

SOCIAL AND CULTURAL REPRESENTATIONS OF MENTAL DISEASES IN ARABIC WORLD

Al-Mudhafar Doaa Naser Bohan

Belarusian State University

4, Nezavisimosti Av., 220030, Minsk, the Republic of Belarus

duaanaser656@gmail.com

Abstract. Humans has been trying since ancient times to provide explanations for mental illness and methods of its treatment in these attempts, he builds his social, cognitive and cultural perceptions about mental illness and methods of its treatment from various sources. These perceptions formed a cultural asset accumulated over generations. Despite scientific progress and the spread of health culture, they did not eliminate the use of this cultural asset in dealing with the disease. large sectors of society still derive their different perceptions and interpretations of mental illness from diverse cultural heritage such as rituals, social customs, values and traditions...In this sense, the disease and its treatment become as much a cultural fact as a medical one. Thus, the nature of mental illness needs an explanation that goes beyond the social and cultural structure of the individual, because it is the cultural affiliation that gives him the framework through which the factors that led to the emergence of mental illness are explained.

Keywords: *representations, sociocultural factor, mental illness, Arabic world.*

СОЦИОКУЛЬТУРНЫЕ ПРЕДСТАВЛЕНИЯ О ПСИХИЧЕСКИХ ЗАБОЛЕВАНИЯХ В АРАБСКОМ МИРЕ

Ал-Мудафар Дуаа Нассер Бохан

Белорусский государственный университет

пр-т Независимости 4, 220030, Минск, Республика Беларусь

duaanaser656@gmail.com

Аннотация. С древних времен человек пытался дать объяснения психическим заболеваниям и методам их лечения. В этих попытках он строит свои социальные, когнитивные и культурные представления о психических заболеваниях и методах их лечения на основе различных источников. Эти представления сформировали культурное достояние, накопленное поколениями. Несмотря на научный прогресс и распространение культуры здоровья, они не устранили использование этого культурного достояния в борьбе с болезнью. Широкие слои общества по-прежнему по-разному воспринимают и интерпретируют психические заболевания на основе разнообразного культурного наследия, такого как ритуалы, социальные обычаи, ценности и традиции. В этом смысле болезнь и ее лечение становятся таким же культурным фактом, как и медицинским. Таким

образом, природа психического заболевания нуждается в объяснении, выходящем за рамки социокультурной структуры индивида, поскольку именно культурная принадлежность дает субъекту рамки, с помощью которых объясняются факторы, приведшие к возникновению психического заболевания.

Ключевые слова: *представления, социокультурный фактор, психические заболевания, арабский мир*

The nature of mental illness is different from other health problems. Mental illness is associated with varying concepts and beliefs around the world, especially in Eastern societies where much mystery surrounds mental illness, leading people to view mental illness as a punishment for sin or the result of hidden forces such as magic, jinn and the evil eye. Associated with the cultural and social background in Middle Eastern countries, which is confirmed by some psychological and Arab studies. [3, p. 31].

In fact, this view reveals the important fact that the social course of illness is largely dependent on the cultural content of the society and integrated with the existing patterns of life in that culture. The culture of a group influences every aspect of a person's personality, his development, lifestyle, setting goals and aspirations, the risk factors to which the individual is exposed, and the way he responds to these dangers [10, p. 57]. Concepts of illness always include some ideas about the causes of illness and methods of resisting it. They are associated with social practices and customs that will interact and lead to behavioral patterns that set the cultural and social framework for coping with the situation. The prevailing belief about the influence of psychological factors on the causes of diseases and methods of their prevention and treatment is an obstacle to seeing the true causes of the disease, and sometimes slows down the process of resistance to it. There are many misconceptions regarding superstitions and lack of proper knowledge about the nature of mental illness and psychotherapy, due to which a person in society refrains from contacting a psychologist, his psychological status decreases, he may get sick, and his condition becomes difficult to treat [5, p. 137].

Psychological and sociological research has placed great emphasis on the issue of social perceptions of mental illness and its treatments and has focused on the ideas and meanings that people crystallize around the concept and the resulting attitudes and behaviors. Social perception is a system of values, principles and practices associated with certain things, be they manifestations or dimensions of the social environment, which help to stabilize the framework of the private lives of individuals and groups and is a tool that guides our perceptions, as well as constructing our reactions, this is clear because social perceptions are related to the nature of social attitudes and changes that societies and individuals experience, based on the basic idea that perceptions reflect a set of beliefs associated with

culture and social interaction between individuals and their life experiences. It turns out that social ideas are primordial and related to the basic needs of a person, and there is no doubt that the way of expressing these needs changes depending on environmental conditions and its capabilities. On the other hand, the Encyclopedia of Psychology and Psychoanalysis defines mental illness as a weakness or dysfunction. These are terms used in the fields of clinical psychology and psychiatry to refer to a group of diseases that reflect poor personality adjustment [3, p. 18].

Perhaps the most important definition regarding mental disorder is that contained in the fourth statistical manual of mental disorders, DSM-IV, which views mental illness as a set of significant symptoms that affect an individual and are usually accompanied by distress. These disorders are considered to be a manifestation of behavioral, psychological and biological dysfunction in a person, and most psychologists agree that mental disorders refer to states of incompatibility with the psyche, body or natural or social environment, expressed by high degrees of anxiety and stress, feelings of hopelessness and depression. They often address the emotional dimension of the personality, through which the disturbed person remains connected to real life and is able to recognize his anxious state [6, p. 31]. We cannot deny that most forms of mental disorders occur in people belonging to cultural groups that have their own understanding of these disorders. On the one hand, cultural factors influence the development of patterns of manifestations of mental illness, characterized by dependence on prevailing cultural systems, and on the other hand, cultural practices and folk beliefs influence the perception, formation and interpretation of mental disorders and methods of healing from them.

Each culture has its own perspective on the perception of mental illness and how to treat it, even though they are biological processes. Some of the facts associated with diseases depend on the determinants of society and its social and cultural interpretations. One of the famous researchers of the concepts of health and illness, Herzlich, analyzed social ideas about health and illness. First comes cultural heritage, which varies from society to society and from culture to culture. Health and illness are social and cultural phenomena, an idea supported by many scientists. If we study medical practices that exist in traditional societies, we must study them within the framework of the culture of this society [9, p. 57], where residents of some societies, including those of the Middle East, treat illness as a phenomenon beyond the level of nature, to the extent that the effectiveness of healers is within the framework of their adherence to traditional health, beliefs and customs of their culture [8, p. 56]. It can be said that the traditional perception of mental illness is related to the prevailing culture. Thus, in a number of cultures, the appearance of the disease is explained by supernatural factors, such as witchcraft,

envy, violation of religious and moral taboos, as well as the interventions of supernatural beings such as evil spirits, elves. Therefore, it can be said that explanations of mental illness in traditional societies can be divided into religious interpretations and explanations related to magic.

Ancient cultures have certain ideas about illness. People believe that illness occurs as a result of punishment for religiously and morally unacceptable actions that the patient has committed. According to Margaret Mead, there is another cause of disease in traditional cultures. The disease is caused by evil spirits (demons), and a person can be cured with prayers and spells. Her research into culture, health and disease in rural communities in the Middle East revealed one of the prevailing beliefs about the causes of disease. It consists of the belief that illness occurs as a result of failure to fulfill important religious rituals and obligations, such as refusing to perform the Hajj [1, p. 32]. In many primitive and traditional cultures, there is a belief that some supernatural beings take the human body as a temporary residence in order to stay in it for some time and parasitize the human body for some time and cause some psychological, mental and organic diseases in it, so the patient resorts to a religious healer or shaman who performs some magical practices to expel this spirit from the body [2, p. 175].

The disorder is usually explained by reasons related to a divine curse, the influence of magic, jinn, so the disease is actually only a general manifestation of the action of hidden forces [11, p. 696], and an explanation of the cause of the disease, for example, as a result of dysfunction of the nervous system, is often excluded. In the same context, Leila Maisum confirms that most of the cases where, in her opinion, patients are under the influence of jinn, magic and the evil eye, are cases where the patients actually suffer from mental disorders, have superstitious thinking and are influenced by folk beliefs. There appears to be a strong connection between popular culture and psychological disorder, as Tawfik Al-Samai explains. In this regard, the role of culture is to structure public perception of the problematic participant and encourage him to follow the ritual process from beginning to end [7, p. 47]. From this point of view, we can confirm that the influence of dominant cultural ideas on the perception and understanding of various diseases and mental disorders accompanies a person throughout his life, since many peoples tend to believe that supernatural forces, phenomena of various kinds are behind the occurrence of these diseases, which from time immemorial have helped man and still help him to overcome fears and various events that he faces, such as illnesses, physical disabilities, mental pain and death.

The study of mental disorders from a social and cultural perspective is a matter of exploring the role that cultural background plays in the perception, understanding and interpretation of disorders. This is closely related to the ideas which were formed about the disorder, its causes, symptoms, frequency of

occurrence and associated symptoms. Despite the development of clinical psychology and psychiatry, different societies use a variety of treatment methods, choosing between traditional and modern ones. Consequently, disease control and understanding patient behavior are no longer the exclusive areas of interest of clinical psychology and psychiatry, especially since the topic of health and illness has attracted the attention of the social, psychological and anthropological sciences. Representatives of these sciences have raised important research questions, including the influence of cultural, social and religious factors on the understanding and interpretation of disease, as well as on the choice of appropriate treatment. In addition, they are interested in the transformation of all these phenomena during the transition from traditional to modern culture. Thus, the focus of knowledge on understanding illness in terms of its type, causes, and symptoms has expanded to give significant prominence to the role of cultural context in the perception, understanding, and interpretation of psychological distress in both patient and therapist. In essence, each of them is a cultural being, living in a social environment associated with diverse cultures, religious and folk beliefs.

List of references

1. Bashai W. A. Sociology and Medical Anthropology. Cairo: Maarif House, 1999. 568 p. [in Arabic]
2. Al-Khashab A. Anthropological Studies. Cairo: Maarif House, 1970. 568 p. [in Arabic]
3. Hassan K. W. Psychological and Mental Diseases and Behavioral Disorders in Children. Beirut: Arab Thought House, 1997. 223 p.
4. Mesum L. Psychological Disorder: between Psychopathology and Popular Culture Perspective: A Field Study on a Sample of People Affected by Magic and Eye at the Level of the Algerian West // Department of Social Sciences, University of Tlemcen, Algeria. 2014. 74 p. [in Arabic]
5. Obeidi S. F. Introduction to Cultural Anthropology. Jordan, 2018. 164 p. [in Arabic]
6. Asma B. Mental Disorders: between the Perspective of Modern Psychology and the Islamic Psychological Perspective // Raskhun magazine. 2014. No 8. 56 p. [in Arabic]
7. Tawfik S. About the Ritual of the Occult, Transcendental Consciousness, Emotional Evasion or Psychological Treatment // Humanities. 2017. Vol. 75–76. P. 31–50. [in Arabic]
8. Sidi A. A. Cultural Background and its Relationship to the Perception of Psychological Disorder and the Choice of Treatment Method // Journal of Social Sciences. 2016. No 9. P. 34–52. [in Arabic]
9. Samah A. Culture of Disability: A Socio-Anthropological Study on Families of Disabled Children in Sohag City. Cairo: South Valley University, 2007. 366 p. [in Arabic]
10. Samia M. J., Mohammed A. M., Ali Muhammad, Sana A. K. Studies in Medical Sociology. Amman: Dar Al-Masirah, 2011. 392 p. [in Arabic]

11. Hamel A. Psychocultural Reading of Psychological Disorder// Journal of the Researcher in the Humanities and Social Sciences. 2020. Vol. 1121. P. 691–700. [in Arabic]