

Running Head: COUNSELING FOR DEPRESSION

Counseling for Depression in the Indian Culture

Eastern Illinois University

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Introduction

Psychological disorders affect people of every race and nationality. It is the responsibility of the counselor treating these individuals to understand the disorders within their clients' cultural framework. Depression is a psychological disorder that is widespread throughout the world. In India, depression is expressed in a different way than may be expected by counselors in the United States. There is not a word for depression in any of India's languages (Mantle, 2003). The following will address some of the specific cultural features of depression in India. This paper will demonstrate how an Indian client with depression will present their problem. It will highlight some of the unique concerns Indian people have about depression. Differences between depression in India and in other cultures will be discussed. Following this will be information about a new assessment tool for Indian women suffering from postpartum depression.

Presenting Issues

When a person from India is experiencing depression, their complaints will often be physical instead of emotional. These physical complaints are somatic symptoms of depression. People in India who have depression most often present with somatic symptoms initially. These individuals identify the most troubling aspects of their disorder to be aches and pains (Raguram, Weiss, Keval, & Channabasavanna, 2000). When working with someone from the Indian culture, the counselor should pay careful attention to the client's physical complaints. The counselor may want to explore with the client the meaning they attribute to their physical symptoms, and consider depression as a possible diagnosis.

Physical complaints are often what motivates Indian people with depression to

seek help. Once an Indian individual seeks help for their somatic complaints, they will often reveal emotional depressive symptoms after further probing by the health care worker or counselor. Through cultural awareness and sensitivity, the counselor can make a correct diagnosis and develop a treatment strategy congruent with the client's needs (Raguram et al., 2000).

Stigma and Concern

In many areas throughout the world, people avoid seeking treatment for psychological disorders because of the stigma associated with mental illness. This is true in India, where letting people know that someone has a psychological disorder can negatively impact that person's way of life. Some of the concerns Indian people may have are unique to their culture, and other concerns are shared by many cultures. Social standing is highly valued in Indian communities, so some concerns deal with the loss of status and respect in society. An Indian person may be afraid to reveal emotional or psychological problems because they are afraid to cause pain or worry for the person they disclose their problems to. They tend to be especially concerned about the impact of their problem on spouses or other family members (Weiss, Jadhav, Raguram, Vounatsou, & Littlewood, 2000).

Some of the main concerns Indian people have about telling others about psychological problems have to do with marriage. Many marriages are arranged in India. Women are concerned that, if it became known that they had a psychological disorder, it would be difficult to arrange a marriage for them. Some are concerned that their emotional issues may impact the chance for an arranged marriage of someone they are related to. Indian men may be concerned that having a psychological disorder may

diminish their ability to provide for their family. The men may think they would not be seen as suitable candidates for marriage or that, once married, they would not be able to fulfill their responsibilities within the marriage. Because of the stigma associated with psychological disorders like depression in their culture, Indian people may find it easier to discuss the somatic symptoms of their disorder (Weiss et. al., 2000).

Cultural Differences

Although counselors should avoid making assumptions about individuals based on their culture, it can be helpful to have an idea of what to expect when working with clients with backgrounds different from the counselor's. Knowing about these possible differences can help the counselor be more culturally sensitive to their clients (Nelsen, 2000). One of these cultural differences is that people from India tend to experience guilt with their depression less often than people from other cultures (Raguram et al., 2000).

In the United States and most Western countries, women tend to suffer from depression more often than men. This does not seem to be true for the Indian culture. A study by Upmanyu, Upmanyu, and Lester (2000) showed that, among Indian college students, more men suffer from depression than women. Even though counselors should be evaluating each person individually when diagnosing depression, it is important for them to realize that it is not as unusual for Indian men to experience depression. This study also pointed out that hopelessness strongly correlated with depression for Indian people, like it did for people from the United States (Upmanyu, Upmanyu, & Lester, 2000).

Assessment Tool

One reason depression in Indian people may be difficult to diagnosis is because

there seem to be a lack of culturally specific assessment tools for the Indian culture. One assessment tool was recently developed by Mantle (2003) in Great Britain for assessing Indian women for postpartum depression. This tool is called the Dosha Assessment Tool for Postnatal Depression. It was designed to be used in place of the Edinburgh Postnatal Depression Scale (EPDS). Although the EPDS was widely used, it was criticized for not being as effective with other cultures. An example of why the EPDS did not work well with the Indian culture was because there was no word that “depression” directly translated into in any of India’s 38 languages (Mantle, 2003).

The Dosha Assessment Tool is based on the concept of Ayurvedic medicine, which is widely used in India. Ayurvedic medicine is a traditional health care practice in which it is believed that one must have a balance of three doshas to be physically and psychologically healthy. If there is an imbalance between the doshas, herbs, diet, and yoga are often used to regain balance. The Dosha Assessment tool asks questions about appetite, sleep, energy, and memory. It asks few questions about how the person is feeling emotionally (Mantle, 2003). This seems to be effective since Indian people usually present with physical symptoms before revealing emotional ones (Raguram et al., 2000). Mantle (2003) stressed the need for further validation of this tool in her article.

Discussion

Having an understanding of the way depression is experienced by Indian people gives some important implications for its diagnosis and treatment. When diagnosing depression, the counselor must determine if the client’s symptoms are normal for their cultural background (Nelsen, 2002). Diagnosis of depression may be difficult due to some cultural factors. The stigma against psychological disorders in India can make

people very hesitant to seek treatment. One way counselors can help with this is to work on community awareness of psychological issues (Weiss et al., 2000). When depressed Indian people do seek help, they often present with somatic symptoms (Raguram et al., 2000). Counselors must be careful to avoid diagnosing their client with a somatoform disorder if depression is the true cause of the symptoms. Patience and a thorough culturally sensitive assessment can help the counselor correctly diagnose depression in Indian people.

When treating depression in Indian people, it is important for counselors to have an understanding of the Indian culture. According to Nelsen (2002), it may be helpful to discuss confidentiality more extensively with people from some cultures. This would seem to be important to Indian people due to the stigma against mental illness in their society. Counselors and social workers should avoid terms like depression or sadness when their client is more focused on physical symptoms (Nelsen, 2002). When working with Indian clients, counselors should be sure to fully explore marriage and family issues because they seem to be very important to their culture. The counselor may also want to suggest traditional Indian healing techniques such as yoga, which the National Institute of Mental Health and Neuroscience in India has shown to significantly reduce the symptoms of depression (Weintraub, 2000).

References

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