life energy to heal physical, psychological and spiritual energies present in human beings (Yeh et al., 2004).

Pranic Healing

Pranic Healing, a comprehensive system based on natural healing techniques widely practiced in various cultures (Indian, Chinese, Hebrew, etc.). The practitioner uses ‘no-touch’ methodology. *Prana*, meaning ‘life force’, initiates biochemical changes to accelerate body’s innate power to heal physical and psychological

illnesses. The healing process deals with mind, body, and soul all together (Yeh et al., 2004).

Mental health practitioners have clients from different race, ethnicity, and culture. The knowledge of indigenous health practices help them understand the problems and solutions of clients from different cultures. To provide better mental healthcare services to immigrant population, and racial and ethnic minority clients, indigenous healing practices are becoming common among medical practitioners in the Western culture (Yeh et al. 2004).

Majority of Indian psychologists started their research in field of positive psychology (Singh et al., 2016). Spiritual practices have been accepted in the treatment of addictions and several kinds of mental and physical disorders (Singh et al., 2016).

In India, a majority of funding still goes to Modern medical sector in India despite the acceptance of other indigenous healing practices. In this sector, the opinion of a psychiatrist and clinical psychologist is sought for diagnosis and treatment of mental health illnesses. The role of a psychiatrist is to explore organic issues or psychological issues behind mental illness and prescribe medicines to change functioning of brain. A psychiatrist may consider combination of drug therapy, psychosurgery, and electroconvulsive therapy for treating mental health illnesses. The role of a clinical psychologist is to explore disturbances in psychological functioning and provide psychotherapeutic treatment (Zimbardo, Johnson, Robert, & McCann, 2015). A clinical psychologist uses psychotherapies to help patients deal with psychological issues (Wampold & Imel, 2015).

In India, patients consult multiple healing options and the choice depends on the faith and beliefs of the patient (Biswal, Subudhi, & Acharya, 2017). The National Rural Health Mission has recommended mainstreaming AYUSH; with this, the workforce shortage can be combatted. Also, a more holistic approach to manage mental illness can be developed. Similarly, Modern psychiatry suggests that in case of Indian mental health patients, Vedantic model of psychiatry seems to be more promising in treatment of mental health disorders (c.f. Mishra, Mathal, & Ram, 2018).

8.5 KEY ISSUES IN THE THEORY AND PRACTICE OF MENTAL HEALTH IN INDIA

Medical practitioners and researchers are continuously putting their efforts to enhance the quality of research and practice in mental health. Mental health is an inseparable part of public health. The current limitations in the provision of mental healthcare are reflected in research and social media. Existing literature indicates that training of mental health practitioners in India is still a concern (Bayetti, Jadhav, & Deshpande, 2017). Recently, researchers indicated a substantial lack of research in psychiatry in India (Ioannidis, Boyack, & Baas, 2020). Singh (2020) outlined

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the key issues prevalent in mental health services in India and felt that psychiatric community needs to be proactive. Singh (2020) discussed that there is a lack of good research, training, and teaching. Zonal academic committees should collaborate in mentoring research proposals. To fill gap of research facilities, collaboration between medical institutes at a global level will enhance the quality of research work and resource building and sharing. Medical colleges should collaborate with various universities which have full-fledged labs. Ethical partnerships with industries need to be called for improving medical and psychosocial interventions. Interactive sessions with global scientists will enhance innovative research proposals in the mental health field. Majority of the biomedical research in India are conducted in medical institutions during thesis submission required for PG degree. Publications had been made an obligatory requirement for promotion of faculty. Although, it offered a unique opportunity for training of residents and stimulus for research, it failed to produce quality research work (c.f. Singh, 2020). Research conducted on mental health of schedule tribe in India is scarce and needs to be ensured (Devarapalli, Kallakuri, Salam, Pallab, & Maulik, 2020). Psychotherapy practice is a challenging task for psychiatrists in India. Psychiatrists offering psychotherapy face social, psychological, and ethical challenges.

Murthy (2011) indicated gross disparity of trained mental health professionals and treatment facilities to mental health patients. People with mental illness face practical issues with recovery process i.e. travelling issues for treatment facilities, lack of a caregiver, non-availability of medicines, lack of rehabilitation services and difficulty in getting welfare benefits. Murthy (2011) highlighted the need to widen the scope of mental health. It is time to move from ‘deviancy model’ to the ‘normalcy model’, in which everyone recognizes both vulnerability as well as ability to address mental health (Wigg, 1989). An urgent need is expressed to monitor and advise District Mental Health Programme (DMHP) to enhance technical inputs to work on training personnel. Murthy (2011) felt importance should be given to developing human resources for mental healthcare and private sector should be involved to give support to train personnel. There is a dire need to support NGOs in establishing self-help groups, imparting mental health awareness to reduce stigma, providing support to build rehabilitation facilities and in generating employment services to patients and their families. Public awareness should be increased regarding mental health awareness as treatable. Knowledge about positive mental health practices or strengths-based approach of mental health should be disseminated. Much has progressed but much more needs to be done to better mental health practices in India.

Check Your Progress

6. Who founded Homeopathy?
7. Where did the Siddha system originate?
8. How can awareness about mental health be created?

8.6 ANSWERS TO CHECK YOUR PROGRESS QUESTIONS

1. Dorothea Dix founded the first public mental health hospital in Pennsylvania.
2. The Indian Association for Mental Hygiene was founded in 1929.
3. The National Mental Health Program (NMHP) was founded with efforts of esteemed Indian psychiatrists in 1982. NMHP was started to integrate mental health services into general health services.
4. The well-known texts of Ayurveda are *Sushruta Samhita* and *Charaka Samhita*.
5. Ayurvedic therapy aims at improving *achar* (daily activities or routine), *vihar* (relaxation), *ahaar* (diet) and *vichaar* (attitude)
6. Homeopathy was founded by German doctor Samuel Hahnemann in the 19th century.
7. *The Siddha system* originated in South India.
8. Awareness about mental health can be created by establishing self-help groups, imparting mental health awareness to reduce stigma, providing support to build rehabilitation facilities and in generating employment services to patients and their families.

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8.7 SUMMARY

- The contribution of the West in psychiatry can't be ignored. The earliest mental hospitals were established in Baghdad and Cairo, with the notion that disoriented people are 'afflicted of Allâh'. In some part of African culture, hallucinations were thought to be conversations from the spirits. Mental hospitals were called madhouses.
- Until the 17th century, atypical behaviour or mental illness was understood as an act of the 'evil' or 'demonic possession'. In the 18th century, Benjamin Rush, a physician, social reformer (especially in medicine and education), and a signer of United States Declaration of Independence led a campaign to build a mental ward for humane treatment for the insane.
- In 1840's, Dorothea Dix reformed the care of mentally ill patients and renamed 'Dix Hill Asylum' as 'Dorothea Dix Hospital'. She founded the first public mental health hospital in Pennsylvania.
- Clifford Whittingham Beers had been influential in starting 'mental hygiene' movement although the term 'mental hygiene' was first used by William Sweetzer in 1843. His struggles with mental illness also included maltreatment at mental institutes. His sufferings are openly shared in his autobiography, *A Mind That Found Itself*.

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- Sweetzer founded the Connecticut Society for Mental Hygiene (1908), the National Committee for Mental Hygiene (1909) and International Committee for Mental Hygiene (1930).
- Around the 19th century, few physicians and psychologists supported the notion that aberrant behaviour was an expression of illness which lies at the other end of a continuum of mental health. G. Stanley Hall persuaded that early treatment might reduce both the severity and frequency of mental illness.
- In India, the Indian Association for Mental Hygiene was founded in 1929. The Indian division of the Royal Medico-Psychological Association was founded in 1935, and the Indian Psychiatric Society (IPS) was founded in 1947
- Indian psychiatrists made significant contribution in classifying mental health disorders. They acknowledged transcultural variations in symptoms of psychiatric disorders. The role of culture in depression was examined by Dr. Venkoba Rao in 1963.
- The importance of positive mental health has been the drive of many leading mental health institutes in India like National Institute of Mental Health and Neuro Sciences (NIMHANS) Bangalore, VIMHANS Delhi, etc. There is an increasing popularity of yoga, meditation, life-style modification to improve the well-being of Indians.
- National Mental Health Program (NMHP) was founded with efforts of esteemed Indian psychiatrists in 1982. NMHP was started to integrate mental health services into general health services. It was initiated firstly in Chandigarh and Bangalore.
- Indigenous healing systems follow a holistic approach toward well-being (Singh, 1999; Sue & Sue, 1999). The term health is known as '*swasthya*' in Indian culture; where '*swa*' means 'self' and '*stha*' means 'one who is located in one's own self'. Thus, the term 'health' takes into account internal state as well as the external state of individuals.
- The alternate term for Indigenous healing is Folk healing traditions or traditional healing systems. The practices of such traditions can be found in the relics and artefacts of Harappan culture and Mohenjo-dâro.
- Traditional medical practitioners are also known as healers or hakims, vaidas, amans, gurus, ojhas, tantrics, priests, faith healers, alternate medicine practitioners.
- Arthur Michael Kleinman (1980) proposed a culture-based model of local health care system. The model consists of three overlapping categories known as sectors (popular sector, professional sector, and folk sector). Every sector retains explanatory system, social roles, communication settings, and institutions.

- The Veda of Atharvanis, the *Atharvaveda* (oldest literary monument of Indian medicine) was compiled in about 1200 BC-1000 BC in which the question of the status of healers was raised. *Charaka Samihita* discouraged the treatment by traditional healers and advised to consider only *Atharvaveda* to deal with management of diseases.
- Philosophical movements like Buddhism and Jainism contributed towards medicine. Such movements recognized the importance of use of medicines and surgical procedures, trepanation, purges, emetics, cultivating compassion and other humanistic values in healing practices (Dalal, 2016). Buddha himself was also known as ‘healing guru’. Chinese Buddhist traveller Fa-Hsien established healing centres (*arogyashalas*) for the care of poor and diseased.
- Ayurveda is an alternative medicine system that has its roots in the Indian subcontinent. Medical knowledge of diseases in Ayurveda comes from Gods, sages and medical physicians. The well-known texts of Ayurveda are *Sushruta Samhita* and *Charaka Samhita*.
- According to the *Charaka Samhitâ*, human body is made of five elements or *mahabhutas* (*Akasa, Vayu, Tejas, Ap, and Prithvi*). Five elements combine to form bodily humours or *tridoshas* (*Vatta, Pitta, & Kapha*). The elements are present in varying proportions and none of *it* is absent completely. Internal causes of mental illness were thought to be an imbalance of internal bodily humours or *tridoshas*.
- Ayurvedic therapy aims at improving *achar* (daily activities or routine), *vihar* (relaxation), *ahaar* (diet) and *vichaar* (attitude).
- Indian people use Ayurvedic treatment extensively, exclusively and also in combination with modern medicine. Indian government has supported the practice of Ayurveda and The Central Council of Indian Medicine (CCIM) was established under Department of Ayurveda, Yoga and Naturopathy, Unani, Siddha medicine and Homoeopathy (AYUSH), Ministry of Health and Family Welfare in 1971 (AYUSH, 2014).
- The benefits of yoga date back to ancient texts like *Rigveda, Upanishads, and Yoga Sutras of Patanjali*. The technique is used to heal mind, body, and soul.
- Homeopathy is another system of alternate medicine founded by German doctor Samuel Hahnemann in the 19th century. The practitioners use homeopathic dilutions to balance biochemistry in human body to treat diseases.
- *The Unani system* has its roots in Muslim culture and is also based on the teachings of Greek philosophers Galen and Hippocrates. The system is based on the concept of four bodily humours (phlegm, blood, yellow bile, and black bile) and pulse reading (*nâdi parikshana*).

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- *The Siddha system* originated in South India. It is also based on theory of balancing five basic elements (earth, water, fire, air, sky).
- Reiki Healing is based on using universal life energy to heal physical, psychological and spiritual energies present in human beings.
- Pranic Healing, a comprehensive system based on natural healing techniques widely practiced in various cultures (Indian, Chinese, Hebrew, etc.). The practitioner uses ‘no-touch’ methodology. *Prana*, meaning ‘life force’, initiates biochemical changes to accelerate body’s innate power to heal physical and psychological illnesses. The healing process deals with mind, body, and soul all together.
- Medical practitioners and researchers are continuously putting their efforts to enhance the quality of research and practice in mental health. Mental health is an inseparable part of public health. Existing literature indicates that training of mental health practitioners in India is still a concern.
- Singh (2020) discussed that there is a lack of good research, training, and teaching. Research conducted on mental health of schedule tribe in India is scarce and needs to be ensured.

8.8 KEY WORDS

- **Psychotherapy:** It is the use of psychological methods, particularly when based on regular personal interaction with adults, to help a person change behaviour and overcome problems in desired ways.
- **Ayurveda:** It is an alternative medicine system that has its roots in the Indian subcontinent. Medical knowledge of diseases in Ayurveda comes from Gods, sages and medical physicians.
- **Acupuncture:** It is a traditional Chinese healing practice in which thin needles are placed at specific points in the body. It is primarily used to relieve pain but also has been used to treat other conditions.
- **Homeopathy:** It is a system of alternate medicine founded by German doctor Samuel Hahnemann in the 19th century. The practitioners use homeopathic dilutions to balance biochemistry in human body to treat diseases.

8.9 SELF ASSESSMENT QUESTIONS AND EXERCISES

Short-Answer Questions

1. Write a short note on the impact of cultural belief on mental health practice.

2. What are the three sectors emphasized by Kleinman in his culture-based model?
3. Define indigenous healing.
4. What do you mean by medical pluralism?
5. What is pranic healing?

Long-Answer Questions

1. Discuss the history of mental health practice in India and the West.
2. Examine the various indigenous healing practice prevalent in India.
3. Explain the challenges faced by mental health practitioners in India.

8.10 FURTHER READINGS

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UNIT 9 EASTERN PERSPECTIVES IN PSYCHOLOGY

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Structure

- 9.0 Introduction
- 9.1 Objectives
- 9.2 The Concept of Mind in *Samkhya* and *Nyaya-Vaisesika* Philosophy
- 9.3 Bhagavad Gita and Mental Health
- 9.4 Concept of Health and Illness in Ayurveda Personality
- 9.5 Implications from Yoga and Indian Perspective on Emotion
- 9.6 Answers to Check Your Progress Questions
- 9.7 Summary
- 9.8 Key Words
- 9.9 Self Assessment Questions and Exercises
- 9.10 Further Readings

9.0 INTRODUCTION

The Indian school of psychology is focused on improving well-being and excellence of human beings. The goal is to heal the person as a whole i.e. heal the mind, body, and soul. The mind holds central position as it connects the consciousness and body in a linear proportion. Indian philosophers have studied and interpreted the concept of mind. The mind is a crucial factor that causes agony but when one stabilizes it, one is also able to achieve calmness. The *Rig Veda* mentions the dual functioning of the mind which is both a blessing and a strain to human beings. For example, ‘What thing I truly am I know not clearly; mysterious, fettered in my mind I wander’ (*Zig Veda*, 1.164.37) (c.f. Rao et al. 2016; Griffith and Shastri 1973). In the above given statement, the mind is understood as gloomy. In another statement, ‘O Asuniti, keep the soul within us, and make the days we have to live yet longer.’ (*Zig Veda*, 10.59.5), the mind is understood as a safety net. (c.f. Rao et al. 2016; Griffith and Shastri 1973). This dual role of the mind is also supported *Upanishad* ‘Brahma Bindu’.

The *Bhagavadgita* points to a course of regulating the mind. E.g. ‘When a man dwells in his mind on the objects of sense, attachment to them is produced. From attachment springs desire and from desire comes anger. From anger arises bewilderment, from bewilderment loss of memory; and from loss of memory, the destruction of intelligence; and from destruction of intelligence he perishes. But a man of disciplined mind, who moves among the objects of sense, with the senses under control and free from attachment and aversion, he attains purity of spirit’ (2.62–64). ‘He who abandons all desires and acts free from longing, without any

sense of mineness or egoism, he attains peace' (c.f. Radhakrishnan 1948; Rao et al., 2016). Various thoughts on 'the mind' in Vedic literature laid down the foundation for later thoughts which included narration on the *sutras* of distinct philosophical systems. In *sutras*, the mind is thought of as 'nonconscious' (*acetana*) i.e. having some physical properties and differs in quality from consciousness. Mind is also understood as having three contents i.e. *cognitive, emotive, and volitional*. Therefore, existing literature shows different terminology for 'mind' in Hindu systems, Jainism, Buddhism, and in indigenous medical systems like *Ayurveda*.

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9.1 OBJECTIVES

After going through this unit, you will be able to:

- Examine the concept of mind in *Samkhya* and *Nyaya-Vaisesika* Philosophy
- Discuss the contribution of *Bhagavad Gita* in mental health
- Explain the concept of health and illness in *Ayurveda* Personality
- Understand the *Yoga* Indian Perspective on Emotion.

9.2 THE CONCEPT OF MIND IN SAMKHYA AND NYAYA-VAISESHIKA PHILOSOPHY

Hindu philosophy in ancient India comprised world-views that are relevant even today. Two of the important systems talked about in the Hindu philosophy are *Samkhya* and *Nyaya-Vaisesika*.

Samkhya Conception of Mind

It is one of the six schools of Hindu systems of philosophy. It is allied with the Yoga school of Hinduism and also influenced other schools of Indian philosophy (Perrett, 2000). *Samkhya* is pronounced as *Sankhya*.

The philosophy of *Samkhya* holds that universe consists of two opposite realities i.e. *Purusha* (pure consciousness or eternal spirit, also called the self) and *Prakriti* (material nature). Bernard (1947) identified both as 'soul and substance' of the universe (Nicholson, 2013). The process of evolution starts when both unite (Rao et al., 2016).

Prakriti consists of three qualities or *trigunas* (*rajas, tamas, & sattva*). *Prakriti* is active in nature and the spirit is enclosed within it. All change occurs in *Prakriti*. In its primary condition, *Prakriti* is in a perfect balance of *triguGas* (qualities) i.e. *Sattva, Rajas, and Tamas* are in equilibrium. When the interaction among *trigunas* occur, that is, when any one *guna* dominates the other *guna*, a

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state of disequilibrium occurs. This state of disequilibrium results in 23 objects. The objects contain three elements of *Antahkaranas* (internal organs) and ten *Bahyakaranas* (external organs) (Rao et al., 2016).

The first to evolve out of *prak[iti]-purusha* union is *Mahat* (means the great one). It is the universal cosmic mind (Blavatsky, 1980). *Mahat* emerges as a result of dominance of *sattva* (goodness). The psychological aspect of *Mahat* is *Buddhi* (intellect). It helps an individual to understand the difference between the self and the non-self. When *Mahat* has a dominance of *sattva*, it shines. It radiates light. *Buddhi* resonates with *Purusha* under the influence of *sattva*. *Buddhi* is the superior component of mind which has knowledge. It has direct connection with *Purusha* (Rao et al., 2016). Next to emerge from *Purusha-Prakriti* is *ahamkara* (ego consciousness). Its emergence is based on predominance of *trigunas* (Krishnappa, Sridhar, and Nagendra, 2020). When *rajas* component dominates, *Buddhi* starts to resonate with *ahamkara* (an ego) i.e., with *I, Me, Mine* component. In the ego, individual wants to fulfil desires and perform *Karmas* (actions). *Ahamkara* affects psychophysical framework of an individual. *Manas* and *Indriyas* evolve from *ahamkara*. *Manas* is called ‘the central processor of sensory inputs’ and connects *Ahamkara (ego) and Indriyas* (sensory-motor mechanisms). In *Samakhya Yoga*, *Buddhi, Ahamkara, and Manas* together create the *Citta* or *Antahkarana*. The *Anta%karaGa* is the internal instrument corresponding to what is called ‘the mind’. The *Citta* along with senses and sense organs create an individual. When individual participates in worldly affairs, he/she becomes prone to *Avidya* (clouding of consciousness), indulgence, attachment, selfishness, etc. All of these lead to agony or suffering like feeling of anxiety, frustration, fear, and anger, etc. (Rao et al., 2016)

Yoga thinkers came up with certain cure-based measures to help individuals get away from this suffering and lead a blissful life. Through *Yoga*, one can make their future actions *Samskaras* or *Vasanas* powerless and liberate oneself. When *Purusha-Prakriti* achieves a state of equilibrium, the mind is said to be liberated or in *Kaivalya* (Rao et al., 2016).

Nyaya-Vaiseshika Conception of Mind

In the beginning, *Nyaya* and *Vaiseshika* were separate systems. However, their philosophy was interrelated, so they came to be noted as one system i.e. the *Nyaya–Vaisechikha* system. Ancient text of *Nyaya* is *Nyaya Sutra* by Gautama (Rao et al., 2016; Gautama et al. 1984). Ancient text of *Vaiseshika* is *Vaiseshika Sutra* (Kanada, 1985).

Basic Postulates

1. *The Atman* or the self is dateless in *Nyaya-Vaisechikha*. It is purely non-physical. We cannot perceive *the Atman* in others, but we presume its existence in others. It is an agency which is all-pervasive and has the

experience. It is called the enjoyer and doer. It is through *Manas* (mind) that atman attains knowledge about internal and external world.

2. In this philosophy, *Manas* is regarded as a physical system i.e., a sense organ and is connected to other senses. It is restless and invariably moving. It perceives internal states like pain, pleasure, desire, hatred, etc. and accordingly directs other senses and integrates their inputs.

Psychological functioning manifests when *atman* and *manas* are wired together. Consciousness manifests itself as an attribute when *atman* and *manas* unite. The goal of human life is to attain, *Moksa* i.e., to liberate oneself from the association of the atman and the mind. In simple terms, human beings feel free when they have overcome the influence of the mind over the self. When a person dies, the atman is detached from the body, but is connected to *Manas*. *Manas* bears with it karma and goes through the cycle of death and rebirth (Rao et al., 2016)

Let us look at the three-stage process (Rao et al., 2016):

Stage 1 involves practicing *dharma* (moral actions) and conquering desires.

Stage 2 involves *reflection* (knowing truth about the self).

Stage 3 involves practicing *meditation* which helps to gain realization of truth or awareness. Such awareness will resolve ignorance which originates from the *atman's* bondage with the *manas*. Awareness helps one to attain *Moksa* or liberation of the *atman*.

Check Your Progress

1. What, according to *Samkhya* philosophy, are the two opposite realities in the universe?
2. What does *Prakriti* comprise?

9.3 BHAGAVAD GITA AND MENTAL HEALTH

The contribution of eastern philosophical texts towards mental health care is tremendous. Western psychologists are utilizing eastern models of psychotherapy along with western models for treating mental health problems (see Bhatia et al., 2013). A wide variety of culture-specific models of psychotherapy exist. The teachings from *the Bhagavad Gita* also hold importance in mental health. The scripture is called 'The Song of God', written by Ved Vyasa in 2nd century BCE. It includes 700 *shlokas* (verses). *The Bhagavad Gita* represents 25-42 chapters of the *Mahabharata*. The dialogue in *Gita* revolves around the conflict between *Kauravas* and *Pandavas*. The *Pandavas*, defeated the *Kauravas* in the Kurukshetra war. The dialogue succeeds between *Arjuna* who is on a chariot

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steered and directed by *Lord Krishna* (the guide and the charioteer). They get ready to face the huge army of *Kauravas*. Arjuna wants to quit battleground because he feels guilt and attachment towards his dear ones (*Kauravas*). He fears ruining his cousins (*Kauravas*). Lord Krishna guides Arjuna towards right course of action i.e., winning over evil. The whole interaction between Lord Krishna and Arjuna holds psychotherapeutic value. Arjuna's psychological dilemma symbolizes our lives which are filled with internal conflicts of our minds. In several ways, conflict resolution stated in the *Gita* shares similarity with psychotherapist or a counsellor, who not only addresses the conflicts faced by patients but helps them with resolution in the recovery process. Many well-known Indian psychiatrists utilize principles of the Bhagavad Gita in psychotherapy (Bhatia et al., 2013).

Here are some examples showing similarity between *the Bhagavad Gita* and current psychotherapy.

- ***The Gita and Psychoanalytic Psychotherapy:*** Freud's model of personality involves resolving the conflict between the id, ego, and superego by using healthy defense mechanisms. The conflict between three causes anxiety. The id seeks pleasure by immediate gratification of instinctive drives and impulses. The ego operates a reality principle which means it seeks to satisfy the id in realistic manner. The ego mediates between the ego and superego by using defense mechanisms. Superego, being the 'morality principle' is guided by societal values of right and wrong and reproves immediate gratification by raising conscience. Similarly, *The Gita* talks about resolving conflicts between *triguna* (*rajas, tamas, sattva*) of Arjuna. The role of *Tamas* is like the *Id* (immediate gratification of desires). *Rajas and Sattva* are the ego and superego respectively. Our desires emerge from our *indriyas* (senses). In the fulfilment of desires, anger may manifest itself. *Kaam* (lust), *Krodh* (anger), *Lobh* (greed), *Moh* (attachment) *Ahankar* (ego) share similarity with id in Freud system. *The Gita* understands that unsettled fight between senses affects the stability of the mind which in turn, affects reasoned action and ends in self-destruction. *The Gita* defines layers of consciousness and subconscious. In Psychoanalytic literature, there has been quite an extensive description of unconscious mind. Carl Jung described the unconscious mind a little differently and called it 'collective unconscious' (which is made of memories and beliefs inherited by ancestors). Collective unconscious is shared by all mankind. Jung's life experiences and later, his work with patients persuaded him that life has a higher purpose which is to meet the divine. According to Jung, the process of 'individuation' (a journey of transformation of the self and to meet the divine) is the motto of all religions. Similarly, *The Gita* talks about higher purpose of life i.e., to be one with God which is a pure bliss. The goal of Jung's psychotherapy is to gain insight into collective unconscious (Fristcher, 2020; Bhatia et al., 2013; Basu 2012). The

core of the *Gita* is to rise above *avidya* (human errors) and gain *vidya* (knowledge of the self) (Bhatia et al., 2013).

- ***The Gita and Cognitive Behavioral Therapy:*** Arjuna catastrophizes the future and experiences anxiety over death of his kin and wishes to quit battleground. Arjuna also experiences physical symptoms in the form of dry mouth, dizziness, etc. On seeing this, Lord Krishna uses motivational strategy and helps him to change his thought process and motivates him to act. To help Arjuna combat the distorted view of the world, Lord Krishna educates him that his anxiety is transitory and explains how it is causing physical symptoms. Arjuna holds himself responsible for the war and this state of mind is very similar to one of cognitive distortions i.e., personalization. Lord Krishna uses the concept of *Karma Yoga* to encourage Arjuna to act and not to avoid. Lord Krishna encourages Arjuna to not think about future results (which is like future telling, a cognitive distortion explained in CBT). In CBT, therapists often prescribe relaxation activity and use principles of reciprocal inhibition. Similarly, in *The Gita*, it has been noted that the use of relaxation techniques (like *pranayama* and *meditation*) is recommended to alleviate anxiety. For example, ‘With upright body, head, and neck, which rest still and move not; with inner gaze which is not restless, but rests still between the eyebrows;’ (Chapter 6; Shloka 13) ‘With soul in peace, and all fear gone, and strong in the vow of holiness, let him rest with mind in harmony, his soul on me, his God supreme’ (Chapter 6; Shloka 14). (Bhatia et al., 2013). Lord Krishna advised Arjuna on how to control the restless mind through practice and non-attachment. For example, *abhyâsena tu kaunteya vairâgye Ga ca ghyate*. (c.f. Basu, 2012). Similarity has been seen in *The Gita* and mindfulness approach as well. In *The Gita*, mindfulness is used as a tool to feel detached from senses to attain *Sthithapragna* (feeling unperturbed). For example ‘One should be tranquil like the ocean which is unaffected by rivers flowing into it’. (Bhatia et al., 2013)
- The teachings of *the Gita* can be used to help patient move along the grief process. The Counsellor-client relationship in the form of *Guru-Chela* relationship is well understood via *the Gita*.

The above discussion throws light on key aspects of *the Gita* and its applicability in mental health practice.

Check Your Progress

3. What are the similarities between the teachings of *Gita* and psychoanalytic psychotherapy?
4. Who coined the term ‘collective unconscious’?

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9.4 CONCEPT OF HEALTH AND ILLNESS IN AYURVEDA PERSONALITY

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Ayurveda is the age-old holistic system (i.e., healing of mind, body, and soul) of medicine in Indian culture (Lad, 1984). The literature of *Ayurveda* is given in three classical ancient texts (*Charaka Samhita*, *Sushruta Samhita*, and *Ashtanga Hridaya*) written in Sanskrit language (Rhoda, 2014). The healing treatment includes using natural herbs and lifestyle practices. *Charaka Samhita* describes several medical conditions like diabetes, multiple sclerosis, Alzheimer's disease, etc. *Sushruta Samhita* describes surgical procedures like skin grafting, removal of cataracts, etc. (Rhoda, 2014).

Ayurveda is one of the major areas of Complementary and Alternative Medicine in the United States with strong empirical evidence (see Sharma, Chandola, Singh, & Basisht, 2007; Chopra & Doiphode, 2002). The National Center for Complementary and Alternative Medicine (NCCAM) is a division of the National Institute of Health (NIH). Complementary and Alternative Medicine (CAM) is defined as 'a group of diverse medical and health care systems, practices, and products that are not generally considered part of conventional medicine' (NCCAM, 2010). Current ayurvedic physicians, also called *Vaidyas*, get medical training in both traditional Ayurvedic and Western medicine. Mental health professionals are incorporating Ayurveda within mental health practice (NCCAM, 2010). In the past literature, Ayurveda was also known as *bhuta vidya*. It outlined internal and external causes of mental illness (Rhoda, 2013; Singh, 2004).

Ayurvedic Psychology is one of the classical branches of Ayurvedic medicine (Antarkar, 2003). *Manas* (the mind) and *Sarira* (body) are closely associated and both affect physical and mental health (Rhoda, 2013). Physical or mental health distress manifest in somatic complaints and psychic concerns through mediating role of three humours or *tridoshas* (*Vata*, *Pitta*, *Kapha*). According to Ayurveda, human beings are born with *prakruti* (*dosha* blueprint) (Lad, 1984). They also get affected by environmental and psychological factors which causes imbalance in *doshas*. When *vikruti* (current *dosha* state of an individual) is in proximity with *prakruti* (original state of *dosha*), individual experiences optimal state of health.

The three humours represent three psychological and physiological functions guiding all human characteristics, actions, and patterns of health and illness. People with imbalanced *Vata* are more prone to mental health issues like depression, anxiety, etc. Also, *Vata* relates to experiences like dryness, constipation, dry skin, coldness, etc. *Vata* relates to air and carries out all physical activity, mental activity, and nervous system activity. *Pitta* relates to water and fire. *Pitta* carries out all digestive and metabolic activity and vision. People with imbalanced *Pitta* experience more anger and digestive issues. *Kapha* relates to earth and water. It relates to emotional activity and is responsible for controlling lubrication in the body. People

with imbalanced *Kapha*, experience low energy and become vulnerable to chronic diseases like diabetes, depression, obesity, diabetes, etc. Many people have a combination of doshas; they have one dominant *dosha* in their constitution as well as a less dominant dosha. They are said to have a *dual-dosha* type of personality (e.g., pitta-kapha type).

Ayurvedic therapy holds the view that mind, body, and soul can be aligned together for a healthy and harmonious relationship. The therapy aims at balancing *doshas* or restoring equilibrium. Interventions focus on following *Samyakachara*, which means rightful lifestyle (inclusive of *Vichar, Achar and Ahar*) to optimize health and cure any illness. For example, to balance *vata* in individuals, they are given soothing interventions like a massage therapy, nature walks and warm diets. Ayurvedic interventions also include aromatherapy, sound therapy, colour therapy, meditation, yoga (Rhoda, 2013). Within *Sankhya* philosophical tradition, Ayurvedic healing practices aim at increasing *sattvic* qualities (like honesty, clarity, etc.), decreasing *tamasic* characteristics (like dishonesty, ignorance etc.), and balancing *rajasic* characteristics (like passion etc.).

Medical practitioners have started embracing *dosha* theory to understand health and disease conditions (Rao, 2007; Venkobarao, 2002). Ayurvedic research has started to examine the genetic basis of *dosha* theory. (Rhoda, 2013; Patwardhan, Joshi, & Chopra, 2005). Jayasundar (2016) and Singh (2010) indicated that Ayurvedic treatment has captured positive evidence to heal mind, body, and spirit.

Check Your Progress

5. What kind of health issues do people with imbalanced *Kapha* experience?
6. What is Ayurvedic therapy aimed at?

9.5 IMPLICATIONS FROM YOGA AND INDIAN PERSPECTIVE ON EMOTION

Emotions are indispensable part of our daily life. They govern our thoughts, actions, and interactions abundantly. The way we regulate our emotions in an important part of our life too. The role of emotions in personality can be seen in Indian philosophical texts (Ramaprasad, 2013). The term aesthetic mood is called *rasa* in Indian culture. As we explore the history of Indian culture, Bharata headed and believed in the *rasa* theory within context of theatre. Later, it grew into a main concept in several domains like Literature, Visual Arts, Dance, etc. Bharata analysed the emotions experienced by observer while attending dramatic scene or while reading a poetry. His work titled *Natyasastra* came into existence in 3rd century A.D. The term *rasa* is quite common in *Vedas* and *worship songs* in which *rasa*

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is understood as 'a stream of consciousness', radiance and as an offering to the universe. *Bharatha* identified eight *rasas* corresponding to eight *bhavas* (emotions).

Following are eight *rasa and their corresponding bhavas* (Rangacharya, 1986):

1. *Sringara* (love), *Rati* (sexual),
2. *Hasya* (humour), *Hasa* (jollity),
3. *Karuna* (poignance), *Soka* (agony),
4. *Raudra* (rage), *Krodha* (anger),
5. *Vira* (courageous), *Utsaha* (vitality),
6. *Bhayanaka* (frighening), *Bhaya* (fear),
7. *Bibhasta* (unpleasant), *Jugupsa* (disgust),
8. *Adbhuta* (genious), *Vismaya* (wonder).

Abhinavagupta added a 9th *rasa* i.e., *santa* (total freedom) and its corresponding *bhava* is *sama*. The *bhava* emerges when an individual interacts with environment and individual starts to give expressions (*anubhava*). When several transitory emotions or *vyabharibhava* co-occur, they give rise to *sthayibhavas* (major emotions, also called innate emotions). And the person who is witnessing the *bhava* of another person, experiences *rasa*. (Ramaprasad, 2013; Cornellison, Misra, & Varma, 2011).

Yoga is one of the eastern approaches used to alleviate emotional distress and bring about relaxation. It is considered a 'mind-body medicine' i.e. aimed at reducing stress related to illnesses (Atkinson and Permuth-Levine, 2009). Prolonged stress is implicated to cause various chronic diseases like heart diseases, diabetes, cancer, etc. (Granath, Ingvarsson, von Thiele, and Lundberg, 2006). Gothe et al. (2019) reviewed 11 studies examining the effects of *yoga* on different areas of brain. The studies indicated that *yoga* has profound positive effect on hippocampus, amygdala, prefrontal cortex, cingulate cortex, and default model cortex (c.f. Gothe et al., 2019). Researchers also indicated that regular *yoga* practice impacts emotional regulation and helps to reduce stress, anxiety, and other negative emotional states. Watanabe, Fukuda, Hara, and Shirakawa (2002) found in their study that regular practice of *yoga* reduces levels of stress hormone, the effect of which was also tested in participants' saliva.

In Sanskrit language, *Yoga* means 'yoke' or 'to unite'. *Patanjali, a Yoga sutra* refers to it as 'a systematic approach to stabilize fluctuations of mind' (Taimini, 1971). It includes 8 steps (also called eight-limbed path) which has been discussed below:

1. **Yama:** This means taking a pledge to practice '5 restraints' (*ahimsa*/non-violence, *satya*/truthfulness, *asteya*/non-covetousness, *brahmacharya*/sexual restraint, *aparigraha*/non-possessiveness).

2. **Niyama:** It is a pathway to spiritual progress. It includes 5 things (Saucha/Cleanliness, Santosha/Contentment, Tapasya/Austerity, Swadhaya/Introspection, Ishwarapranidhana/Worshipping The Supreme)
3. **Asana:** This indicates practicing physical postures.
4. **Pranayama:** This indicates breathing exercises.
5. **Pratyahara:** This includes withdrawal from senses.
6. **Dharana:** This includes concentration of the mind.
7. **Dhyana:** This includes meditation practices.
8. **Samadhi:** This indicates complete oneness with infinite.

Patanjali Yoga, also known as *Ashtanga yoga*, outlines the ways to live in moderation and harmony (Becker, 2000). Other types of *Yogas* include *Jnana Yoga*, *Bhakti Yoga*, *Karma Yoga*, etc. Review of literature suggests that *Yoga* transforms an individual at a physical, mental, emotional, and spiritual levels. Religious scholars like Sri Aurobindo wrote, 'The more complete the calm, the mightier the yogic power, the greater the force in action' (p 201) (Adhia, Nagendra, & Mahadevan, 2010). Literature suggests that in *Yoga* philosophy, the *atman* is surrounded with five layers. As one moves inward, growth process starts. The journey inward helps in physical growth and development, psychological growth, enhances consciousness, reduces ego, and helps in accepting feelings and emotions (Srinivas, 1994).

The steps given in *Ashtanga* help to shape not only thought patterns and behaviour but also helps to minimise and eradicate negative emotions. Following a process, the individual reaps a '*chittasuddhi*' (purity of mind). *Asana and Pranayama* practices help in enhancing self-awareness, empathy, self-regulation which are core characteristics of emotion regulation (Adhia et al., 2010). The *asanas* enhance physical well-being but these are also important tools to heal an individual (Desikachar, Bragdon, & Bossart, 2005). McCall (2007) and Collins (1998) indicated that practicing *yoga* regularly facilitates emotional well-being e.g., increases friendliness, compassion, self-control, and calmness. With the rising trend in research supporting yoga benefits in mental health, practitioners are incorporating *Yoga* into their work with clients (American Psychological Association, 2009).

Check Your Progress

7. Who is credited with the 9th rasa?
8. What is Patanjali Yoga also known as?

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9.6 ANSWERS TO CHECK YOUR PROGRESS QUESTIONS

1. The philosophy of *Samkhya* holds that universe consists of two opposite realities i.e. *Purucha* (pure consciousness or eternal spirit, also called the self) and *Prakfiti* (material nature).
2. *Prakriti* consists of three qualities or *trigunas* (*rajas*, *tamas*, & *sattva*).
3. Freud's model of personality involves resolving the conflict between the id, ego, and superego by using healthy defense mechanisms. The conflict between three causes anxiety. Similarly, *The Gita* talks about resolving conflicts between *triguna* (*rajas*, *tamas*, *sattva*) of Arjuna.
4. Carl Jung used the term 'collective unconsciousness' to describe the unconscious mind.
5. People with imbalanced *Kapha*, experience low energy and become vulnerable to chronic diseases like diabetes, depression, obesity, diabetes, etc.
6. Ayurvedic therapy aims at balancing *doshas* or restoring equilibrium.
7. *Abhinavagupta* added a 9th rasa i.e., *santa* (total freedom) and its corresponding *bhava* is *sama*.
8. *Patanjali Yoga* is also known as *Ashtanga yoga*.

9.7 SUMMARY

- Hindu Philosophy in Ancient India comprised world-views that are relevant even today. Two of the important systems talked about in the Hindu philosophy are *Samkhya* and *Nyaya-Vaisesikha*.
- *Samkhya* is one of the six schools of Hindu systems of philosophy. It is allied with the Yoga school of Hinduism and also influenced other schools of Indian philosophy. The philosophy of *Samkhya* holds that universe consists of two opposite realities i.e. *Purucha* (pure consciousness or eternal spirit, also called the self) and *Prakfiti* (material nature).
- *Prakriti* consists of three qualities or *trigunas* (*rajas*, *tamas*, & *sattva*). In its primary condition, *Prakrti* is in a perfect balance of *triguGas* (qualities) i.e. *Sattva*, *Rajas*, and *Tamas* are in equilibrium.
- The first to evolve out of *prakfiti-purusha* union is *Mahat* (means the great one). It is the universal cosmic mind. Next to emerge from *Purusha-Prakriti* is *ahamkara* (ego consciousness). When *Purusha-Prakriti* achieves a state of equilibrium, the mind is said to be liberated or in *Kaivalya*.

- In the beginning, *Nyaya* and *Vaiseschikha* were separate systems. However, their philosophy was interrelated, so they came to be noted as one system i.e. the *Nyaya–Vaisechikha* system. Ancient text of *Nyaya* is *Nyaya Sutra* by Gautama. Ancient text of *Vaiseschikha* is *Vaiseschikha Sutra*.
- The contribution of eastern philosophical texts towards mental health care is tremendous. Western psychologists are utilizing eastern models of psychotherapy along with western models for treating mental health problems.
- The teachings from *the Bhagavad Gita* also hold importance in mental health. . Many well-known Indian psychiatrists utilize principles of the *Bhagavad Gita* in psychotherapy.
- Freud’s model of personality involves resolving the conflict between the id, ego, and superego by using healthy defense mechanisms. The conflict between three causes anxiety. Similarly, *The Gita* talks about resolving conflicts between *triguna (rajas, tamas, sattva)* of Arjuna.
- The teachings of *the Gita* can be used to help patient move along the grief process. The Counsellor-client relationship in the form of *Guru-Chela* relationship is well understood via *the Gita*.
- Ayurveda is the age-old holistic system (i.e., healing of mind, body, and soul) of medicine in Indian culture (Lad, 1984). The literature of *Ayurveda* is given in three classical ancient texts (*Charaka Samhita, Sushruta Samhita, and Ashtanga Hridaya*) written in Sanskrit language.
- According to Ayurveda, human beings are born with *prakruti (dosha* blueprint). The three humours represent three psychological and physiological functions guiding all human characteristics, actions, and patterns of health and illness. People with imbalanced *Vata* are more prone to mental health issues like depression, anxiety, etc. People with imbalanced *Pitta* experience more anger and digestive issues. People with imbalanced *Kapha*, experience low energy and become vulnerable to chronic diseases like diabetes, depression, obesity, diabetes, etc.
- Ayurvedic therapy holds the view that mind, body, and soul can be aligned together for a healthy and harmonious relationship. The therapy aims at balancing *doshas* or restoring equilibrium.
- Emotions are indispensable part of our daily life. They govern our thoughts, actions, and interactions abundantly. The way we regulate our emotions in an important part of our life too. The role of emotions in personality can be seen in Indian philosophical texts. In the light, Bharatha’s *rasa* theory assumes significance.
- *Bharatha* identified eight *rasas* corresponding to eight *bhavas* (emotions). *Abhinavagupta* added a 9th *rasa* i.e., *santa* (total freedom) and its corresponding *bhava* is *sama*.

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- The *bhava* emerges when an individual interacts with environment and individual starts to give expressions (*anubhava*). When several transitory emotions or *vyabharibhava* co-occur, they give rise to *sthayibhavas* (major emotions, also called innate emotions). And the person who is witnessing the *bhava* of another person, experiences *rasa*.
- *Yoga* is one of the eastern approaches used to alleviate emotional distress and bring about relaxation. It is considered a 'mind-body medicine' i.e. aimed at reducing stress related to illnesses.
- *Patanjali Yoga*, also known as *Ashtanga yoga*, outlines the ways to live in moderation and harmony. Other types of *Yogas* include *Jnana Yoga*, *Bhakti Yoga*, *Karma Yoga*, etc.

9.8 KEY WORDS

- **Cognitive Behavioral Therapy:** It is a type of psychotherapeutic treatment that helps people learn how to identify and change destructive or disturbing thought patterns that have a negative influence on behavior and emotions.
- **Ayurvedic therapy:** It is an alternative medicine system with historical roots in the Indian subcontinent. It uses a combination of diet, herbal treatment, and yogic breathing to treat illnesses
- **Yoga:** It is a spiritual discipline which focuses on bringing harmony between mind and body.

9.9 SELF ASSESSMENT QUESTIONS AND EXERCISES

Short-Answer Questions

1. Write a short note on *Samkhya* School of philosophy.
2. State the similarities between the teachings of *Bhagavad Gita* and cognitive behavioural therapy.
3. Write a short note on Ayurvedic therapy.
4. Briefly explain Bharatha's concept of *rasa*.
5. What are the eight steps of *Ashtanga Yoga*?

Long-Answer Questions

1. Discuss in detail the philosophical system of Nyaya-Vaisesika.
2. Examine the role of *the Bhagavada Gita* in mental health.
3. Discuss the implied value of *Yoga* in emotional wellness.

9.10 FURTHER READINGS

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UNIT 10 PHILOSOPHICAL ANTECEDENTS

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Structure

- 10.0 Introduction
- 10.1 Objectives
- 10.2 Cultural Psychology: Definition and Meaning
 - 10.2.1 Platonism
 - 10.2.2 Positivism
 - 10.2.3 Relativism
 - 10.2.4 Historicism
- 10.3 Methods of Cross-Cultural Research
- 10.4 Cultural Narratives
- 10.5 Methodological Issues
- 10.6 Answers to Check Your Progress Questions
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10.0 INTRODUCTION

As humans, we are essentially a culture-driven species. Cultural learning is evident in almost every aspect of our existence. Our cultural experiences, or rather our understanding of our culture shapes our behaviour, ideas, emotions, aspirations, etc. Cultural narratives play a crucial role in understanding the basic issues and belief systems that define a particular culture. This unit will discuss the relevance of cultural psychology with respect to school of thought like platonism, positivism, relativism and historicism. The unit will also explain the importance of cultural narratives. The methodology used in cross cultural research and the issues relating to it will also be explained.

10.1 OBJECTIVES

After going through this unit, you will be able to:

- Discuss the various concepts related to cultural psychology
- Explain the various methods used in cross-cultural research
- Understand the importance of cultural narratives
- Analyze the methodological issues in cross-cultural research

10.2 CULTURAL PSYCHOLOGY: DEFINITION AND MEANING

According to Shweder et al., (1988), ‘cultural psychology is the study of all the things members of different communities think (know, want, feel, value) and do by virtue of being the kinds of beings who are the beneficiaries, guardians and active perpetrators of a particular culture.’

Cultural psychology is the study of how cultural systems, symbols, practices, rituals, etc. influence human psychology. The most fundamental principle of cultural psychology is the consistency of culture in psychological terms. A particular culture may not exist in the exact same form, but it remains consistent in terms of its basic norms and values, over time, generation after generation. Each and every member might not be aware of every aspect of the cultural system, but to be identified as part of the same culture, a certain level of equivalence in the knowledge and practice of that culture must exist. In simple words, Mr. A and Mr. B can be said to belong to the same culture if they identify with the norms and values. They are not clones of each other and some differences in understanding of cultural symbols may exist, but this difference should not be significant.

There are three reasons as to why it is important to study cultural psychology:

1. Research has shown that most psychological constructs are not culture-free, i.e., they are influenced by culture-related variables.
2. Historically, it is evident that culture plays a pivotal role in the growth and development of individuals.
3. In the recent years, globalisation has forced multiple cultures to co-exist.

10.2.1 Platonism

Platonism refers to the view that all things exist in an abstract form, i.e., nothing physically exists in space or time. Gottlob Frege (1884) can be regarded as the most crucial contributor to the view of Platonism. Godel (1964), Russell (1912) and Quine (1948) are the other important figures who have endorsed Platonism. Platonism promotes the view that nothing exists in physical or mental form. This implies that all abstract entities are not prone to change and it is futile to try to determine causal relationships among them.

This philosophy is driven by a deep preoccupation with maintaining the quality of human existence in terms of ethics, religion and even politics. As believed by Plato himself, eternal realities do not change and are not dependent on what is being perceived by the senses. In other words, reality exists in a fixed form, irrespective of how one may perceive or interpret it. It is these unchanging realities that are the reason for the existence of this world and they give value and meaning to human life and existence.

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Platonic epistemology states that all knowledge is innate. Each human being possesses an immortal soul, which learns about eternal realities or their forms, in its lifetime. This soul then carries this knowledge forward from one birth or incarnation to the next.

10.2.2 Positivism

The term 'positivism' was promoted by Auguste Comte (1798-1857). Positivism is an orientation towards description of phenomenon as it occurs, through observation and scientific measurement. Positivism started as an attempt to emphasise the importance of science in human development. The final aim of positivism is to unravel common, universal and general principles in such a way that the phenomena in question is predictable and controllable. Positivists adhere strictly to what can be observed and measured. Any analysis beyond that, according to positivists, is metaphysical and unreliable.

The four principles of positivism are as follows:

1. Rationale and methods of study are same for all sciences.
2. The aim of any study must be to explain and predict phenomena.
3. All research must be strictly empirical in nature.
4. Knowledge must be value-free.

Positivists do not believe in compromising on accuracy of knowledge and attempt to avoid ambiguity at all costs.

With respect to social sciences, however, the positivistic tradition, unfortunately falls short. Positivism's over reliance on the conditions of objectivity and certainty is something that social science research cannot fulfil.

The positivistic tradition in cultural psychology promotes the view that a common set of principles and universal laws govern human behaviour across cultures. Positivism does not distinguish between the physical and the social world. With special reference to cultural psychology, the positivistic tradition has a major limitation: cultural systems do not exist independently of the individuals. Cultures are constantly evolving, to varying extents, due to the actions of the people belonging to it. Such influences are beyond the scope of the positivistic tradition. While cultural influences affect an individual's manner of existence, the individual's behaviour also influences the manifestations of culture.

10.2.3 Relativism

The relativistic ideology is based on the ideas of Franz Boas (1911), an anthropologist. This position is not in favour of evaluating any culture in terms of the norms and standards of another culture. Proponents of relativism seek to assess individuals as they are and not compare them with others or assign any value judgements or categories to them. The relativistic tradition does not look for cross-

cultural similarities. Even while studying differences, interpretations are made qualitatively. For example, individuals may be seen to differ on the form of intelligence exhibited, but not on the level of intelligence. In other words, you and I may possess different types of intelligence, but valid conclusions regarding who is more or less intelligent cannot be made. As a rule of thumb, the relativistic orientation does not lay any emphasis on comparative studies and views them as invalid.

Thus, from the perspective of cross-cultural research, this orientation would lay emphasis on using tools developed within the very culture in which they are to be used. In other words, any assessment is inapplicable outside the context in which it was constructed. Hence, if the effect of culture on any variable is to be analysed, it has to be done in a culture-specific manner. Cross-cultural comparisons have no values as two cultures should not be equated in any manner. Exploratory qualitative research is mostly conducted by academicians following this approach.

Coming up with findings that are highly relevant to a specified culture is the biggest strength of the relativism approach. It thus helps reveal culture-specific dynamics of a psychological variable. The limitation of this approach is its tendency to amplify variables. In other words, building separate constructs in the name of context-specificity unnecessarily proliferates the variables and also makes pan-cultural generalizations difficult.

10.2.4 Historicism

Historicism reflects the assumption that behaviour is largely (if not completely) dependent on the context in which it occurs. In simple words, historicism refers to an approach that emphasises the crucial role played by history and considers the historical past to be an influential factor in present and future events. The historicist approach lays emphasis on both continuity as well as change in behaviour, within a particular culture, over a considerable period of time.

In terms of cultural change, historicism is in direct opposition to evolutionism. Evolutionists believe that all humans possess a common set of cognitive abilities and traits, irrespective of culture, and thus all cultures will evolve in a similar manner and at a similar pace. Historicists, however, believe that this is an over-generalised view of cultural development. Instead of this universal perspective, historicism promotes studying the historical development of all cultures to assess and interpret their journey, their influences, etc. Such an approach does not only showcase the cultural changes that occur, but also help understand how and why they have occurred.

There are two types of historicism:

- 1. Diffusionism:** This school of thought posits that cultural traits and civilisation first began in a few selective parts of the world and then diffused or spread out to other areas of inhabitation. Thus, cultures across the world have a common point of origin.

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- 2. Historical particularism:** This school of thought posits that each culture needs to be studied individually by accurately reconstructing their historical journey.

To conclude, the historicist tradition promotes the idea that a detailed study of a culture's historical trajectory can unravel certain principles or laws that govern that culture.

Check Your Progress

1. Define cultural psychology.
2. What is the main limitation of positivistic tradition?
3. Who is the main proponent of relativist ideology?
4. Differentiate between historicism and evolutionism.

10.3 METHODS OF CROSS-CULTURAL RESEARCH

In psychology, rigid boundaries do not exist, neither in the discipline, nor in the methodologies to be used. Research in cross cultural psychology is riddled with various methodological issues. However, a well-informed selection in terms of methodology can help address some problems faced by cross cultural researchers. In the field of psychology research, two broad categories exist as far as methodology is concerned: qualitative and quantitative methods.

The qualitative methodology has been a faithful partner to psychology, ever since the discipline was conceptualized. While early psychologists were quite generous in their use of the qualitative method, the advent of the positivistic tradition and a zealous endeavour for psychology to be recognized as a science, led to the dominance of the quantitative methodology. Furthermore, the recent focus on statistical analysis has only added to the marginalization of the qualitative method. At some point in this journey, the notion that the qualitative and quantitative methodologies are incompatible, became popular. It soon became established that research can follow either the qualitative or the quantitative approach. While the former is useful in understanding the subjective realities of the individual, the latter can help establish causal pathways.

However, more recently, especially in the field of social and cultural psychology, this either/or position between qualitative and quantitative methods seems to have weakened. Mixed methods researches are gaining popularity and rightly so. This new approach is more pragmatic and does better at addressing at least some of the concerns that hinder cross-cultural research. Modern researchers have started to believe that both approaches are not just compatible, but indispensable for better results.

There are two most widely used qualitative methods in cross cultural psychology: interview and observation. The counterparts of these two methods in the quantitative tradition are: questionnaire and experiment. Let us discuss these methods in detail.

(a) Interview and Questionnaire

The aim of both these methods is to assess the subjective experiences, feelings, thoughts, etc. of the subject. Whether a cross-cultural researcher should use the interview or questionnaire depends on the information available about the phenomenon or variable being studied. If a well-established theoretical framework is available, then the questionnaire method would be effective. But if much theoretical understanding hasn't been achieved, then a less structured interview would serve the purpose.

The interview method is basically a conversation or series of conversations between the researcher and the subject where the researcher asks questions with a specific aim or goal in mind. The nature of the interview may range from one that is highly structured (having a fixed set of questions) to being loosely framed (guided by subject's responses, with none or few pre-fixed questions). The questionnaire method is a written self-report technique that can be conducted individually or in group settings. Questionnaires can have open ended questions, dichotomous questions (yes/no), multiple choice questions, scaling questions, etc. Well designed and empirically standardized questionnaires add immense value to the data collection.

A major disadvantage of both these methods is their reliance on self-reports. Psychologists are constantly trying to find ways to enhance the accuracy of self-report data, through the inclusion of lie scales. Social desirability and lack of introspective knowledge are potential barriers with these methods. Well-designed interviews and questionnaires can help in dealing with this issue.

(b) Observation and Experiment

Observation, as a method in psychology, has mostly been confined to the field of developmental psychology. But its utility in cross-cultural psychology should not be undermined. It is recommended to conduct observation in relatively structured and repetitive environments. The descriptive data that can be generated through observation can provide crucial insights to a cross-cultural researcher. It is an appropriate method if one wishes to understand the processes or mechanisms that exist in a cultural setting.

The experimental method involves the manipulation of one or more variable to observe whether this will cause changes in another variable. Experiments are to be conducted in controlled conditions to test a hypothesis formulated by the researcher. While the experimental method is more scientific and can help establish cause and effect pathways reliably, it may not always be possible to replicate situations in a controlled setting. A lack of such control, which is usually seen as a

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weakness of the observation method, becomes a boon when the variable in question cannot be manipulated, either methodologically or ethically.

(c) Mixed method

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Using a combination of qualitative and quantitative methods, as mentioned earlier, can add immense value to the research being conducted. The most popular combination used in cross-cultural psychology involves conducting a qualitative study first, where the relevant constructs are identified and hypothesis are formulated, followed by a more rigorous quantitative method. The qualitative enquiry can help the researcher identify the crucial variables, appropriate tools, gaps in existing knowledge, etc. Armed with this information, the researcher can proceed with the quantitative approach.

Another approach is to begin with a quantitative analysis and then conduct a qualitative study. This format is useful if the researcher wants to screen his subjects or control his subjects on a certain variable, or if the researcher wants to analyse the subjective efficacy of an intervention that was quantitatively conducted. Conducting a quantitative study before a qualitative study helps establish a firm foundation for the qualitative data to be more streamlined and accurate.

Check Your Progress

5. Mention the two most widely used qualitative methods in cross cultural psychology.
6. What is the limitation of the Interview and Questionnaire Method?

10.4 CULTURAL NARRATIVES

In Latin, the word '*narrario*' means story. Using narratives for research is often referred to as 'narrative inquiry' or 'narrative analysis'. It is a qualitative technique whose origin can be traced to the early 20th century. A researcher using narrative inquiry attempts to analyse and conceptualise a phenomenon as per its representation in anecdotal or episodic form or in available texts.

According to Hardy (1968), 'We dream in narrative, daydream in narrative, remember, anticipate, hope, despair, plan, revise, criticise, gossip, learn, hate and love by narrative.' According to Barcelos (2008), 'Narratives are an excellent method to capture the essence of human experience.'

According to Clandinin and Connelly (2000), 'Narrative inquiry is an umbrella term that captures personal and human dimensions of experiences over time, and takes account of the relationship between individual experience and cultural context.'

Telling stories has been deeply anchored in human existence. Stories are told and retold to every new generation. These stories are about ethics, morals or the origin and journey of one's culture. The richness and nuances of most cultural experiences or events in the culture's past cannot be explained through abstract definitions. Same is the case with morals and values. Defining and stating these in a fact like manner not only restricts them, but also renders the message ineffective. Storytelling, on the other hand, evokes or demonstrates the message most effectively. This is why narratives are an integral part of any culture's heritage. To not capitalise on this aspect would be a great loss for any cross-cultural researcher. Cultural narratives are a huge source of information if one wants to truly understand the norms and interpret correctly what has been observed or assessed.

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Some researchers have reported that cultural narratives related to morality play a significant role in the shaping of one's moral reasoning (Prasad, 2007). As per Grassie (2008), various elements that are pivotal to being human, such as a sense of purpose, self-identity, value systems, ambitions, etc. are derived from the cultural narratives that are engrained in our daily lives. Cultural narratives, especially those entrenched in folklore, fables, religious scriptures, etc., can be deeply embedded in one's memory. The value systems promoted by these quite organically become a core part of our cultural existence.

Cultural narratives perform the following three functions. They help a culture by:

1. Emphasising the norms
2. Safeguarding history
3. Strengthening the cultural identity

Cultural narratives play a crucial role in understanding the basic issues and belief systems that define a particular culture. They are universally prevalent and extremely helpful tools that can help cross-cultural researchers give meaning to the experiences of their subjects. It is through cultural narratives that one can decipher the unique aspects of a cultural setting such as their historical journey, values, heritage, tradition, spirituality, etc. They serve as a link between the past and the present. Cultural narratives can uncover the various influences that have shaped the existence of a culture, such as critical events, notable people, etc.

Narrative analysis has been used in other fields of psychology as well, where narratives are built through interviews, group discussions, blogs, etc. Critical event analysis and content analysis are some of the techniques that are often used to then interpret these narratives. A major difficulty while analysing cultural narratives is for the researcher to determine whether the particular narrative is a true reflection of the circumstances or it has been altered by the author of the narrative. Thus, the source of the narrative must be authenticated.

According to Polkinghorne (1988) 'people without narratives do not exist'. This interesting statement emphasises the extensive reach that narratives have in

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our lives. The relationship is, of course, interactive. As individuals, we are constantly contributing to existing narratives, building them, and even changing them. On the other hand, we are also immensely influenced by the narrative prevalent around us. It wouldn't be wrong to say that the entire life journey is a narrative, formed by the complex interplay of many narratives.

10.5 METHODOLOGICAL ISSUES

The history of cross-cultural research has neither been consistent, nor smooth. In fact, a lull in such research was seen for several decades. The decrease in culture related research can be attributed to the emergence of behaviourism, which was based largely on animal studies. At this time, certain psychologists were also of the view that culture comes under the purview of anthropologists or sociologists and psychology must focus on the individual alone. In recent times, however, there has been a plethora of cross-cultural research. The two main reasons for this are as follows:

1. Psychologists unanimously agree that most psychological variables have a significant component that is influenced by cultural factors. Assuming such variables to be immune to culture leads to inconclusive findings. In fact, it would be rare to come across a psychological variable that is completely free from cultural influence.
2. Globalisation, be it in the workplace, in education, or even due to immigration, has resulted in a society where different cultures co-exist. For this co-existence to be harmonious and productive, an understanding of cultural influences becomes crucial and is very much needed.

While psychological research in itself is riddled by various issues due to the nature of the subject, cross cultural research seems to have added disadvantages. Intricacies of different cultures, procurement of representative samples, etc. are some of the frequent problems. The methodological issues warrant serious attention.

One of the most discussed issues in cross cultural research is whether or not it is viable to assume that people belonging to the same race are equivalent for the purpose of the study. If the answer is yes, this means that the researcher believes that all people belonging to the race possess similar characteristics (those characteristics that will influence the dependent variable). A similar question to be asked is whether the present sample truly representative of the entire race. Of course, having a truly random sample is rarely possible in practice; the researcher must make all attempts to find a representative sample. If not so, the limitations of the sample must be adequately addressed while interpreting the results.

The next issue deals with the relation of location with culture. Most cross-cultural studies equate location (such as country) with culture. In doing so,

researchers are making the assumption that a common cultural environment exists throughout the location. This assumption cannot be farther from the truth. For example, a researcher may want to compare Indians and Americans on a particular variable. You can very well imagine how different the cultural set up is in north India versus south India. If the variable in question is not affected by these intra-group variations, only then must a researcher attempt to conduct a study with this design.

Deciding which tools to use in a cross-cultural study can be tricky and difficult. In psychological studies, various kinds of tools are used such as psychometric questionnaires, projective tests, interviews, environmental stimuli, etc. Two main issues arise in this regard:

1. The meaning of the construct itself may not be the same in both cultures.
2. The tool may be appropriate for one culture but not for the other.

Differences in the understanding of and in the relevance of a construct can also vary from one culture to another. For example, it is often assumed that self-esteem is a desirable, even needed trait, universally; hence, it is viewed as culture-free. But the very construct of self-esteem is American. In fact, a study conducted by Heine et al. (1999) revealed that this need was not observed as strongly in the Japanese participants as it was in the American participants. Some researchers even claim that as a construct, self-esteem is not of much importance in Eastern psychology, while Western psychology has always viewed it as crucial trait of human personality.

Another major issue that is seen in cross-cultural studies is that of confounding variables. Many times, variability in a construct may be mistakenly attributed to culture, when in reality it could be caused by other variables such as economic status, environmental conditions, health conditions, etc. Let us consider an example of a study conducted to assess the effect of culture on an individual's conceptualisation of personal space (personal space can be defined as the minimum distance from another person at which an individual feels comfortable standing or sitting). Let's assume that the results show that American participants require a larger distance as personal space as compared to Indian participants. The dilemma here for the researcher is that there can be two valid explanations:

1. Collectivistic cultures lay more importance to social bonds as compared to individualistic cultures.
2. Indians have lived in a densely populated country and are accustomed to lesser personal space.

To decide which explanation is valid would require further enquiry and expertise on the researcher's part. 'Cultural attribution fallacy' is the term given to such phenomenon, i.e., the phenomenon of attributing variations among two or more groups to cultural variables, despite a lack of appropriate empirical evidence or a misinterpretation of the evidence.

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Researchers must be meticulous while documenting and reporting the demographic information of the sample. As discussed above, interpretation of results, without taking into account additional factors can be highly misleading, even more so in cross-cultural psychology. Reporting of demographic information is also useful for future researchers in identifying gaps and potential areas for further research.

Most cross-cultural research is limited in another aspect, i.e., researches often tend to distinguish cultures on the basis of the concept of individualism and collectivism alone. Matsumoto and Yoo (2006) have identified 25 dimensions other than the individualism-collectivism continuum that can be used to differentiate one culture from another. Not taking into account these additional dimensions will seriously limit the applicability of the findings of cross-cultural research. Two cultures may not be distinguishable on the I-C continuum, but may have significant differences on these added dimensions. This aspect requires much attention and exploration for cross-cultural research to be truly fruitful.

Another observation that you will often come across as a student of cross-cultural psychology is that most studies, when comparing two culturally distinct groups, assume the Western pattern to be the norm. Even if it is not said explicitly, basing a study on this norm implicitly sets the Western behaviour as a standard against which others are to be compared. This, in itself, is a biased view and can lead to faulty interpretations.

Does cross cultural research promote racial profiling, stereotyping, etc.? This question must be discussed, on ethical and moral grounds. Sensitivity to cultural variations, an understanding of how these variations may be interpreted and what implications these interpretations would have on the people of that culture, is a must if one wants to conduct cross-cultural research. Without this understanding and without appropriate competence, it is unethical for a researcher to step foot into this realm of psychological research. Some theorists even go to the extent of questioning whether true cross-cultural research is even possible. In the era of an active (maybe even over-active) media platform, the cross-cultural influences cannot be ignored and thus dilute the differences that exist between cultures.

The journey of cross-cultural psychology has been tumultuous, yet worthwhile. What began with a descriptive, basic comparison of individuals from different cultural backgrounds, has now evolved into a refined analysis of the complexities and dynamics that exist between culture and behaviour. The intellectual and social implications of cross-cultural research are too significant to be overlooked due to methodological challenges. Findings reported in cross-cultural studies have not only changed the manner in which we interpret results, but they have also changed the manner in which research is being conducted. Researchers must be encouraged to contribute in this critical sub-field of psychology and must be made aware of not just the technical requirements, but also of the sensitivity that is required to truly do justice to this work.

Check Your Progress

7. What are the functions of cultural narratives?
8. State the problems that arise when same tool is used for interpretation of two cultures.

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10.6 ANSWERS TO CHECK YOUR PROGRESS QUESTIONS

1. Cultural psychology is the study of how cultural systems, symbols, practices, rituals, etc. influence human psychology.
2. With special reference to cultural psychology, the positivistic tradition has a major limitation: cultural systems do not exist independently of the individuals. Cultures are constantly evolving, to varying extents, due to the actions of the people belonging to it. Such influences are beyond the scope of the positivistic tradition.
3. The relativistic ideology is based on the ideas of Franz Boas (1911), an anthropologist.
4. In terms of cultural change, historicism is in direct opposition to evolutionism. Evolutionists believe that all humans possess a common set of cognitive abilities and traits, irrespective of culture, and thus all cultures will evolve in a similar manner and at a similar pace. Historicists, however, believe that this is an over-generalised view of cultural development. Instead of this universal perspective, historicism promotes studying the historical development of all cultures to assess and interpret their journey, their influences, etc.
5. The two most widely used qualitative methods in cross cultural psychology are interview and observation.
6. A major disadvantage of the Interview and Questionnaire method is their reliance on self-reports. Social desirability and lack of introspective knowledge are potential barriers with these methods.
7. Cultural narratives perform the following three functions. They help a culture by:
 - Emphasising the norms
 - Safeguarding history
 - Strengthening the cultural identity

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8. The following problems arise when same tool is used for researching two cultures:

- The meaning of the construct itself may not be the same in both cultures.
- The tool may be appropriate for one culture but not for the other.

10.7 SUMMARY

- Cultural psychology is the study of how cultural systems, symbols, practices, rituals, etc. influence human psychology.
- Platonism refers to the view that all things exist in an abstract form, i.e., nothing physically exists in space or time. Gottlob Frege (1884) can be regarded as the most crucial contributor to the view of Platonism. Godel (1964), Russell (1912) and Quine (1948) are the other important figures who have endorsed Platonism.
- The term ‘positivism’ was promoted by Auguste Comte (1798-1857). Positivism is an orientation towards description of phenomenon as it occurs, through observation and scientific measurement. Positivists adhere strictly to what can be observed and measured. Any analysis beyond that, according to positivists, is metaphysical and unreliable.
- The positivistic tradition in cultural psychology promotes the view that a common set of principles and universal laws govern human behaviour across cultures. Positivism does not distinguish between the physical and the social world.
- The relativistic ideology is based on the ideas of Franz Boas (1911), an anthropologist. This position is not in favour of evaluating any culture in terms of the norms and standards of another culture. Proponents of relativism seek to assess individuals as they are and not compare them with others or assign any value judgements or categories to them.
- Historicism reflects the assumption that behaviour is largely (if not completely) dependent on the context in which it occurs. In simple words, historicism refers to an approach that emphasises the crucial role played by history and considers the historical past to be an influential factor in present and future events. There are two types of historicism: Diffusionism and Historical particularism.
- A well-informed selection in terms of methodology can help address some problems faced by cross cultural researchers. In the field of psychology research, two broad categories exist as far as methodology is concerned: qualitative and quantitative methods.
- There are two most widely used qualitative methods in cross cultural psychology: interview and observation. The counterparts of these two methods in the quantitative tradition are: questionnaire and experiment.

- Using a combination of qualitative and quantitative methods can add immense value to the research being conducted. The most popular combination used in cross-cultural psychology involves conducting a qualitative study first, where the relevant constructs are identified and hypothesis are formulated, followed by a more rigorous quantitative method.
- Cultural narratives play a crucial role in understanding the basic issues and belief systems that define a particular culture. It is through cultural narratives that one can decipher the unique aspects of a cultural setting such as their historical journey, values, heritage, tradition, spirituality, etc.
- One of the most discussed issues in cross cultural research is whether or not it is viable to assume that people belonging to the same race are equivalent for the purpose of the study. If the answer is yes, this means that the researcher believes that all people belonging to the race possess similar characteristics.
- Most cross-cultural studies equate location (such as country) with culture. In doing so, researchers are making the assumption that a common cultural environment exists throughout the location. This assumption cannot be farther from the truth.
- Another major issue that is seen in cross-cultural studies is that of confounding variables. Many times, variability in a construct may be mistakenly attributed to culture, when in reality it could be caused by other variables such as economic status, environmental conditions, health conditions, etc.

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10.8 KEY WORDS

- **Cultural psychology:** It is the study of how cultural systems, symbols, practices, rituals, etc. influence human psychology.
- **Positivism:** It is an orientation towards description of phenomenon as it occurs, through observation and scientific measurement
- **Historicism:** It reflects the assumption that behaviour is largely (if not completely) dependent on the context in which it occurs.

10.9 SELF ASSESSMENT QUESTIONS AND EXERCISES

Short-Answer Questions

1. Write a short note on the need for cultural psychology.
2. What do you mean by Platonism?
3. Mention the four principles of positivism.

4. What are the two types of historicism?
5. Define narrative inquiry.

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Long-Answer Questions

1. Discuss in detail the qualitative and quantitative methods used for cross cultural research.
2. Explain the importance of cultural narratives.
3. Analyze the major issues in the methodology of cross cultural research.

10.10 FURTHER READINGS

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BLOCK IV
CULTURAL FACTORS

*Socialization and
Development and
Cultural Learning*

**UNIT 11 SOCIALIZATION AND
DEVELOPMENT AND
CULTURAL LEARNING**

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Structure

- 11.0 Introduction
- 11.1 Objectives
- 11.2 Attribution
- 11.3 Notions of Individuality and Relatedness
 - 11.3.1 Intergroup Behaviour and Cultural Ideals
 - 11.3.2 Acculturation, Enculturation and Socialization
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 - 11.4.1 Parenting and Family in Indian Setting
 - 11.4.2 Play
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- 11.5 Answers to Check Your Progress Questions
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- 11.7 Key Words
- 11.8 Self Assessment Questions and Exercises
- 11.9 Further Readings

11.0 INTRODUCTION

Every newborn child must learn the accepted ways of behaving in a community in order to live; they must learn the culture of society, a mechanism known as socialisation. Thus, socialisation is a lifelong process by which people learn the values and norms of a given society. It is also an adaptive experience of lifelong learning because society is continually evolving and because we can find ourselves in new circumstances such as a new job with different standards and values or in a different family position such as that of an older relative's parent or caregiver. It is important to both the people and the communities in which they reside. In this unit, we will discuss the concept of attribution and notions of individuality and relatedness, along with the concepts of acculturation, enculturation and socialization. We will also focus on child rearing, parenting and family in an Indian setting.

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11.1 OBJECTIVES

After going through this unit you will be able to:

- Explain the concepts of attribution and notions of individuality and relatedness
- Discuss the concepts of acculturation, enculturation and socialization
- Describe the child rearing, parenting and family in Indian setting

11.2 ATTRIBUTION

Attribution is the method of drawing inferences regarding cause and effect relationships. In real life, attribution is something we do all the time, usually without understanding the underlying mechanism and prejudices that contribute to our decisions. Within a typical day we make multiple attributions about our actions and the behaviour of the people around us. For example, when a student gets bad grades on quiz, he/she may blame the teacher for not explaining the material fully, totally ignoring the fact that he/she didn't study well for it. According to Fiske & Taylor (1991), 'attribution deals with how the social perceiver uses information to arrive at causal explanations for events. It examines what information is gathered and how it is combined to form a causal judgment'. Thus, attribution theory concerns itself with the motives behind attitudes and behaviour. For example, is someone angry because they are bad-tempered or because something bad happened

According to Miller (1984), there has been a longstanding evidence for cultural differences in the biases of people's everyday explanation for behaviour. An internal attribution is when a behaviour is attributed to internal or personal factors that is, due to person's traits, abilities and feelings whereas external attribution is when a behaviour is attributed to external factors. Internal attribution is also known as dispositional attribution as we assume that a person's disposition is the reason for their behaviour. External attribution is also known as situational attribution because we assume that the person is in is affecting his or her behaviour. For example, Dave's car breaks down on the freeway, if he believes the breakdown happened because of his ignorance about cars, then he is making internal attributions, whereas if he believes the breakdown happened because his car is old then he is making external attribution.

The fundamental attribution error relates to an individuals' propensity to ascribe other people's actions to their own personality character, while attributing their behaviour to their environment. For example, if you have reprimanded an employee for being late to a meeting, and go on to justify your lateness on the same day, you have committed the fundamental attribution error. Miller (1984) in a study asked children and adults both in India (a collectivistic culture) and the United States (an individualistic culture) to indicate the causes of negative actions by other people. Although the younger children (8-11 years) did not make the

error, the older children (age 15) and adults did. Americans made more personal attributions whereas Indians made more situational attributions for the same behaviour. In a study by Khandelwal, Dhillon, Akalamkam et al. (2014) done on Muslim adolescents in a conflict zone (Kashmir) and non-conflict zone (Delhi), it was found that there was no differences between Kashmiri and Delhi students in the attributions made for socially undesirable behaviours by the in-group and out-group.

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Check Your Progress

1. Define attribution according to Fiske & Taylor?
2. What is the fundamental attribution error?

11.3 NOTIONS OF INDIVIDUALITY AND RELATEDNESS

The current body of research within cross-cultural psychology has posed key questions about the importance of autonomy, self-determination and freedom of choice in various cultures and how these factors affect the functioning of people within different cultural contexts. The individualism and collectivism dimension defines the degree to which individuals in a society are integrated into communities and is distinct from individual characteristics. In an individualistic society, there is an assumption that individuals look after themselves and relations between individuals are loose, whereas in a collectivist society, individuals are organised into strong unified communities, which may also include extended family. In individualism, the identity is based on the individual, whereas in collectivism the identity is based on social system. Countries like Australia, USA are high on individualism whereas countries like India, Venezuela are low on individualism that is, collectivist.

Table 11.1 Features of Culture

Features of individualistic cultures	Feature of collectivistic cultures
Describes cultures in which the ties between individuals are loose	Describes cultures in which people are integrated into strong, cohesive groups
'I' identity	'We' identity
Everyone has the right to have their own opinions	Opinions are shaped by the group
A person's commitment include their own interest, self-education and their own needs	Commitment towards the family
People are expected to care for themselves and their immediate family	Everyone is part of larger group and is expected to be loyal and care for its well-being
Decisions are made individually and are influenced by people's belief and opinions	The group makes all decisions
Countries- Australia, USA	Countries- India, Singapore, Mexico

11.3.1 Intergroup Behaviour and Cultural Ideals

Realistic Conflict theory or Realistic Group Conflict Theory, a theory developed by Muzafer Sherif (1966), is used to describe the conflict, negative prejudice and

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discrimination that occur between groups of people who are in competition for the same resources. The conflicts, negative stereotypes and beliefs can be reduced if groups work towards super-ordinate goals (mutually desirable goals). Study has been performed in both psychological and sociological areas. For example, Realistic Group Conflict Theory is used in cross-cultural researches and explored how it can be used to examine relationships between ethnic and religious groups. The findings indicate that the more people are denied essential services, the more abuse they will encounter. Research demonstrates that rivalry can lead to aggressive and potentially violent behaviours among children, adolescents and adults. The Robber's Cave Experiment has been used to demonstrate this theory.

Robber's Cave Experiment

A popular psychology study that looked how conflict evolves between groups was the Robber's Cave experiment. It was part of a series of experiments performed in the 1940s and 1950s by social psychologist Muzafer Sherif and his colleagues. In these studies Sherif examined how groups of boys interact with a rival group at summer camp and stated that when the two groups have opposing interest their representatives will become aggressive to each other even though the groups are composed of ordinary well-adjusted individuals. The boys arrived at the camp in two distinct groups, they spent time with members of their own group for the first part of the research without understanding that the other group existed. The groups chose names (The Eagles and the Rattlers) and each group formed its own norms for groups and group hierarchies. The boys became aware a short period of time that there was another group at camp and the campers group talked negatively about the other group after learning about the other group. The researchers started the next phase of research at this point, a friendly tournament between the groups consisting of games such as baseball and tug-of-war for which winners would receive prizes and trophy. The relationship between the two groups soon became strained after the eagles and rattlers started participating in the tournament. The groups started exchanging insults and the dispute spiralled rapidly. The teams also burned the team flag of the other side. Researchers also noticed a change in the group itself, the groups became more cohesive.

11.3.2 Acculturation, Enculturation and Socialization

Acculturation is defined as the process of social, psychological and cultural change that results from blending between cultures. Berry (2005) defined it as 'the dual process of cultural & psychological change that takes place as a result of contact between two or more cultural groups and their individual members'. The 'ac' prefix means accept, access & assimilate. It is not the first but second or third familiarization to various cultures. It is the exchange of cultural features that results when groups of individuals having different cultures come into continuous first hand contact, the original cultural patterns of either or both groups may be altered but the group remains distinct. It is defined as a 'cultural unit' (an idea or value or

pattern of behaviour) that is passed from one person to another by non-genetic means (an imitation).

Enculturation is the process of ‘becoming’ a member of your own culture. The ‘en’ prefix means enclose and encircle. As soon as a child is born, he/she begins to acquire the culture around him, with or without influence. It is the very first familiarization process to a culture. It is the product of learning. It is not static but a dynamic process & can take place through conscious or unconscious mode. Thus, Acculturation is the process of psychological and cultural change as a result of contact and interaction between cultures and Enculturation is the process by which individual learn their culture in order to fully function within it. Enculturation is essential for survival, whereas acculturation is not.

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Check Your Progress

3. Which countries are high on individualism and collectivism?
4. Who performed the Robber’s Cave experiment?

11.4 CHILD REARING

Parents also have a wide variety of opportunities when it comes to influencing their children’s everyday lives. Making decisions relating to child care can be complicated and hard for parents. Although there may appear to be only one best way to raise a child, most researchers now say that there is absolutely no one-size-fits-all when it comes to raising children.

Child-rearing differs across communities and nationalities. Norwegian parents let their kids sleep outdoors in near freezing temperatures. The French do not appeal to ‘fussy eaters’. Rather, the same meal is served to the children. In the Polynesian Islands, it’s common for ‘older’ children to take care of ‘younger’ ones even though they’re not their ‘siblings’. ‘Argentine parents let their children stay up late at night’ as NPR explains. ‘Parents in Japan let seven-year-olds ride the subway alone, while Danish parents let their kids sleep in a stroller on the street at night while they are out to shop or eat’, etc. Sara Harkness, a professor of human growth at the University of Connecticut, discovered a characteristic that is special to American parents: their confidence in the value of early age cognitive stimulation. Her research on cultural models and developmental agendas for early infancy concluded that American mothers were more likely to stress the importance of sustaining elevated levels of mental arousal and action than their counterparts in other countries

One of the most controversial concepts of parenting is whether and to what degree parents can foster their children’s autonomy. There are two basic types of child rearing, that is, individualistic and collectivist. An individualistic society stresses

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self-reliance, while a collectivist culture emphasises group-loyalty. Child-rearing customs and beliefs among Indians are not the same. India has a diverse community of different worldviews to raise them. It is difficult to reflect the unified traditions and beliefs of all Indians because of different tribes in the region. Influential explanations on child rearing activities, including social status, schooling, and individual knowledge of the parents, differ from family to family.

11.4.1 Parenting and Family in Indian Setting

Since cultures around the world have varied parenting practises that influences the way in which parents raise their children. The various cultural scripts affect parents' values and behaviours as well as the aspirations of parents seeking to meet. According to Goodnow (1988); Harkness and Super (1996); and Valsiner (2007), parents and children are both receivers as well as source of culture. Both parents have certain ideas about the manner in which a child is to be raised, about what they believe must be an integral part of his or her life, about the aspirations and ideals they deem significant about childhood. Parents' expectations that their children are able to leave home is what counts. Few of the discipline approaches to child rearing are addressed as they are assumed and taken for granted for daily life. According to Sigel (1992), parental ideas or beliefs are labelled differently by researchers, parental cognitions, psychology of the caretaker. Each of these refers to the cognitive domain of parenting behaviour, parents thinking about parenting and the naïve psychology that influences what parents do. The parent's beliefs are built from the common cultural capital to constitute the parents' personal beliefs.

India is a country comprising many varied cultures held with heterogeneity. Diversity is a salient characteristic of the social environment. In India, the family has always been a crucial social unit that governs the lives of all its members. The family is fundamental to all levels of social contact, and the people are defined by the family members they are linked to and the chronology of their fathers and their forefathers. The family is the centre of all events about their offspring, from the time of the birth. As shared family structures are the rule, the personalities of members are often strongly interwoven. The intensely community centred essence of Indians can be correctly described as having unique learnings towards their families branded as the 'familial self'. It is not surprising as most conventional Indian family study defines the unit to have an interdependent and mutual orientation. Children in India have myriad experiences with family as well as outside family. Despite the important role played by mothers in the lives of their children, the upbringing of children has frequently become a mutual experience between families, friends and those in the group. Several shifts have arisen in the composition and working of families in India due to rapid urban development. The growing availability of the internet has led to many shifts in gender & class equations and even family dynamics. The evolving essence of family & gender roles in Indian culture is demonstrated by examples of various family systems and roles. The family continues to be the focus of social life. While family relations offer a point of support, the family is continually evolving.

11.4.2 Play

Children can turn the mundane into fun while cleaning the home, preparing food or washing one hands. Playing seems to be the children's very reason for life. The artefacts obtained at Harappa & Mohenjo-daro (around about 2500-1700 BC) from the Indus valley civilization provide evidence demonstrating that play has always been regarded as part of the child's natural behaviour repertoire and the society made specific provisions for children's play. Items excavated were small ones of everyday use including bullock carts, kitchen pots and dolls. The interesting aspects of these toys is that they are made locally found in nature. Certain toys, like the snake toy, take on ritualistic association (like 'naga puja'). The play in the Indian context, it is apparent that they have been used as a microcosm of an experimental theatre in which children learn adult laws and behavioural norms relevant to the natural context.

In an empirical finding by Oke, Khattar, Pant, and Saraswati (1999) based on ethnographic accounts of 340 episodes of child structured play or spontaneous play in Mumbai & urban city of Vadodara, observations were made of children playing at specific settings. Gender differences were observed in play, girls played hop-scotch, played with dolls whereas boys played cricket & ball games. There were also marked gender differences in the use of space for play. Girls used enclosed available spaces whereas boys used open spaces for play. In Urban Indian context Play activities included Hide & Seek (luka-chippi), Tag (pakda-pakdi) Ball and stick (Lakad-uti), jumping (hop-scotch). Early twentieth century Russian Psychologist Lev Vygotsky and American anthropologists John & Beatrice Whiting stressed the importance of social context and cultural processes in interpreting the meaning of children's social activities and play behaviour. (Vygotsky, 1978 and Whiting and Edwards, 1988). According to Vygotsky (1967) play was central to the development of mental functions during the preschool years.

Definitions and standards of play from Western industrialised countries have not always been accurate for understanding the parent-child play practised by non-Western Industrialised countries. Play is culturally situated and mothers and fathers help plate interactions in various forms through cultures and time. According to Gray (2009), play-like activities may include humour, shaming, status levelling or even work-related activities. Greenfield et al (2003) suggests that the meaning attached to involvement in these play like activities is driven by cultural beliefs and practised developed and shaped within the essence of parental socialization goals and expectations for children.

In a small cross cultural study by Rogoff et al., (1993) showed that mothers in United States acted as playmates to children 47% of the time compared to 7% of the time in Guatemala and 24% of time in India. In another study by Roopnarine et al, (1995) it was found that mothers in Jamaica spent significantly more time holding or playing with infants than fathers. Studies have further suggested that decreases in physical activity through play are linked to childhood obesity, reduced

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recess play has a negative impact on a child's academic activities and performance. Children spend an equivalent amount of time playing with electronics and the extent of viewing from screens, which is worrisome.

Recent surveys show a drop in outdoor play and increased sedentary indoor activities across cultures. Tudge (2008) found that children spent 18 to 30% of their day in play and 10-14% watching television. Singer et al (2009) in a cross-national study of 2400 children of 1 to 12 years of age in 16 countries found that 72% of mothers reported that watching television was a common activity among children as compared to 58% playing outside. Only 27% of mothers reported that children engaged in imaginative play.

11.4.3 Use of Symbols and Communication

Symbols help people identify and appreciate their culture because of the common meanings of various symbols that are taught through the socialisation mechanism, the process by which individuals learn their society's values, norms, opinions and expectations. Symbols are important at the most basic level because they help people craft sense in their interactions with each other.

A symbol carries meaning to the people who share a culture because it is created and maintained by the members of the culture. The sense of all symbols is created and interpreted by people solely through mutual cultural understanding. Communication cannot occur until both parties consent to the same set of symbols. To be able to connect, communication is influenced by community. The culture's shared symbols are created and preserved by shared cultural traditions, norms & shared beliefs. Several symbols are visual. For instance, unique colours are associated with gender in some cultures, such as pink for girls and blue for boys. Traffic signs such as stop signs or signals are used on highways to indicate where to stop for gas, food & lodging are another example. Accents on letters in certain cultures inform individuals how words are pronounced. Gestures have symbolic value too. For example, a kiss on the cheek symbolises love and near relations of affection in American culture. A kiss on the cheek is understood as fundamental greetings in other cultures such as French culture & Mexican culture.

In the United States, a dozen roses are a symbol of romantic love. In Russia, even-numbered flowers are only for funerals and odd-numbered bouquets are for every occasion. Nodding the head yes and shaking the head no is common in western countries whereas in eastern European countries such Bulgaria, people shake their head yes and nod their head no.

India has a rich culture which has been around for over five millennia. During this time, many scholars had time to write scriptures, engage in artwork, and write philosophical treatises on the Indian subcontinent. Most of them are religious and most of the Philosophy in India originates from its vast ocean of religious texts. These texts in the Devanagari language are written in Sanskrit. Though being detailed in teaching faith and spirituality, these texts are rather one dimensional for the

common man's understanding. For example, the 'Swastika' (originates from the Sanskrit word 'Svasti', where 'sv' means well and 'asti' means is) meaning good fortune or good luck, is the religious symbol of the Hindus in Indian culture, where it is usually painted in red in households and is drawn on anything that is newly brought in the household. It also signifies the four heads of Brahma & four aspects of life that is, Dharma (natural order), Kama (desire), Artha (wealth) and Moksha (liberation). This auspicious symbol was later used as a symbol of death and destruction under the Nazi rule of Hitler in Europe.

The other famous symbol used in Indian culture is 'Om' or 'Aum'. The vibration that this word produces is said to be the universe's fundamental vibration and is all-permeating. The bottom most part signifies waking, the smaller curve attached to it signifies deep sleep. The curve between these two signify the dream state and the semicircular curve above them signifies illusion. Aum often said to represent God in three aspects of Brahman (A), Vishnu (U) and Shiva (M). Lotus, also called 'Padma', is a symbol of purity. It signifies the symbol of the energy centre of the body or the chakras as stated in yogic scripts. It is also known to be the symbol of beauty & fertility.

Language represents social status and situation as well as perceptions of society and the person's social network. Intercultural communicators may be classes as individualism vs collectivism, private messages vs public messages and hierarchical vs democratic (Myers- Scotton, 2006). Indians usually communicate in a respectful indirect way. They prevent confrontation by being too polite to those they do not know well. Direct refusals like 'no' are not advised and open conflicts are likely to be perceived as hostile or offensive. The cultural preoccupation with politeness and modesty can sometimes mean that some Indians automatically answer 'yes' to direct questions that require a yes or no.

Check Your Progress

5. What was the conclusion of Sara Harkness' research on cultural models and developmental agendas for early infancy?
6. What does language represent?
7. How is the symbol of flowers used in the United States and Russia?

11.5 ANSWERS TO CHECK YOUR PROGRESS QUESTIONS

1. According to Fiske & Taylor, 'attribution deals with how the social perceiver uses information to arrive at causal explanations for events. It examines what information is gathered and how it is combined to form a causal judgment'.

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2. The fundamental attribution error refers to an individuals' propensity to ascribe other people's actions to their own personality character, while attributing their behaviour to their environment.
3. Countries like Australia and USA are high on individualism whereas countries like India and Venezuela are low on individualism that is, they are collectivist.
4. The Robber's Cave experiment was part of a series of experiments performed in the 1940s and 1950s by social psychologist, Muzafer Sherif and his colleagues
5. Sara Harkness' research on cultural models and developmental agendas for early infancy concluded that American mothers were more likely to stress the importance of sustaining elevated levels of mental arousal and action than their counterparts in other countries.
6. Language represents social status and situation as well as perceptions of society and the person's social network.
7. In the United States, a dozen roses are a symbol of romantic love. In Russia, even-numbered flowers are only for funerals and odd-numbered bouquets are for every occasion.

11.6 SUMMARY

- In real life, attribution is something we do all the time, usually without understanding the underlying mechanism and prejudices that contribute to our decisions.
- Within a typical day we make multiple attributions about our actions and the behaviour of the people around us.
- According to Miller (1984), there has been a longstanding evidence for cultural differences in the biases of people's everyday explanation for behaviour.
- The fundamental attribution error relates to an individuals' propensity to ascribe other people's actions to their own personality character, while attributing their behaviour to their environment.
- The current body of research within cross-cultural psychology has posed key questions about the importance of autonomy, self-determination and freedom of choice in various cultures and how these factors affect the functioning of people within different cultural contexts.
- Realistic Conflict theory or Realistic Group Conflict Theory, a theory developed by Muzafer Sherif (1966) is used to describe the conflict, negative prejudice and discrimination that occur between groups of people who are in competition for the same resources.

- A popular psychology study that looked how conflict evolves between groups was the Robber's Cave experiment. It was part of a series of experiments performed in the 1940s and 1950s by social psychologist Muzafer Sherif and his colleagues.
- Acculturation is defined as the process of social, psychological and cultural change that results from blending between cultures.
- Enculturation is the process of 'becoming' a member of your own culture. The 'en' prefix means enclose and encircle.
- Parents also have a wide variety of opportunities when it comes to influencing their children's everyday lives. Making decisions relating to child care can be complicated and hard for parents.
- Since cultures around the world have varied parenting practises that influences the way in which parents raise their children. The various cultural scripts affect parents' values and behaviours as well as the aspirations of parents seeking to meet.
- In India, the family has always been a crucial social unit that governs the lives of all its members.
- The evolving essence of family & gender roles in Indian culture is demonstrated by examples of various family systems and roles.
- The family is fundamental to all levels of social contact, and the people are defined by the family members they are linked to and the chronology of their fathers and their forefathers.
- Both parents have certain ideas about the manner in which a child is to be raised, about what they believe must be an integral part of his or her life, about the aspirations and ideals they deem significant about childhood.
- Since cultures around the world have varied parenting practises that influences the way in which parents raise their children.
- The artefacts obtained at Harappa and Mohenjo-daro (around about 2500-1700 BC) from the Indus valley civilization provide evidence demonstrating that play has always been regarded as part of the child's natural behaviour repertoire and the society made specific provisions for children's play.
- The play in the Indian context, it is apparent that they have been used as a microcosm of an experimental theatre in which children learn adult laws and behavioural norms relevant to the natural context.
- Symbols help people identify and appreciate their culture because of the common meanings of various symbols that are taught through the socialisation mechanism, the process by which individuals learn their society's values, norms, opinions and expectations.
- Language represents social status and situation as well as perceptions of society and the person's social network.

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11.7 KEY WORDS

- **Collectivistic Culture:** Collectivist cultures emphasize the needs and goals of the group as a whole over the needs and desires of each individual. In such cultures, relationships with other members of the group and the interconnectedness between people play a central role in each person's identity.
- **Child Rearing:** It is a process of taking care and raising children.

11.8 SELF ASSESSMENT QUESTIONS AND EXERCISES

Short-Answer Questions

1. What is the difference between internal and external attribution?
2. Write a short note on Realistic Group Conflict Theory.
3. Briefly examine acculturation and enculturation in the context of socialization.
4. Give examples of how child-rearing differs across communities and nationalities.

Long-Answer Questions

1. Explain the features of individualistic and collectivistic cultures.
2. Discuss the Robber's Cave Experiment and its results.
3. Describe the activity of playing by children across different cultures.
4. Evaluate the use of symbols and communication across different cultures.

11.9 FURTHER READINGS

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UNIT 12 COGNITIVE AND CULTURAL FACTORS

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Structure

- 12.0 Introduction
- 12.1 Objectives
- 12.2 Notion of G and S
- 12.3 Genetic Epistemology
- 12.4 Cultural Factors in Memory and Information Processing
- 12.5 Ability Testing
- 12.6 Answers to Check Your Progress Questions
- 12.7 Summary
- 12.8 Key Words
- 12.9 Self Assessment Questions and Exercises
- 12.10 Further Readings

12.0 INTRODUCTION

Culture is a system of shared beliefs, rituals and norms. Cognitions are an integral part of culture in a way that our belief systems are a precursor to our behaviors. In most instances, our actions are a by-product of our mental processes. The principle of cultural relativity (or cultural relativism) states that individuals' actions make sense in his/her own culture and we cannot attribute causes to someone's behavior according to our own cultural norms while ignoring their cultural background. In simpler terms, it may be said that people from different cultures think differently. There is no dearth of literature on effects of culture on our cognitions, affect and behavior. In this unit, we will discuss Spearman's notion of g-factor and s-factor, the Piagetian concept of genetic epistemology; his stages of cognitive development, cultural factors that influence memory and information processing and lastly, ability testing in psychology.

12.1 OBJECTIVES

After going through this unit, you will be able to:

- Discuss the concept of g factor and s factor of intelligence
- Explain the concept of genetic epistemology
- Understand the Piagetian stages of cognitive development
- Examine the influence of cultural factors in memory and information processing
- Discuss ability testing

12.2 NOTION OF G AND S

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You have read about intelligence in previous units. Intelligence is the ability to solve problems, adapt to one's surroundings and learn from one's experiences. In Unit 5, you read about how cultural context shapes the concept of Intelligence. There are many theories of intelligence by various theorists who had been trying to establish what intelligence is and also how to measure it. Have you ever wondered how the concept of Intelligence evolved from a single factor to two-factor to multiple factors over decades?

It was a century ago that an English psychologist named Charles Spearman came up with the notion of a *g*-factor and an *s*-factor of intelligence. Spearman was one of the pioneers who attempted statistical analysis of intelligence. It was such a major feat that Guilford (1954, p. 472) stated: 'No single event in the history of mental testing has proved to be of such momentous importance as Spearman's proposal of his famous two-factor theory in 1904.' Spearman's theory specified that there are to some extent innate individual differences in the *g*-factor in individuals.

Spearman (1904, 1923 and 1927) gave the concept of general and specific factors of intelligence in his Two-Factor Theory of intelligence. He was influenced by Francis Galton's school of thought and employed a technique called factor analysis and propounded that intelligence consisted of a general factor called *g*-factor, and a specific factor called, an *s*-factor. He viewed intelligence as 'a general ability that involves mainly the education of relations and correlates' (1904, 1923). His theory was based on his observations of the correlations between various tests of intellectual and sensory abilities.

According to Spearman, intelligence consists of a pervasive single general factor called *g*, and many specific factors- *s*₁, *s*₂, *s*₃, *s*₄, and so on. He was analyzing the results of different tests taken by the same population when he found an interesting phenomenon. There was a positive correlation in their results. Using factor analysis, he found the dominant factor that explained most of the variance and he called it the *g* factor. In simpler terms, it could be said that Spearman observed that the high scorers in one test also scored high on other tests of cognitive ability and the individuals who scored less on one test scored low on other tests as well. That aspect of intelligence that is being measured by all empirically constructed intelligence tests is called '*g*'. It exists in all individuals, but to varying degrees. The Raven's Progressive Matrices is a culture fair test of intelligence and is considered as a measure of *g* factor (Penrose & Raven, 1936; Raven, 1938). Spearman used *g* factor as a generic term to represent various aspects of cognition such as attention, perception, memory, learning, language, thinking and the like (Jensen, 2008).

The *s* factor on the other hand represents specific abilities. Have you noticed how many individual differences you can observe among your family members,

friends and peers? In your class, some students are good at singing, some at dancing, some are proficient at English language, and some work on mathematical tasks like a computer. What makes people so good at one thing or a chosen field? Spearman noted that in addition to *g*, there are several specific abilities which allows some individuals to excel in certain areas. The *s* factor allows individuals to be excellent singers, athletes, mathematicians and writers. Thus, that aspect of intelligence that is not necessarily correlated to ‘*g*’ and may be a part of a particular intelligence test, but not of another is called ‘*s*’ factor. In simple words, this conceptualization of intelligence posits that there is a general component of intelligence that is comparable among all normally functioning individuals. Also, there is a specific component of intelligence that pertains to particular areas of expertise or capability. Various researchers have confirmed the existence of independent ‘*g*’ and ‘*s*’ like factors through their factor analytic studies (for example, Carroll, 1993).

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As mentioned above, early studies were done mostly to compare inter-cultural performances on intelligence tests. It was seen that tests which focused more on the assessment of ‘*g*’ factor were more likely to show significant group differences in intelligence scores, when compared cross culturally. This tendency of tests that are high on ‘*g*’ loading to predict significantly larger differences in cross-cultural comparisons is called the ‘Spearman’s Hypothesis’ (Jensen, 1985). Later studies, however, have shown that these differences are better explained when attributed to socio-economic status or poor environmental conditions, than to race or culture. It is also important to know that most researchers believe ‘*g*’ to be representative of an inborn or innate ability, unlike ‘*s*’ which is learned and developed.

Cultural differences in performances on intelligence test are usually attributed to factors such as genetic or biological inadequacies, deprivation in terms of economic conditions or health conditions, cultural disorganization, etc. According to Vernon (1969), some culturally dependent factors that can explain cross cultural variation in intelligence scores are perceptual experiences, level of stimulation, family climate, tolerance of non-conformity, schooling, cultural interests, etc.

Check Your Progress

1. Who was Charles Spearman influenced by?
2. What does the *g* factor represent?

12.3 GENETIC EPISTEMOLOGY

Piaget has been one of the most influential figures in developmental psychology. He pioneered the idea of constructivism- the belief that children actively construct their knowledge instead of being passive receivers. In 1955, he founded the

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International Centre of Genetic Epistemology at Geneva and became its director. Genetic epistemology studies the acquisition or genesis of knowledge in human being. Piaget began his inquiry into the development of knowledge in children through naturalistic observation. He formulated his theory of cognitive development. It is a multistage theory consisting of four stages and multiple knowledge acquisition processes.

In Piaget's theoretical framework, cognitive structures change through the processes of accommodation and assimilation and help us adapt to the world. He suggested following processes that children use to construct their knowledge of the world:

Schemes: Piagetian concept of schemes involves the actions or mental representations that organize knowledge. The behavioural schemes and mental schemes characterize infancy and childhood respectively. Schemes can range from as simple tasks as sucking and grasping in infants to driving a car in adults.

Assimilation and accommodation: In Piaget's theory of knowledge, assimilation and accommodation are the two processes that children use to adapt their schemes. Assimilation is the process of incorporation of new information into already existing schemes. Accommodation takes place when children adjust their schemes to fit new information and experiences.

Equilibration: Piaget proposed a mechanism to explain how children shift from one thought process to the next when they experience cognitive conflict or disequilibrium. This mechanism, called equilibration, results in the resolution of the conflict and an equilibrium of thought is reached. The process refines and transforms the mental structures as learners abhor disequilibrium.

Stages of Development

Piaget theorized that individuals go through four stages of development. Cognition is qualitatively different in one stage as compared to another. In simpler words, we can say that the way children reason at one stage is different from the way they reason at another stage. Each of these stages are age related and consists of distinct ways of thinking. The four stages are as follows:

1) Sensorimotor stage

This stage lasts from birth to about two years of age. During this stage, as the name suggests, the infants construct an understanding of the world through their sensory experiences and motoric actions such as hearing, sucking, grasping, etc. At the beginning of this stage, the newborns exhibit only instinctual and reflexive actions. By the end of the stage, the two year olds have developed object permanence and symbolic thought.

Object permanence: Before infants develop object permanence, 'out of sight' is really 'out of mind' for them. Piaget considered object permanence as one of infancy's landmark achievements. By the time the sensorimotor stage culminates,

the infants acquire object permanence. It is an understanding that objects continue to exist even when they cannot be seen, heard or touched.

2) Preoperational stage

This is the second developmental stage in Piaget's theory which lasts from about two to seven years of age. During this period, children begin to represent the world using words and images. Symbolic thought advances, mental reasoning appears and egocentrism emerges.

Egocentrism: It is a feature of preoperational thought and can be defined as an inability to distinguish between one's own and someone else's perspective.

Centration and conservation: One feature of preoperational stage is centration i.e. the tendency to focus on one characteristic or aspect to the exclusion of all others. This is most evident in children's lack of conservation i.e. the awareness that an amount stays the same regardless of how its container changes. A certain amount of liquid stays the same if you pour it into a taller glass. Children during this stage fail to realise that.

3) Concrete operational stage

This is the third stage and lasts from approximately seven to eleven years of age. The children begin to perform concrete operations, hence its name. Concrete operations are the operations involving concrete objects. Abstract thinking is absent but conservation emerges. Their thinking becomes more logical than before.

4) Formal operational stage

This is the last stage in Piaget's theory of cognitive development and lasts approximately from eleven to fifteen years of age. Individuals move beyond concrete operational thought and begin exhibiting abstract thinking. Adolescents, in problem solving, use systematic and logical thinking.

Hypothetical-deductive reasoning: It is a formal operational concept which means that adolescents have the cognitive ability to formulate hypotheses and devise systematic plans to solve problems. They begin to deduce the plan which would work best for solving a particular problem.

According to Piaget, there are four types of factors that can influence this cognitive development. They are biological factors, interaction of biological development with the physical environment, social factors and cultural factors, related to customs, education, etc.

Cross-cultural studies have shown that while the sequence of stages seems to be the same across cultures, the rate at which a child progresses through the stages can be significantly influenced by the cultural milieu. Cross-cultural researchers have focused mainly on the third and fourth stages, i.e., the concrete operational stage and the formal operational stage (Dasen and Heron, 1981). Some studies have reported the existence of additional stages as well (Saxe, 1982).

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Few researchers have also reported the absence of the concrete operational stage in some cultures but Dasen (1982) contradicted their findings by showing that with some training, the concrete operational stage does in fact manifest in those children. Similar results have been seen in relation to formal operational tasks as well; very basic training resulted in a decrease in the cross-cultural differences. A review of cross-cultural studies done in this area also reveals the importance of constructing culture relevant tasks, in the absence of which faulty interpretations are likely.

Check Your Progress

3. What is constructivism?
4. Who founded the International Centre of Genetic Epistemology?
5. What do you mean by conservation?

12.4 CULTURAL FACTORS IN MEMORY AND INFORMATION PROCESSING

Researchers like Sternberg (1969) have strongly held the view that most cognitive functioning can be broken down into fundamental and simplified information processing components. Information processing is a central concept in understanding human cognition. Performance on any cognitive task can thus be analysed by breaking it down into steps or phases that occur in a more or less sequential manner. The more complicated a task, the more number of phases it shall entail.

The information processing approach entails four basic assumptions:

1. Information received from the environment is processed through sequential, distinct process such as attention, perception, memory and so on.
2. Through these stages, information is processed and encoded in a systematic manner.
3. Cognitive psychologists aim to identify and study the functioning of these processes.
4. In human beings, information is thus processed in a manner that is similar to how information is processed in computers.

It has been seen that for simple tasks there exists little or no difference among cultural groups. Cross-cultural influences start to appear when tasks get more complicated. This phenomenon is evidence for the information processing view of cognitive functioning. These findings have been obtained largely from Reaction Time related tasks. In fact, speed seems to be an important factor, when

conducting cognitive ability studies. An interesting study was conducted with children from Scotland and Zambia by Serpell (1971). Children were asked to sort out pictures and models of animals and cars. Interestingly, results revealed no significant differences in the sorting of models, but children belonging to Zambia were significantly slower as compared to their Scottish counterparts while sorting pictures. It is important to note that the picture sorting was made more complex by adding an extra phase or step in information processing. Sorting was to be done not just in terms of cars and models but on the basis of coloured and non-coloured pictures as well.

Stimulus familiarity is yet another influencing factor that makes it difficult to attribute cross cultural differences to culture alone. Even with less complex tasks, subjects who are familiar with the stimulus will perform better. While their culture maybe responsible for that familiarity, the interpretation that higher scores implies higher cognitive ability would be incorrect. For example, if a sorting-based task similar to the one mentioned above is conducted with Indian and American children and the models and pictures used are of American monuments, it is safe to assume that the American sample would perform better.

Memory is the retention of information over time. Without memory one would not be able to connect the events in one's life. So one would not be able to link what happened yesterday with what is happening today. Human beings exhibit remarkable memorizing capacity. It sets us apart from many other species. Understanding how culture affects memory and information can help devise teaching plans in multi-cultural classrooms and will promote a more inclusive education system.

The information processing model has been widely popular in research related to memory as well. Decades of research have revealed three distinct processes that are involved in memory:

1. Encoding- It refers to receiving of sensory input and converting it into a code.
2. Storage- It refers to the organisation and embedding of information into memory.
3. Retrieval- It refers to accessing stored information, when required, using appropriate cues.

Strategies used at the encoding stage are crucial for determining which information is remembered better and recalled easily. Culture-specificity in the encoding process has been supported by many researches. In one study, where American and Japanese subjects were shown an underwater scene and were later asked to recall what they saw, it was seen that Americans remembered the types of fish in the scene while the Japanese recalled contextual details (Masuda and Nisbett, 2001). These findings confirm the belief that the focus is on the individual in individualistic cultures and the focus is on the social context in collectivistic cultures.

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Next, we shall discuss the storage process. Well known models of memory such as the Atkinson Shiffrin model support the multi storage conceptualisation of human memory. In information processing models of memory, most commonly, it is seen to be comprising of two distinct levels of storage:

1. Short term store- Here, information stays for a short amount of time and its capacity is limited.
2. Long term store- Here, information stays for a long amount of time and its capacity is unlimited.

Cross-cultural studies for memory have not shown significant differences at the storage stage. Cultural influences do not seem to cause variance in the way short term memory or long-term memory works.

The final stage in memory, i.e., retrieval, or accessing information that has been stored, is also vastly studied by analysing the strategies that are often used such as clustering, rehearsal, etc. Strategies used for retrieval, cues used to be able to remember information, etc. have been seen to be influenced by cultural factors (Wagner, 1993).

The research does not cease here. With the advancement of cultural neuroscience, there have been attempts to investigate the relationship between culture and brain. There have also been a few studies that tried to explore the effects of culture on neural processes underlying memory (Goh et al., 2007; Gutchess et al., 2006a; Hedden et al., 2008). How does culture affect our brain? The answer may lie in neural plasticity i.e. brain's ability to undergo structural changes in response to experience.

The processing of semantic information is greatly influenced by culture-specific learning practices and experiences i.e. the information that becomes semantic memory varies across cultures (Yoon et al., 2004). How people classify information depends upon culture. For example, Americans prefer classifying things in categories while East Asians prefer classifying things based on similarities and relationships among these (Gutchess et al., 2006b; Unsworth et al., 2005; Ji et al., 2004).

12.5 ABILITY TESTING

Ability testing began in 1884 when Galton constructed a tool to measure intelligence through various kinds of sensory and motor tasks. At about the same time, Binet also developed measure to assess higher mental process such as imagery, comprehension, etc. Thus, began the long, complicated but immensely fruitful journey of ability testing in psychology. Ability testing focuses on quantifying the abilities of an individual. It is not to be confused with achievement or success. It is more of a measure of potential. Most ability tests measure either intelligence or aptitude. While intelligence is a general measure of one's intellectual capabilities, aptitude refers to one's ability to perform a specific skill in a particular situation.

According to researchers like Greenfield (1997), an ability test is heavily influenced by the customs and beliefs prevalent in the culture of the developer of the test. Furthermore, the culture of the subjects, based on whose performance the test has been standardised also influences significantly. Thus, application of the test in a different culture cannot be free from bias. The main drawback of cross-cultural research on cognitive ability has been the blatant ignorance of this very aspect. More and more researchers have, however, become mindful of this pitfall.

According to Poortinga and Van der Flier (1988), a researcher must address three issues when using any ability test across cultures:

1. Does the ability being tested bear equivalent connotations in both cultures? For example, it would be unfair to compare scores on a scientific knowledge-based test while comparing medical and arts students.
2. Is the ability being tested equally important in the organization of behaviour in both the samples? Continuing with the previous example, if the aim of the study is to assess the correlation between test scores and academic performance, the role of the scientific test will be much more significant for medical students as compared to the arts students.
3. Can the same score be interpreted as equivalent for both samples? For example, an average score on the science-based test would actually be a good achievement for an arts student, but not so for a medical student. Thus, norms established in a particular culture must be used with caution in another culture.

Therefore, transferability of an ability test, i.e., whether a test constructed and standardised in one culture can be equivalently used in another culture is a crucial responsibility that belongs to the researcher.

There are two common practices that are adopted by researchers to avoid transferability related biases:

1. Adaptation of the existing test as per the cultural conventions. A popular example of this kind of adaption is the Malin's Intelligence Scale for Indian Children (MISIC) which is an adaptation of the widely popular Wechsler Intelligence Scale for Children (WISC).
2. Construction of a new test that would be appropriate for the culture in which the test is to be administered.

The first method is more viable and is more frequently used by psychologists.

A review of the literature that is available in the field of intelligence and ability testing clearly shows that there is no dearth of data, due to the zealously followed psychometric tradition in this field, but strong theoretical foundations and explanation are lacking. Cross cultural researchers are now aware of the fact that the cultural context cannot be ignored when conducting cognition related studies. The effect of culture is not limited to the variables of emotion, motivation, etc. Cross-cultural research has travelled a long way from a cluster of studies trying to

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label one culture as more or less cognitively capable than another to a plethora of research on how cultural influences can cause variations in cognitive experiences.

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Check Your Progress

6. What is encoding?
7. What does ability testing focus on?

12.6 ANSWERS TO CHECK YOUR PROGRESS QUESTIONS

1. Charles Spearman was influenced by Francis Galton's school of thought.
2. Spearman used g factor as a generic term to represent various aspects of cognition such as attention, perception, memory, learning, language, thinking and the like.
3. Constructivism is the belief that children actively construct their knowledge instead of being passive receivers.
4. Piaget founded the International Centre of Genetic Epistemology at Geneva in 1955.
5. Conservation in Piaget's theory is the logical thinking ability to understand that a certain quantity will remain the same despite the change of the container's shape or size.
6. Encoding refers to receiving of sensory input and converting it into a code.
7. Ability testing focuses on quantifying the abilities of an individual. It is not to be confused with achievement or success. It is more of a measure of potential.

12.7 SUMMARY

- Charles Spearman came up with the notion of a g-factor and an s-factor of intelligence. According to him, intelligence consists of a pervasive single general factor called g, and many specific factors- s1, s2, s3, s4, and so on. He viewed intelligence as 'a general ability that involves mainly the education of relations and correlates' (1904, 1923).
- Genetic epistemology studies the acquisition or genesis of knowledge in human being. Piaget began his inquiry into the development of knowledge in children through naturalistic observation. He formulated his theory of cognitive development. It is a multistage theory consisting of 4 stages and multiple knowledge acquisition processes.

- Sensorimotor stage lasts from birth to about two years of age. During this stage, as the name suggests, the infants construct an understanding of the world through their sensory experiences and motoric actions. Preoperational stage lasts from about two to seven years of age. During this period, children begin to represent the world using words and images. Concrete operational stage lasts from approximately seven to eleven years of age. The children begin to perform concrete operations during this period. Formal operational stage lasts approximately from eleven to fifteen years of age. Individuals move beyond concrete operational thought and begin exhibiting abstract thinking.
- Researchers have established cultural differences in cognitive processes among Easterners and Westerners. In such studies, the Easterners have been found to focus more on the group relevant information, similarities and contextual details while the Westerners have been found to focus more on the self-relevant information and information about individual items with no regard to their contexts. The processing of semantic information is greatly influenced by culture-specific learning practices and experiences.
- Ability testing is testing of mental ability or intelligence using standardized instruments. Some widely used tests of intelligence are Raven's Standard Progressive Matrices, Wechsler Adult Intelligence Scale, Bhatia's Battery of Performance Test of Intelligence, and Cattell's Culture Fair Intelligence Test.

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12.8 KEY WORDS

- **Developmental psychology:** It is the scientific study of how and why human beings change over the course of their life.
- **Genetic epistemology:** It is the study of the acquisition or genesis of knowledge.
- **Memory:** It is ability to recall information successfully.

12.9 SELF ASSESSMENT QUESTIONS AND EXERCISES

Short-Answer Questions

1. What is cultural relativity?
2. What do you mean by assimilation?
3. Write a short note on Preoperational stage.
4. Write a short note on ability testing.

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Long-Answer Questions

1. Discuss in detail Spearman's notions of g and s.
2. Explain the concept of genetic epistemology.
3. Examine the impact of culture on memory and information processing.

12.10 FURTHER READINGS

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UNIT 13 INTELLECTUAL PROCESSES

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Structure

- 13.0 Introduction
- 13.1 Objectives
- 13.2 Emotional Intelligence
 - 13.2.1 Regulation of Emotions
 - 13.2.2 Recognition of Emotions
 - 13.2.3 Componential Approach
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13.0 INTRODUCTION

Since times immemorial, emotion and cognition have been viewed as polar opposites. However, as we have gained more understanding of human behaviour, we have begun to realize that emotion and cognition are, in fact, complementary processes. Earlier viewed as an obstacle to human productivity, emotions are now seen to be a complex influencing variable in all kinds of human behaviour. The past few decades have seen a marked increase in psychological researches using emotion as an important factor, so much so that concepts such as emotional intelligence, emotional regulation, etc. have now become commonly used terms in the intellectual arena. Metacognition, too, is a relatively recent construct in the history of psychological research. Recent, but equally complex, if not more. In this unit, we will discuss emotional intelligence and metacognition from a cross-cultural perspective. We will also focus on theories of mind and metacognition.

13.1 OBJECTIVES

After going through this unit, you will be able to:

- Discuss the concept of emotional intelligence in the cross-cultural context
- Understand the relevance of cross-cultural research in metacognition
- Examine the different theories of the mind

13.2 EMOTIONAL INTELLIGENCE

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We all have a basic understanding of what emotions are since we experience them all day, every day, however, a consensus in its theoretical understanding has still not been achieved. Irrespective of which languages one speaks in, we are all aware of a plethora of words that describe, define, classify or identify emotions, such as happy, sad, delighted, angry, glad, frustrated, etc. These words go beyond merely identifying an emotion, but they also define the extent and complexities that an individual may be feeling. While there may be seemingly infinite number of terms for various types of emotions, it is first crucial to define what the term ‘emotion’ itself means. The term ‘emotion’ refers to the mental and physical processes that include subjective experience, motivation, evaluation and physiological response. According to Scherer (2000), emotion can refer to a relatively brief episode of synchronized responses including bodily responses, facial expression and subjective evaluation, that indicate the appraisal of an internal or external event as significant.

Before getting into a discussion of the role of cultural influences in the expression of emotions, it is important to become familiar with the concept of ‘basic emotions’. In other words, one must be aware of those emotions that are seen to be experienced universally among individuals of all cultures. One of the earliest proponents of the existence of certain universal emotions was Charles Darwin. Darwin based his belief on the observation reported by his colleagues that irrespective of culture, there are certain emotional facial expressions that are same in all of the individuals, which is indicative of identical emotional experience as well. Over the years, various researchers have identified six basic emotions that are observed universally across cultures in terms of facial movements, expression, etc. These are anger, disgust, surprise, fear, sadness and happiness. When trying to view emotion through a cross cultural perspective, one needs to cater to two aspects:

- To what extent are emotional states similar across cultures, in other words, to what extent are emotional expressions innate in human beings (as discussed above regarding basic emotions).
- To what extent are emotional states socially learnt, these social constructions shall be responsible for variations in emotional expression across cultures.

Emotional intelligence can be defined as ‘the ability to identify, process and manage emotions, in both oneself and others’ (Mayer et.al., 1997 and Goleman, 2001). The concept of emotional intelligence was first conceived in the 1990s. Since then, it has garnered great interest due to its influence on almost all aspects of human existence. Ample research has been conducted on the relationship between emotional intelligence and health, physical and psychological. Research shows

that individuals who are emotionally intelligent conduct their lives in a less stressful manner, utilise their social network as a buffer against negativity, can regulate their emotions better, can bounce back from negative life events more productively, view difficult situations as challenges instead of threats, avoid excessive rumination, cope better and thus live a more positive life characterised by a high level of well-being. Some researchers argue that while emotions are biologically driven and are more innately directed, it is the regulation and perception of the emotion that is determined by cultural influences (Matsumoto, 1989).

13.2.1 Regulation of Emotions

To what extent, in what manner an individual chooses to express an emotion and even if he chooses to express it or not is called emotional regulation. Emotional regulation is a crucial part of emotional intelligence. In fact, it has been seen that those who are effective regulators of emotion are perceived to be highly emotionally intelligent by others. To understand this concept, let's consider three scenarios.

- **Scenario 1:** Mr. A finds out that his child has falsified his report card.
- **Scenario 2:** Mr. A finds out that his employee has not sent an important email that was to be sent urgently.
- **Scenario 3:** Mr. A finds out that his boss has promoted his own son, over Mr. A though Mr. A is more deserving.

In all three scenarios, Mr. A is most likely to feel angry and frustrated, even disappointed. But Mr. A will not express his emotion of anger in the same manner or to the same extent in all three scenarios. In fact, in the third scenario, he may choose to not express his anger at all. This kind of emotional regulation is seen to be significantly influenced by cultural factors. High cultural specificity in this area of emotional intelligence is attributed to notions of 'correctness' that are promoted in one's social milieu. Going back to the above-mentioned scenarios, the likelihood of expressing anger in scenario three would be much higher if Mr. A belongs to an individualistic culture, where independence and personal achievement are valued above all else, as compared to a collectivistic culture where relatedness and submissiveness to authority are valued highly.

13.2.2 Recognition of Emotions

While most of the discussion till now has focused on expression of emotions, recognition or judgement of emotions being displayed by others is also an important component of emotional intelligence. Cultural differences have been observed in this regard as well. Some researchers suggest that people in individualistic cultures are focused inwards because of which they are more likely to project what they are feeling upon the other person. On the other hand, people in collectivistic cultures are focused outward and are more likely to understand the influence of their own emotions upon the other person (Cohen and Gunz, 2002).

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13.2.3 Componential Approach

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While most approaches that you may have come across talk of how emotions are expressed, for the purpose of cross-cultural studies a componential approach seems to be of more value. This approach gained momentum in the 1990s and views emotions as including multiple components and not as singular entities. Such an approach helps better understand the fact that in cross-cultural comparisons, emotions can be similar in some respect but different in others. In short, the componential approach views emotions as a process, much like how we study cognitive processes like memory, etc. Popular proponents of this approach such as Levenson (1992), Mesquita and Frijda (1992), etc. suggest the following components:

- **Antecedent event:** This refers to the situation or condition that elicits a particular emotion.
- **Appraisal:** This refers to the individual's evaluation of the eliciting event.
- **Subjective feelings:** This refers to the feelings aroused as a direct result of the appraisal.
- **Physiological reaction pattern:** This refers to the bodily responses that follow the arousal of feelings.
- **Action readiness:** This refers to the individuals' impulsive reaction in terms of action or behaviour.
- **Behavioural expression:** This refers to the overt display of the individual's reaction.
- **Regulation:** This refers to an individual's control over his overt expression of emotion.

To understand how these components manifest themselves, let's take up an example: A student is being scolded by his teacher for not doing his homework (antecedent event). The student realises that this is detrimental to his future as the teacher will now view him as a non-serious student (appraisal). This makes him feel worried or tense (subjective feeling), followed by perspiration, increased respiratory rate, etc. (physiological reaction pattern). He wants to show remorse to the teacher by apologising (action readiness). He starts to cry and touches his ears in an apologetic manner (behavioural expression). He controls his tears as he is in a class full of students who are looking at him (regulation).

As you can see, using the componential approach, a researcher can thoroughly analyse the emotional event, thus understanding how an emotional response is similar or different to another. This will yield much more information than merely labelling emotions as angry, sad, etc. and then trying to conduct comparisons. One must, however, keep in mind that similar to cognitive processes, the emotional process may not always depict the components as clearly demarcated of distinguished from one another. There can be overlaps between them or two or more components may be strongly related to each other. Such breakdowns of

any process, be it cognitive or emotional, must be viewed as a metaphorical depicted and should be used as such.

13.2.4 Issues in Cross-Cultural EI Research

To establish the culture specificity or culture generality of any variable is not an easy task. But emotional intelligence research is further complicated due to the complex nature of the variable itself. To abandon one approach for the other, i.e., to focus on absolute specificity or generality has been the biggest folly of early researchers, often leading to inconclusive findings. An integrative approach that recognises the generality of basic emotions, but specificity of certain components of the emotional process is the need of the hour, especially while studying emotional intelligence.

Another major hurdle in conducting effective cross-cultural emotional intelligence research stems from the tools that are used. Tools created in the context of a particular cultural context may not be equivalent in a different cultural context. Different cultures may have different connotations of the term emotional intelligence. A particular emotional reaction may be considered to be a display of emotional intelligence in one culture, but not in another. Secondly, the items included in the tool may be appropriate for one culture, but not for another. Furthermore, many times translation from one language to another can also weaken the original intention of the item. There are two ways to help reduce (if not eliminate) these biases. One, to establish statistical equivalence of tools before using them across cultures. Two, development of separate tools that are specific to the culture they will be used in.

The only consensus we can thus reach is that there is no absolute when it comes to cultural comparisons of emotional intelligence. It must be reiterated here that the possibility of integrating the biological as well as cultural influences should be considered by a psychologist interested in studying emotional intelligence, if one wishes to have a realistic and holistic understanding of cross-cultural experiences of emotions.

Check Your Progress

1. Define the term 'emotion'.
2. What are the basic emotions identified by researchers?
3. When was the concept of emotional intelligence first conceived?

13.3 METACOGNITION

Metacognition is a construct that has gained immense interest in recent years, especially in the field of education and learning. According to Nelson and Narens (1994), metacognition refers to the monitoring and control of one's thought processes. To define metacognition in the shortest and simplest way would be to

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say that it is thinking about one's own thinking. Given by Flavell in 1979, metacognition comprises of two elements:

- **Knowledge of cognition:** It further consists of:
 - o **Declarative knowledge:** An understanding of one's own abilities.
 - o **Procedural knowledge:** An understanding of the task at hand, such as its difficulty level, skills needed, etc.
 - o **Strategy knowledge:** An understanding of the strategies that can be used, the ability to learn and appropriately use these strategies
- **Regulation of cognition:** The process by which an individual monitors and assesses his own knowledge skills and capabilities.

According to Davidson and Freebody (1988), metacognition can be defined as 'knowledge about, and awareness of, one's own capabilities and cognitive plans regarding any task'.

An important question that arises in metacognition research, especially in the cross-cultural context, is that how do metacognitive skills develop. Schraw (1989) suggested that metacognitive skill develops through three levels:

- **Autonomous learning:** It refers to self-learning.
- **Peer regulated learning:** It refers to learning from experiences with those belonging to your own age group.
- **Direct learning:** It refers to learning from someone through instruction, for example, from a teacher.

It is safe to assume that most of an individual's peer regulated learning and direct learning happens at school. This by no means implies that influences out of school are not crucial. Studies have shown differences in metacognitive skills to be related to ethnic and socio-economic differences as well.

13.3.1 Cultural Metacognition

An interesting term that has come up in this context is 'cultural metacognition' (Thomas et al., 2008). According to Ang et.al. (2007), cultural metacognition refers to 'self-reports of whether people are aware of, check and update their assumptions in intercultural interactions'. In other words, to what extent does an individual question his knowledge of another culture, recognises gaps in this knowledge and makes an effort to correct them, when he interacts with someone belonging to that culture. Studying this aspect of metacognition skills has become extremely crucial in today's world, where globalisation, immigration, etc. have made the world smaller, at least socially. We no longer live in the boundaries of our own culture, with little or no interaction with other cultures. Hence, it becomes imperative to study our cognitive efficacy in this aspect too.

In fact, Ng et al., (2009) have theorised that having high cultural metacognition is indicative of a heightened ability to learn from daily social interactions, even in a new cultural setting. It has also been seen that a predisposition towards cultural metacognition can lead to better adjustment among exchange students who have come to a new country for their education (Klafehn et al., 2013 and Shu et al., 2017). Another similar study with Japanese employees, however, showed no significant correlation between cultural metacognition and adjustment. Many psychologists have provided evidence supporting the relationship between metacognition and intercultural trust, intercultural teamwork, shared team values, etc. A series of studies conducted by Morris and Savani (2019) in this regard have shown that cultural metacognition is linked with the speed by which an individual would learn intercultural norms.

The implications of these studies are immense. For example, when hiring an employee belonging to a different culture, testing him on cultural metacognition would be an added asset when assessing whether or not he would be a good fit for the organisation. Additionally, workshops that focus on intercultural adjustments, whether it is for students or employees, must include the component of cultural metacognition as well for more holistic learning.

13.3.2 Metacognitive Self

Metacognitive self refers to one's ability to recognise one's own biases. We are well aware of the role played by biases and cross-cultural interactions. Thus, studies of metacognitive self in the cross-cultural context are likely to yield insightful findings. Though the notion of metacognitive self seems to be overlapping with the much older concept of self-perception, it actually has a much broader scope. Metacognitive self doesn't only include knowledge about oneself but it delves into the accuracy of the processes that are involved in the development of one's personal standards, behaviours and even cognitive processes. While studying the construct of metacognitive self in the cross-cultural context Brycz et al. (2015) found that individuals belonging to collectivistic cultures score higher on metacognitive self as compared to those belonging to individualistic cultures. They explain these findings using the following points:

- Individualistic societies promote stable traits, thus inculcating biased self-enhancement among the people. On the other hand, collectivistic societies are more situational in their mindset and promote self-criticism. Metacognitive self or recognising one's biases does in fact require a critical eye, without which an individual is in constant denial of any biases.
- Individuals belonging to individualistic cultures are more prone to committing Fundamental Attribution Error. This error refers to an individual's belief that others' behaviour is a result of their own traits but one's own behaviour is a result of environmental or situational factors. The error could be a major reason for low metacognitive self among individualistic subjects.

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13.4 THEORIES OF MIND AND METACOGNITION

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An individual's ability to assign mental states onto himself and onto others has given rise to an interesting area in psychological research, often referred to as 'theories of mind'. We read about Flavell above (he coined the term metacognition) and in fact he was among the earliest psychologists to show interest in this direction. A researcher employs or makes use of theories of mind when studying an individual's understanding of others' behaviour and also how a person may or may not project his own mental state onto another. In very simple words, when we attribute a motive, desire, emotion, belief or knowledge to another person's actions, that is theory of mind. For example, if your mother is scolding you and you attribute it to a mistake made by you, or to her own bad mood or to any reason whatsoever, this is what is called theory of mind.

In a cross-cultural perspective, theories of mind have been vastly studied from a developmental perspective. Lillard (1998) reported that the fundamental functioning of theories of mind among infants are universal or culture-general. However, moving beyond infant years, researchers have found mixed results, indicating some extent of cultural specificity. Wahi and Johri (1994) conducted a study with two groups of Indian children. One group belonged to a higher socio-economic stratum, while the second group of children belonged to impoverished homes. Both groups were tested on mental-real distinctions, i.e., if an actual and an imagined object would be visible. Results reported were two-fold:

- Though, by age seven most subjects could recognise the difference, the rate of learning was not as fast as had been earlier seen in a Western sample.
- Significant differences were noticed among the two Indian groups also, at the age of five and six.

Many other studies have replicated similar results. This shows that cultural differences do exist, even if only in the speed of development. While research in this area has been limited, cultural differences in theories of mind of adults have also been reported. According to Lillard (1998), there exist four forms of dissimilarities in adult mental processing:

- Variation in fascination towards magic.
- Variation in understanding of the links between body and mind, thoughts and feelings, etc.
- Variation in disallowing negative emotions.
- Variation in understanding the distinction between science and spirituality.

An important issue that remains in metacognition related research is the fact that theorists claim metacognitive processes to be functioning outside of one's own awareness. Yet the tools used to assess metacognition are in the self-report

format. Thus, a good level of introspection is required for the test scores to be truly representative of one's metacognitive skills. However, self-report measures have been seen to be successful with other equally complex variables such as emotional intelligence, cultural intelligence, etc. Therefore, self-report measures of metacognition need not be discredited so hastily.

Check Your Progress

4. What do you mean by metacognition according to Nelson and Narens?
5. What was the two-fold result of Wahi and Johri's study?

NOTES

13.5 ANSWERS TO CHECK YOUR PROGRESS QUESTIONS

1. The term 'emotion' refers to the mental and physical processes that include subjective experience, motivation, evaluation and physiological response.
2. Over the years, various researchers have identified six basic emotions that are observed universally across cultures in terms of facial movements, expression, etc. These are anger, disgust, surprise, fear, sadness and happiness.
3. The concept of emotional intelligence was first conceived in the 1990s.
4. According to Nelson and Narens (1994), metacognition refers to the monitoring and control of one's thought processes.
5. Wahi and Johri (1994) conducted a study with two groups of Indian children. One group belonged to a higher socio-economic stratum, while the second group of children belonged to impoverished homes. Both groups were tested on mental-real distinctions, i.e., if an actual and an imagined object would be visible. Results reported were two-fold:
 - (a) Though, by age seven most subjects could recognise the difference, the rate of learning was not as fast as had been earlier seen in a Western sample.
 - (b) Significant differences were noticed among the two Indian groups also, at the age of five and six.

13.6 SUMMARY

- Since times immemorial, emotion and cognition have been viewed as polar opposites. However, as we have gained more understanding of human behaviour, we have begun to realize that emotion and cognition are, in fact, complementary processes.

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- We all have a basic understanding of what emotions are, since we experience them all day, every day, however, a consensus in its theoretical understanding has still not been achieved.
- One of the earliest proponents of the existence of certain universal emotions was Charles Darwin.
- Emotional intelligence can be defined as ‘the ability to identify, process and manage emotions, in both oneself and others’.
- Research shows that individuals who are emotionally intelligent conduct their lives in a less stressful manner, utilise their social network as a buffer against negativity, can regulate their emotions better, etc.
- To what extent, in what manner an individual chooses to express an emotion and even if he chooses to express it or not is called Emotional Regulation. Emotional regulation is a crucial part of emotional intelligence.
- While most of the discussion till now has focused on expression of emotions, recognition or judgement of emotions being displayed by others is also an important component of emotional intelligence.
- Componential approach helps better understand the fact that in cross-cultural comparisons, emotions can be similar in some respect but different in others.
- Using the componential approach, a researcher can thoroughly analyse the emotional event, thus understanding how an emotional response is similar or different to another.
- To establish the culture specificity or culture generality of any variable is not an easy task. But emotional intelligence research is further complicated due to the complex nature of the variable itself.
- Metacognition is a construct that has gained immense interest in recent years, especially in the field of education and learning.
- According to Ang et.al. (2007), cultural metacognition refers to ‘self-reports of whether people are aware of, check and update their assumptions in intercultural interactions’.
- Ng et al., (2009) have theorised that having high cultural metacognition is indicative of a heightened ability to learn from daily social interactions, even in a new cultural setting.
- Metacognitive self refers to one’s ability to recognise one’s own biases. We are well aware of the role played by biases and cross cultural interactions. Thus, studies of metacognitive self in the cross-cultural context are likely to yield insightful findings.
- An individual’s ability to assign mental states onto himself and onto others has given rise to an interesting area in psychological research, often referred to as ‘theories of mind’.

13.7 KEY WORDS

- **Charles Darwin:** Charles Robert Darwin was an English naturalist, geologist and biologist, best known for his contributions to the science of evolution.
- **Individualistic Culture:** It is a society which is characterized by individualism, which is the prioritization or emphasis of the individual over the entire group. Individualistic cultures are oriented around the self, being independent instead of identifying with a group mentality.

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13.8 SELF ASSESSMENT QUESTIONS AND EXERCISES

Short-Answer Questions

1. Write a short note on regulation and recognition of emotions.
2. What are the issues in the research of Cross-Cultural EI?
3. What is the significance of metacognitive self?

Long-Answer Questions

1. Explain the concept of emotional intelligence.
2. Discuss the componential approach towards cross-cultural studies.
3. What is 'theory of mind'? Elaborate on its importance in cross-cultural metacognition research.

13.9 FURTHER READINGS

Berry, J. W.; Y. H. Poortinga; M. H. Segall; and P. R. Dasen. 2002. *Cross-Cultural Psychology: Research and Applications*. New York: Cambridge University Press.

Keith, K. D. 2011. *Cross-Cultural Psychology: Contemporary Themes and Perspectives*. West Sussex: Blackwell Publishing

Matsumoto, D and L. Juang. 2004. *Culture and Psychology*, Third edition. United States: Thomson Wadsworth.

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UNIT 14 SUGGESTIVE ASSIGNMENT

NOTES

Structure

- 14.0 Introduction
- 14.1 Objectives
- 14.2 Report on Cultural Influences on Parenting in Personal Local Setting
 - 14.2.1 Identification of Cultural Ideals
- 14.3 Answers to Check Your Progress Questions
- 14.4 Summary
- 14.5 Key Words
- 14.6 Self Assessment Questions and Exercises
- 14.7 Further Readings

14.0 INTRODUCTION

The previous units have described in detail what is culture and how cultural influences shape various aspects of human behaviour, thinking, attitudes, etc. You now understand that culture is essentially a system of values, beliefs, ideals and norms that manifest in the lives of those belonging to that culture. Cultural norms regarding parenting practices typically affect how children are brought up. These norms influence what beliefs and values parents teach their children, what behaviours are considered acceptable, and the strategies used to teach these values and behaviours. In this unit, we will discuss the cultural influences on parenting in personal local setting. We will also try to identify cultural ideals.

14.1 OBJECTIVES

After going through this unit, you will be able to:

- Explain the cultural influences on parenting in personal local setting
- Identify the cultural ideals in parenting

14.2 REPORT ON CULTURAL INFLUENCES ON PARENTING IN PERSONAL LOCAL SETTING

It is fair to say that the most common and probably most effective mode of transfer of cultural values is an individual's family, specifically one's parents. While the nature of values transmitted from parent to child is largely dependent on culture, the way in which parents bring up their children is also significantly influenced by cultural factors.

According to Baumrind (1991), parenting style is used to capture normal variations in parents' attempts to control and socialize their children. There are two crucial elements of parenting:

- **Parental responsiveness:** It refers to the level of warmth and support provided by the parent. Parents high on this dimension help promote in their children, a strong sense of individuality, self-regulation, etc. and are aware of their child's needs.
- **Parental demandingness:** It refers to the level of control a parent executes on the child's behaviour. Parents high on this dimension expect the child to be disciplined and obedient. They are likely to constantly supervise their child and do not take disobedience casually.

Based on these two elements, four types of parenting styles can be derived (Maccoby and Martin, 1983).

- **Indulgent/permissive/non-directive parenting style:** Such parents are high on responsiveness and low on demandingness. They are more lenient in their interactions with their child and allow the child to self-regulate his behaviour, without fear of confrontation.
- **Authoritarian parenting style:** Such parents are high on demandingness and low on responsiveness. They expect absolute obedience from the child and maintain a strictly structured environment, with a well-formulated set of rules that the child must follow at all costs.
- **Authoritative parenting style:** Such parents are high on both responsiveness and demandingness. They believe in setting rules and norms for the child to follow, but their manner is relaxed, not punitive. They are assertive in their interaction with the child but give the child room to develop a sense of responsibility too. They are cooperative and supportive towards the child.
- **Uninvolved parenting style:** Such parents are low on both responsiveness and demandingness. They showcase a neglectful attitude towards the child, often leaving the child with feelings of rejection and abandonment. They neither believe in maintaining strict discipline nor are available to fulfil the child's needs and demands.

14.2.1 Identification of Cultural Ideals

Parenting is a complex process, influenced by a multitude of social, cultural and personal variables. Cultural ideals have a strong influence on how a parent raises one's child. Cultural ideals are the standards that are set or the values that are dominant in an adult individual's cultural and social milieu, prescribing how one should behave and be treated. Cultural ideals are based on a consensus of beliefs among members of that culture. For example, strict discipline is to be maintained by the male member of the family, is a prevalent cultural ideal seen in North-Indian families.

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Many cross-cultural studies in this field have provided useful insights into the connection between culture and parenting. A study conducted by Van Campen and Russell (2010) compared White American and Asian American parents and found that the former is more likely to follow the authoritative parenting style while the latter are more likely to be authoritarian as their cultural ideal represents the belief that control and strictness are required to protect and raise children.

For your assignment, you are required to interview 10 parents belonging to your city. You must attempt to ascertain their views on various aspects of parenting in such a manner that you can assess whether they are high or low on parental responsiveness and parental demandingness. Based on this assessment, you are to categorize each parent into one of the four parenting styles: permissive, authoritarian, authoritative or uninvolved. In this manner, compile a report on the prevalent parenting styles in your region and correlate it with the cultural ideals that are dominant in the region. Collaborate your findings with research that has been done by other scholars, in similar contexts.

Check Your Progress

1. What is parenting style used for according to Baumrind?
2. What are cultural ideals?
3. What was the study conducted by Van Campen and Russell all about?

14.3 ANSWERS TO CHECK YOUR PROGRESS QUESTIONS

1. According to Baumrind, parenting style is used to capture normal variations in parents' attempts to control and socialize their children.
2. Cultural ideals are the standards that are set or the values that are dominant in an adult individual's cultural and social milieu, prescribing how one should behave and be treated.
3. The study conducted by Van Campen and Russell (2010) compared White American and Asian American parents and found that the former is more likely to follow the authoritative parenting style while the latter are more likely to be authoritarian as their cultural ideal represents the belief that control and strictness are required to protect and raise children.

14.4 SUMMARY

- Cultural norms regarding parenting practices typically affect how children are brought up.

- It is fair to say that the most common and probably most effective mode of transfer of cultural values is an individual's family, specifically one's parents.
- According to Baumrind (1991), parenting style is used to capture normal variations in parents' attempts to control and socialize their children.
- Indulgent parenting style includes parents who are high on responsiveness and low on demandingness.
- Authoritarian parenting includes parents who are high on demandingness and low on responsiveness.
- Authoritative parenting style includes parents who are high on both responsiveness and demandingness.
- Uninvolved parenting style includes parents who are low on both responsiveness and demandingness.
- Parenting is a complex process, influenced by a multitude of social, cultural and personal variables. Cultural ideals have a strong influence on how a parent raises one's child.
- Cultural ideals are based on a consensus of beliefs among members of that culture.

NOTES

14.5 KEY WORDS

- **Parenting Style:** It is a psychological construct representing standard strategies that parents use in their child rearing.
- **Self-Regulation:** It can be defined in various ways. In the most basic sense, it involves controlling one's behaviour, emotions, and thoughts in the pursuit of long-term goals.

14.6 SELF ASSESSMENT QUESTIONS AND EXERCISES

Short-Answer Questions

1. What are the crucial elements of parenting?
2. Why is parenting style a complex process?

Long-Answer Questions

1. Explain the different types of parenting styles.
2. Describe the parent style of any five parents around you and categorize them into one of the four parenting styles: permissive, authoritarian, authoritative or uninvolved.

14.7 FURTHER READINGS

NOTES

Berry, J. W.; Y. H. Poortinga; M. H. Segall; and P. R. Dasen. 2002. *Cross-Cultural Psychology: Research and Applications*. New York: Cambridge University Press.

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