

Comparison of Schizophrenic disorders in different cultures and the effect of culture on these disorders: a review study

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Abstract

The purpose of this study is Investigating cultural differences and its effect on psychotic disorders. The method of this study 25 articles have been considered that have been researches on psychotic disorders according to their culture, we gathered together. The results showed that In traditional cultures, psychotic symptoms such as delusions and hallucinations are often attributed to spiritual, religious, or magical experiences. In contrast, in Western cultures, these symptoms are linked to biological or psychiatric disorders and more attention is paid to drug treatment. Collectivist cultures (such as Eastern countries) typically provide stronger social and family support, which contributes to improved treatment outcomes. In contrast, in individualistic societies (such as Western countries), stigma and social exclusion are more severe, which can negatively affect treatment and disease acceptance. Religious beliefs can change how symptoms are perceived. In some cultures, delusions and hallucinations are considered signs of connection with spiritual forces. These beliefs can have both a positive effect (such as strengthening hope) and a negative effect (such as delaying treatment). Psychotic disorders may be more common in developing countries, but patients benefit from stronger social support. In developed countries, although treatment facilities are more advanced, stigma can prevent patients from accessing services. The results of these articles emphasize that the treatment of psychotic disorders should be tailored to the culture of each society. Using

treatment methods that respect the patient's beliefs and cultural values can bring better results.

Keywords: psychotic disorders , cultures , The differences Effects

Introduction

Culture is a common learned behavior that is passed from one generation to another for the purposes of personal and social development. Considering cultural diversity, both inherited and acquired aspects should be understood. (Kolhara, 2001) . Over the past 50 years, schizophrenia as a disorder has been widely studied in cultures around the world. There is a difference not only in symptoms and manifestations but also in outcome and prognosis. People often have multiple identities related to gender, religion, and other factors. On the one hand, culture binds people together and keeps them in a group, while on the other

hand, it also determines the characteristics that distinguish them from the "other", thus confirming individual and group identity. Shared cultural beliefs directly contribute to stress and this can lead to psychopathology. Cultural beliefs or ideas influence the occurrence of symptoms of a mental illness. Therefore, people from different cultures may differ in the content of their illusions. Escobar et al. (1986) suggest that in some cultures, the physical representation of symptoms may result from the existence of fewer words or concepts to describe psychological symptoms. Thus, experienced but cognitively unexplained symptoms of psychopathology may be expressed in more culturally appropriate physical terms. A tendency toward hypochondriasis and somatization may explain the tendency observed by Jenkins et al. (1986) Schizophrenia is one of the most complex mental disorders, whose symptoms appear in the form of delusions, hallucinations, disturbed behavior and thought disorders. Although this disorder is seen worldwide, the symptoms and how it manifests are influenced by cultural factors. Culture not only shapes people's understanding of the disease, but also affects the type and severity of

symptoms (Bhugra, 2004).

The effect of different cultures on schizophrenia

Cultural differences in symptoms are one of the important differences and the effect of culture on this disorder. Cultures play an important role in how schizophrenia symptoms are experienced and expressed. For example in Delusions in Western cultures, delusions are often paranoid in nature; Such as the belief of being wanted by the government or large organizations. In contrast, in non-Western cultures, delusions may be related to religious or spiritual beliefs; such as claiming direct communication with God or supernatural forces (Sartorius et al., 1986). Illusions In Western societies, the most common type of auditory hallucinations are voices that threaten or humiliate the person. But in Eastern or African cultures, auditory hallucinations may be more positive and include messages from ancestors or spirits that give the person moral or spiritual advice (Ng, 1997). Disordered behavior in Western cultures is often recognized as a sign of serious mental illness and causes social rejection.

cultural differences in diagnosis and treatment is Another effect of culture on this disorder. The World Health Organization showed that schizophrenic patients in developing countries had better treatment outcomes. Stronger social and spiritual support in these communities was identified as an important factor in these outcomes (Sartorius et al., 1986). Culture has a profound effect on how schizophrenia symptoms are presented, understood, and managed. It is essential for doctors and psychiatrists to understand these differences in order to provide treatment appropriate to the patient's culture. Paying attention to patients' beliefs and cultural values can help reduce stigma, improve treatment results, and increase patients' quality of life. The influence of culture on schizophrenia is one of the important topics in psychiatry that shows how cultural differences can affect the incidence, diagnosis, and treatment of this disorder. In some cultures, schizophrenic symptoms such as delusions and hallucinations are interpreted

positively or as spiritual experiences, while in other societies these symptoms are recognized as signs of illness (Bhugra, 2004). For example, in some African and Asian societies, people with schizophrenia may view their symptoms more positively and from a religious perspective, whereas in Western societies, one is more likely to face negative labels and drug treatments (Sartorius et al. , 1986). Cultural differences can also influence how people encounter stigma and receive treatment. In Eastern societies, the family has a more supportive role and the person may prefer traditional treatments instead of going to medical centers (Mueser et al., 2016). Cultural differences affect not only the diagnosis but also the type of treatment , Drug treatment. In Western cultures, drug treatment (such as antipsychotics) is the main standard of treatment. In these cultures, evidence-based treatment and drug control of symptoms are prioritized (Mueser et al., 2016). Traditional therapies, In many non-Western cultures, traditional therapies such as prayer, spiritual ceremonies, and the use of medicinal plants are widely used. These methods are sometimes combined with medical treatments. The role of the family, In collectivist cultures such as Eastern countries, families play a key role in supporting and caring for the patient. This social support can help improve the patient's condition. In contrast, in individualistic cultures, patients typically face more stigma and receive less family support (Corrigan, 2005). Finally, these differences indicate that schizophrenia is not only a mental disorder but also a cultural experience. Investigating cultural and social factors in the formation of schizophrenia symptoms.

The influence of stigma and social beliefs is Another cultural difference. Stigma towards mental illness, especially schizophrenia, is a major challenge in many cultures. In Western societies, although stigma has gradually decreased, it is still a barrier to accessing treatment. In traditional societies, cultural and religious beliefs may

cause patients to seek psychiatric services later (Koenig, 2009). Cultural differences have a profound impact on the understanding, diagnosis, and treatment of schizophrenia. Treatment approaches should be tailored to the patient's culture in order to achieve better results. Awareness of these differences can help reduce stigma, improve access to treatment services, and increase treatment effectiveness. The role of cultural beliefs in the formation of symptoms. Religious and spiritual beliefs is a part of difference. In religious cultures, people may interpret their hallucinations or delusions in terms of religious beliefs. For example, a person living in a religious community may claim to be chosen by God or to receive divine messages. This perception can change the severity and type of symptoms (Bhugra, 2004). Stigma can effect on symptoms, Stigma in many cultures can lead to concealment of symptoms. In Eastern societies where families play a central role, patients may underreport their symptoms to avoid social embarrassment. In contrast, in Western societies, patients may express their symptoms more openly because they have a better understanding of the disease and seek treatment earlier (Corrigan, 2005). The effect of cultural environment on disease severity and outcomes. The cultural environment can directly influence the severity and outcomes of schizophrenia. In collectivist societies such as Asian cultures, family support is stronger and this can reduce the severity of symptoms. In individualistic societies such as Western countries, stigma and social isolation are greater, which can lead to exacerbation of symptoms and delays in recovery (Mueser et al., 2016).

Genetic and environmental differences in the prevalence of schizophrenia is another effect cultures. Research has shown that genetics is one of the important factors in the occurrence of schizophrenia. The presence of certain genes such as DISC1 and COMT can increase the probability of suffering from this disorder. However, these genes alone cannot be the definitive cause of the disease and environmental factors also play a role in its

occurrence. In many researches, the presence of family history in the occurrence of schizophrenia has been identified as a risk factor (Rossi et al., 2014). In some studies, genetic differences between racial and ethnic groups have been observed in the incidence of schizophrenia. For example, some studies have shown that the rate of schizophrenia is higher in Afro- Caribbean populations than in white populations (Hickling & Rodgers Johnson, 2005). In these studies, genetic differences in different racial groups probably caused the difference in the prevalence and severity of this disorder. One of the most important methods of investigating the genetic aspect of schizophrenia is the study of twins and adoption. These studies have shown that if one identical twin develops schizophrenia, the other twin is much more likely to develop the disorder, even if they grew up in different environments. This result shows that genetic factors have a significant effect on the occurrence of schizophrenia (Gottesman & Shields, 1982). Environmental differences in schizophrenia is another effect cultures. One of the factors that is repeatedly mentioned in researches as an effective environmental factor in the occurrence of schizophrenia is stress. Research has shown that negative life experiences such as divorce, poverty, or exposure to violence can increase the risk of developing schizophrenia. In different cultures, the types of stress and how they are experienced can have significant differences. For example, in Western cultures, stress caused by economic and occupational pressures is more common, while in non-Western cultures, family or social problems can be the main cause of stress and the occurrence of schizophrenia (Bhugra, 2004). Cultural differences in the interpretation of schizophrenia symptoms is another differences. Each culture interprets the symptoms of schizophrenia differently. In Western cultures, schizophrenic symptoms are usually identified as symptoms of biological mental disorders, and more emphasis is placed on medical and pharmacological treatments. While in many non-western cultures, the

symptoms of schizophrenia may be interpreted as spiritual or supernatural symptoms, and the person may turn to religious centers or traditional treatments instead of medical treatment. This difference in the interpretation of symptoms can greatly affect the treatment and recovery process (Luhmann et al., 2015). Effects of immigration and cultural change. Immigration is another factor that can affect the incidence and severity of schizophrenia. Immigrants may be under cultural and social pressures that cause stress and eventually schizophrenia. This phenomenon is especially observed in immigrants who go to Western countries, where they face stigma and social discrimination. In many cases, experiencing cultural and racial stress increases the risk of mental disorders such as schizophrenia (Bhugra, 2004). Research has shown that the interaction between genetics and the environment can play an essential role in the occurrence of schizophrenia. For example, in cases where a person is genetically predisposed to schizophrenia, environmental factors such as severe stress or family problems can make this genetic predisposition a reality. This complex interaction between genetics and environment shows that both factors can be involved in the occurrence of schizophrenia simultaneously and in interaction with each other (Caspi et al., 2005). Genetic and environmental differences in schizophrenia have profound effects on how this disorder is diagnosed and treated in different cultures. Genetics can increase a person's susceptibility to schizophrenia, but environmental factors such as stress, stigma, and social support can influence the severity and occurrence of this disorder. Paying attention to these differences and interactions between genetics and environment is very important in designing treatment and prevention strategies.

Schizophrenia treatment models in different countries: traditional versus modern

Cultural and social differences between the first, second, and third world countries have a great impact on the way schizophrenia occurs

and is treated. These differences are especially visible in the prevalence, diagnosis and treatment methods of schizophrenia. In the first world countries, which include industrialized and developed countries, schizophrenia is mostly recognized as a mental disorder with biological and chemical causes. Treatments are mainly limited to antipsychotic drugs and modern psychotherapy. In these communities, access to up-to-date treatments, medical and psychological facilities is very high, and people with schizophrenia can easily benefit from treatment services (Jablensky, 2000). Also, in these societies, stigma and social rejection of people with mental illnesses is more severe than in other societies. On the contrary, in second and third world countries, which generally include developing and less developed countries, the situation is different. In these countries, dealing with schizophrenia is influenced by more social and cultural factors. In many of these countries, particularly in Africa and South Asia, patients may be more likely to receive traditional treatments, and in some cases, schizophrenic symptoms are interpreted as spiritual or spiritual experiences (Ng, 1997). In these communities, herbal remedies and religious ceremonies replace antipsychotic drugs, and psychological help is less available than in developed countries. As a result, people with schizophrenia in these countries may experience more problems accessing treatment and social support. The mentioned differences can have important effects on the changes of schizophrenia in these communities. For example, research has shown that in Western societies, the prevalence of schizophrenia is lower compared to other societies, and in many less developed societies, the disease may be more severe and cause more social and economic problems (Sartorius et al., 1986). These differences may be due to genetic, cultural, and economic differences that each society faces. Therefore, the changes of schizophrenia in different countries are significantly affected by the cultural and social context of each country and indicate the need for a flexible and culturally sensitive treatment approach for each society. In third world

countries, especially in areas facing poverty and lack of health resources, schizophrenia may be experienced as a more severe social and medical crisis. In these countries, the lack of advanced health systems and psychological treatments makes people with schizophrenia more inclined towards informal treatments and even witchcraft treatments or traditional psychotherapies (Mueser et al., 2016). These traditional treatments may have short-term effects, but due to the lack of use of antipsychotic drugs, the symptoms of schizophrenia may become more severe or lead to more complications. Also, in third world societies, families and society have a much stronger supporting role, but due to ignorance and cultural misconceptions, they may experience stigma or social rejection, which itself negatively affects the mental and social status of patients. In developed countries, in addition to

access to modern drugs, doctors usually use multifaceted approaches to treatment that include psychotherapy, social supports, and rehabilitation programs. These comprehensive approaches improve the quality of life of people with schizophrenia and help them live in a more integrated society with minimal social problems. In these communities, more scientific research is being done to better understand this mental disorder and improve treatments, and this itself can lead to significant improvements in reducing symptoms and improving treatment outcomes (Mueser et al., 2016). Finally, it can be said that cultural, social and economic differences in different countries have a great impact on how schizophrenia is understood and treated. While developed societies typically use scientific and medical approaches to treat this disorder, developing societies may prefer traditional and spiritual treatments. These differences are not only in the prevalence and severity of the disease, but also in the treatment results and quality of life of the patients. The influence of traditional and modern cultures on schizophrenia is one of the interesting and complex topics in psychiatry and psychological studies. In traditional societies,

concepts of illness are often intertwined with spiritual or social perspectives. In these societies, schizophrenia may be seen as the result of evil deeds, curses, or divine punishments. In this context, people with schizophrenia are more likely to receive social support from family and religious groups, and traditional treatments such as prayer, religious ceremonies, and herbal remedies are more common (Ng, 1997). In some Asian and African societies, schizophrenic symptoms such as delusions and hallucinations may be viewed positively or as spiritual experiences, and in this way, patients may feel less psychologically stigmatized and socially rejected. Studies have shown that people with schizophrenia, especially in Western cultures, are often reluctant to disclose their mental condition due to the social stigma surrounding mental illness. This can cause more problems in the treatment process. Stigma affects not only patients but also their families and may cause social problems such as rejection and isolation (Rüsch et al., 2005). Cultural beliefs play a significant role in interpreting the symptoms of schizophrenia. In different cultures, the symptoms of schizophrenia may be interpreted differently. In many non-Western cultures, the symptoms of schizophrenia may be seen as signs of spiritual or paranormal disorders. For example, in some cultures, hallucinations and delusions are viewed as messages from the spiritual or supernatural world, and patients are therefore referred to religious or traditional healing centers rather than to medical treatment centers. These beliefs can change the type of treatment and social support (Luhmann et al., 2015). In contrast, in Western cultures, the symptoms of schizophrenia are more recognized as symptoms of mental disorders, and patients are usually referred to doctors and psychologists for treatment. This difference in cultural beliefs and interpretations can have a profound effect on the way of treatment and even social interactions of the sick person with others. Stigma can limit access to treatment. In many societies, people with schizophrenia may refuse psychiatric treatment or be afraid to seek

treatment because they are concerned about stigma and social rejection. This is especially seen in societies with specific cultural beliefs about mental illness. In some cultures, people may avoid medical treatments due to shame and feeling unable to express their mental problems and seek alternative treatments that may not be as effective as scientific treatments (Angermeyer & Matschinger, 2003). In countries with collectivist cultures, families often play a large supportive role and may care for patients with schizophrenia. These supports can be both emotional and social. However, stigma in some of these communities may make families reluctant to talk about the patient's problems and fear seeking help from outside the family. This can limit access to necessary treatments and even lead to more social problems. In Western societies, stigma is often based on ignorance of mental illness. In these societies, people with schizophrenia are viewed as "dangerous," "untrustworthy," or "disabled." This negative perception can lead to social rejection and reduced job and social opportunities for the person with this disease (Corrigan et al., 2001). In contrast, in non-Western societies, stigma may be more due to religious or traditional beliefs about the body and soul. In many cultures, patients with schizophrenia may be considered "tested" or "at God's mercy," and in these circumstances, religious and spiritual therapies may be preferred over medical treatments. This issue can make the treatment time longer and the recovery process more complicated (Bhugra, 2004). Stigma and cultural beliefs play a very important role in the experience of schizophrenia and can affect the diagnosis, treatment and recovery of patients. Stigma can reduce access to appropriate treatments and increase the feeling of isolation and social rejection in patients. In addition, cultural beliefs in the interpretation of schizophrenia symptoms can change the treatment process and lead patients to unscientific or religious treatments. Understanding these cultural differences and reducing stigma can help improve therapeutic and social outcomes for patients with schizophrenia.

Comparative studies: schizophrenia in western and non-western societies

In Western cultures, schizophrenic symptoms such as paranoid delusions and threatening hallucinations are attributed to psychobiological disorders. But in non-Western cultures, these symptoms are often associated with religious and spiritual beliefs. For example, religious delusions are more commonly reported in Eastern and African cultures, where these beliefs are part of the dominant culture (Luhrmann et al., 2015). A study by the World Health Organization (WHO) found that patients in non-Western cultures had fewer symptoms of paranoia and threatening hallucinations, whereas in Western cultures, these symptoms were more severe and stressful (Sartorius et al., 1986). In Western cultures, the main focus is on drug treatment and psychotherapy. These cultures consider illness as a biological-psychological disorder and prefer treatments based on scientific evidence. In contrast, in non-Western cultures, the use of traditional therapies such as prayer, religious ceremonies, and medicinal plants is more common (Bhugra, 2004). Collectivist societies, such as Asian and African countries, offer stronger social and family support. This support can help reduce stigma and improve treatment outcomes. In contrast, in individualistic societies, patients often face greater stigma and social isolation, which can exacerbate disease outcomes (Mueser et al., 2016). WHO researches have shown that patients in developing (non-western) countries have better treatment results. This has been attributed to stronger social support, reduced stigma, and flexible treatments. In contrast, in Western cultures, although medical treatments are more advanced, stigma and social isolation can hinder the treatment process (Sartorius et al., 1986). Patients in non-western cultures are often better accepted in society due to family and social support. Meanwhile, in western cultures, patients usually have more difficulty in returning to society due to stigma and extreme individualism (Bhugra, 2004). In some traditional cultures, these behaviors may

be understood as signs of possession by spirits or magic, sometimes leading to referrals to traditional healers instead of medical practitioners (Koenig, 2009). Research samples A comparative study found that schizophrenic patients in India reported more positive auditory hallucinations, while patients in the United States had more threatening hallucinations. This difference was attributed to cultural and social beliefs (Luhmann et al., 2015). Luhmann et al. (2015) showed that Indian patients experienced more positive auditory hallucinations (such as supportive messages), while American patients reported more threatening voices. This difference was attributed to cultural beliefs about spirits and spirituality. A global study showed that the recovery rate of schizophrenic patients in developing countries (such as Nigeria and India) is better than in developed countries. Reasons for this difference included social support, spiritual understanding of symptoms, and therapeutic flexibility in these cultures (Sartorius et al., 1986). Research in Africa and Britain reported that African patients showed more religious and cultural delusions, while British patients had more delusions related to technology or personal threats. Comparative studies between western and non-western cultures show that culture has a decisive role in the occurrence, management, and consequences of schizophrenia. Effective treatment must be tailored to the patient's cultural context to help reduce stigma, improve treatment outcomes, and improve patients' quality of life. Paying attention to these differences can be a guide for designing intercultural treatment systems. Nigerian patients reported more religious symptoms (such as communication with spirits or divine forces), while British patients had more paranoid delusions. Also, Nigerian patients with better social support showed higher recovery rates. (Kono-Wells, M.2006 Gureje & Binitie, 1989) In another study Japanese patients experienced auditory hallucinations that were less threatening and more consistent with their cultural values (such as the voice of ancestors). In contrast, American patients

reported that voices instructed them to do dangerous things.(Takahashi et al., 2005). In another study In China, schizophrenia was associated with more stigma due to cultural beliefs, and patients were less likely to seek medical treatment. In Australia, scientific understanding of schizophrenia was greater, but patients faced greater social isolation. (Phillips et al., 2004) In another study In Ethiopia, many patients first go to traditional healers and delay medical treatments. However, stronger social support in Ethiopia led to better treatment outcomes. In Germany, patients had faster access to drug treatments, but stigma caused a decrease in their quality of life. (Alem et al., 2020) In another study In both countries, symptoms of hallucinations and delusions were often attributed to supernatural forces. These beliefs increased the delay in medical treatment and giving priority to traditional treatments.(Kleinman, 2016) In another study Patients in developing countries (such as India and Colombia) showed better treatment results. The reason for this difference was attributed to stronger social support and less stigma.(Jablensky) In another study In Latin American countries, families had the main role in patient care. This collectivist approach reduced social isolation and improved treatment outcomes. (Kirmayer & Minas, 2000) In another study In South Korea, schizophrenia was associated with more stigma, and affected people were often treated secretly. In the United States, there was more awareness of the disease, but patients often faced social isolation. A study in the Middle East (Park et al., 2013) In another study Patients in this area often reported delusions and hallucinations related to religious concepts. These beliefs lead to delayed treatment, but stronger family support.(Okasha, 2005) In another study African and Caribbean immigrants in Britain had more paranoid delusions. The stress caused by racism and stigma played an important role in aggravating their symptoms. (Hickling & Rodgers Johnson, 1995)

These studies show that cultural factors play an important role in the occurrence, management, and consequences of schizophrenia. Cultural differences in beliefs, preferred treatments, and social support can affect the type of symptoms, speed of treatment, and quality of life of patients. Paying attention to these differences is very necessary to design cross-cultural treatments.

Discussion and conclusion

Taken together, these articles suggest that culture plays a fundamental role in the understanding, prevalence, treatment, and experience of psychotic disorders such as schizophrenia. The key results of these articles are as follows.

1. The influence of culture on the diagnosis and interpretation of symptoms , In traditional cultures, psychotic symptoms such as delusions and hallucinations are often attributed to spiritual, religious, or magical experiences. In contrast, in Western cultures, these symptoms are linked to biological or psychiatric disorders and more attention is paid to drug treatment.
2. The role of family and social support , Collectivist cultures (such as Eastern countries) typically provide stronger social and family support, which contributes to improved treatment outcomes. In contrast, in individualistic societies (such as Western countries), stigma and social exclusion are more severe, which can negatively affect treatment and disease acceptance.
3. The role of religion and cultural beliefs, Religious beliefs can change how symptoms are perceived. In some cultures, delusions and hallucinations are considered signs of connection with spiritual forces. These beliefs can have both a positive effect (such as strengthening hope) and a negative effect (such as delaying treatment).
4. Prevalence and intensity of psychotic disorders in different countries , Psychotic disorders may be more common in developing countries, but patients benefit from stronger social support. In developed countries, although treatment facilities are more

advanced, stigma can prevent patients from accessing services.

5. The importance of multicultural approach in treatment , The results of these articles emphasize that the treatment of psychotic disorders should be tailored to the culture of each society. Using treatment methods that respect the patient's beliefs and cultural values can bring better results.

Schizophrenia, as one of the most complex mental disorders, is influenced by several factors including genetics, environment and culture. Studies show that culture directly and indirectly affects various aspects of this disease, including diagnosis, interpretation of symptoms, treatment methods, and social support. In Western cultures, schizophrenia is defined as a psycho-biological disorder, and treatments based on pharmacotherapy and psychotherapy are common. In contrast, in non-Western cultures, spiritual and supernatural beliefs play an important role in the interpretation of symptoms, and traditional or religious treatments are often used. These differences also affect the acceptance of the disease and access to treatment, so that stigma and social stigma are experienced in different ways in different societies. From a genetic point of view, hereditary factors play an important role in the occurrence of schizophrenia, but the environment and life experiences, including cultural and social stressors, can moderate the severity of symptoms. In collectivist societies, family and social supports may have a protective role, while in individualistic societies, social exclusion and lack of extensive support can have negative effects on patients. In general, research results show that cultural differences can affect various aspects of schizophrenia, including the type of symptoms, treatment methods, and social acceptance. In order to promote treatment and reduce stigma, it is necessary to pay attention to cultural differences and provide interventions according to the beliefs and cultural needs of patients. This can lead to improving the quality of life of patients and increasing the acceptance of treatment in

different communities. Final Culture has a profound and complex influence on psychotic disorders, from the way symptoms are understood to treatment practices and social support. These effects show that to

achieve effective treatment, special attention should be paid to cultural differences.

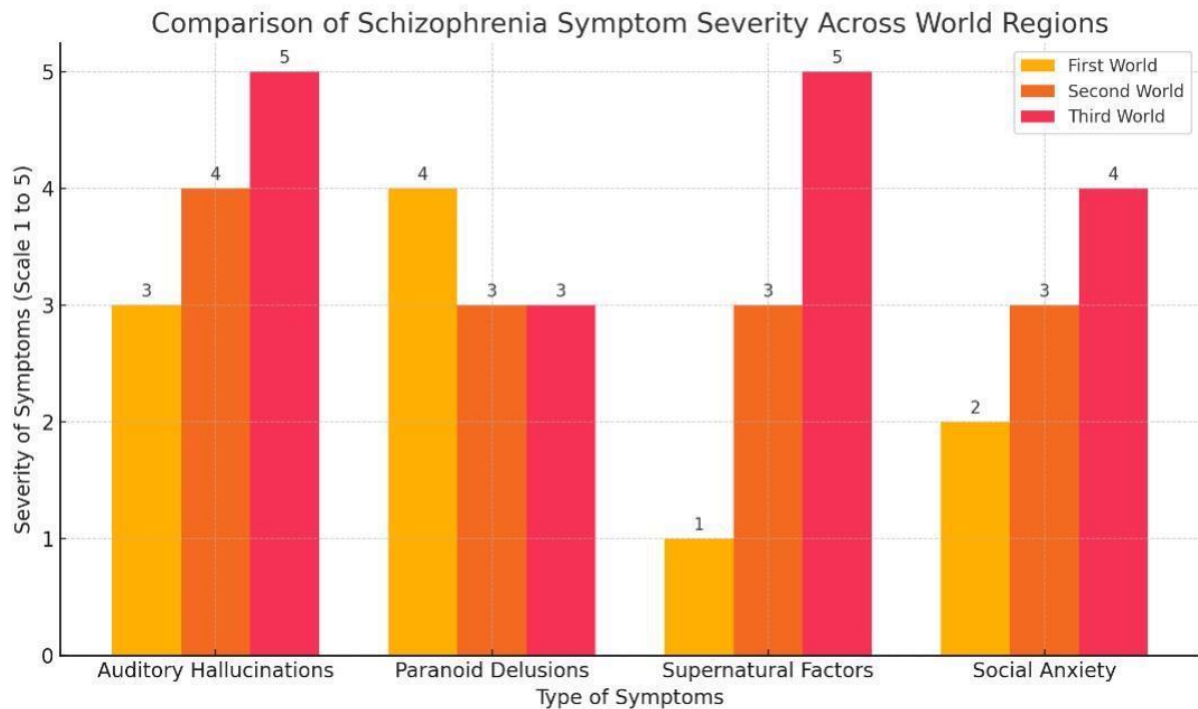
Combine the results

1. This table partially deals with the differences and the effect of that country's culture on psychotic disorders.

Countre	Cultural effect	The main symptoms of the disease	Dominant treatments
Iran	Belief in magic in cause and cure	Illusion based on the belief of communication with the spirit	Drug therapy and religious ceremonies
Russain	Combination of traditional and scientific treatment	Hallucinated with high paranoid	drug therapy
Ameria	High awareness of the disease	Hallucinated with high paranoid	Combination therapy of medication, family support and CBT
Brazil	The effect of the Catholic religioc	Illusions based on religion	Combination of medical and traditional treatment
Japan	Combination of traditional and scientific treatment	Illusion accompanied by rejection and silence	Drug therapy and group therapy
South Africa	Belief in traditional belief	Illusions with magical thoughts	Medical and spiritual treatment
Nigeria	Caused by evil force	Illusion based on the belief in the curse of spirit	Religious ceremonies
Germany	High awareness of the disease	Hallucinated with high paranoid	Drug treatment
Inda	Belief in traditional belief	Illusions based on religion	Prayers and religious ceremonies
chia	The cause is due to spiritual factors Trust in religious beliefs	Illusion based on morality and shame	Herbal treatment

2 This table has categorized the areas and based on the cultural similarity and proximity of geographical locations, it examines the differences and effects of culture on psychotic disorders.

Dimensions	Western culture	Non-western culture
Symptos	Biology concentration	Religious and magical interpretation of signs
Social stigma	decreasig	social exclusion
The role of the family	individualism	Family support
Treatment method	drug therapy	Traditional spiritual treatment along with modern
Positive and negative signs	Both symptoms are symptoms of the disease	Positive signs are spiritual strength
Acceptance of treatment	High acceptance for drug therapy	Skepticism to drug therapy



This chart compares the severity of schizophrenia symptoms (auditory hallucinations, paranoid delusions, supernatural factors, and social anxiety) across First World, Second World, and Third World regions:

1. First World: Lower severity due to advanced psychiatric care and access to evidence-based treatments.
2. Second World: Moderate severity influenced by developing healthcare systems and cultural factors.
3. Third World: Higher severity of hallucinations and supernatural factors, often driven by traditional beliefs and limited access to modern treatments.

Suggestions

It is suggested to investigate the effect of culture in other disorders such as personality disorders.

It is suggested to investigate the effect of culture in psychotic disorders by taking into account the age difference.

It is suggested that variables affecting culture such as war or economic conditions and historical periods should also be considered in the difference between countries' disorders.

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