



SWEDISH  
COLLEGIUM  
for ADVANCED STUDY

## REGULAR SESSION INFORMATION

**Session:** Psychosociological Work in Transcultural Contexts

**Session Convener(s):** Gwynyth Overland, Regional Trauma Centre in Southern Norway (RVTS) and University of Agder, Kristiansand

**Chair:** Gwynyth Overland, Regional Trauma Centre in Southern Norway (RVTS) and University of Agder, Kristiansand

**Comments:** -

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I) *Failure of the School Project: The Role of Social, Material, Behavioural, Physical and Mental Resources Among Multi-cultural Students*

Kénora Chau, Université Henri Poincaré, Nancy, and Hôpital d'Enfants de Nancy-Brabois, Vandoeuvre-lès-Nancy

Michèle Baumann, University of Luxembourg, Walferdange

Bernard Kabuth, Université Henri Poincaré, Nancy, and Hôpital d'Enfants de Nancy-Brabois, Vandoeuvre-lès-Nancy

Nearkasen Chau, INSERM, Paris, Université Paris-Sud, and Université Paris Descartes

II) *Students in the Global Village: The Effects of Different Educational Systems on Immigrant-Students' Achievements*

Zemira R. Mevarech, Bar-Ilan University

III) *Mental Illness as Social Construction: Revisiting Thomas Szasz*

Hans Petter Sand, University of Agder, Kristiansand

IV) *The Family as an Educator: Challenges and Opportunities in Multicultural Societies*

Esther Serok, Hebrew University, Jerusalem

V) *He Avoids Eye-contact - Western Specialists Diagnose Ethiopian Children for Learning Disabilities*

Rita Sever, Hebrew University, Jerusalem

### Distributed papers:

*Suicide Behaviors and Role of Family Characteristics, School Difficulties, Unhealthy Behaviors, and Mental Health among Multi-cultural Students*

Michèle Baumann, University of Luxembourg, Walferdange

Kénora Chau, Université Henri Poincaré, Nancy, and Hôpital d'Enfants de Nancy-Brabois, Vandoeuvre-lès-Nancy

Bernard Kabuth, Université Henri Poincaré, Nancy, and Hôpital d'Enfants de Nancy-Brabois, Vandoeuvre-lès-Nancy

Nearkasen Chau, INSERM, Paris, Université Paris-Sud, and Université Paris Descartes

*Psychosociological Work in Transcultural Contexts - The Case of Cambodian Survivors*

Gwynyth Overland, Regional Trauma Centre in Southern Norway (RVTS) and University of Agder, Kristiansand

## ABSTRACTS

### Session description

Western social science theory has to a certain degree developed in tandem with Western mental health science and practice. There are both psychological and sociological behaviourisms, constructivisms, and cognitive perspectives. This has continued to occur in contexts of gradually increasing cultural pluralism. In Western psychology, the sense of self is now more often seen as dependent on a mental action in which a person creates the idea of himself, a development which links these perspectives more closely to Eastern worldviews and has consequences for psychological work (as in, for example, the proliferation of mindfulness practices in therapy). In Western sociologies and theories of social and psychosocial work, awareness of adaptation to these world historical changes is shown by an increased attention to, for example, cultural sensitivity in the transcultural meeting.

How does this play out in practice? How do sociologists approach and evaluate the work done in transcultural contexts, in the sets of relationships between participants, events, practices, and language? The session invites papers based on both practice-based empirical studies and theoretical reflection. If there is sufficient interest, a book of the collected papers may be created (see for example *Sociology at the frontiers of psychology* [Overland, ed.] which was the fruit of an IIS 2005 session).

### Papers

#### *I) Failure of the School Project: The Role of Social, Material, Behavioural, Physical and Mental Resources Among Multi-cultural Students*

Kénora Chau, Université Henri Poincaré, Nancy, and Hôpital d'Enfants de Nancy-Brabois, Vandoeuvre-lès-Nancy

Michèle Baumann, University of Luxembourg, Walferdange

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Nearkasen Chau, INSERM, Paris, Université Paris-Sud, and Université Paris Descartes

**Background:** School is a multi-cultural setting where students require social-material-behavioral-physical-mental resources to realize school achievement, but they are often lacking especially among immigrant students. In an early adolescence context, this study assessed of risk for repeating a school-year, low-school-performance, and quitting-school-thinking at 16 years among European and non-European immigrants and the mediating roles of family characteristics, quality of life, and unhealthy behaviors.

**Methods:** Questionnaires were completed by 1559 middle-school adolescents from north-eastern France (mean age 13.5 (SD 1.3) years) including: sex, age, family structure, nationality, father's occupation, WHOQoL (quality of life for 4 domains physical/psychological/social relationship/environment; <25<sup>th</sup> percentile value), unhealthy behaviors (last-30-day consumption of tobacco/alcohol/cannabis/hard drug, no regular sports/physical activities), repeating a school year, low-summer-term school-performance (<10/20), and quitting-school-thinking. Data were analyzed using logistic models.

**Results:** Repeating a school-year affected 14.8% of students, low-school-performance 8.2%, and quitting-school-thinking 3.9%. The risk for repeating a school-year was higher for European immigrants (gender-age-adjusted odds ratio ORa 2.44) and non-European immigrants (3.29) compared with French. Further adjustment for father's occupation, family structure, WHOQoL domains, and unhealthy behaviors reduced the ORs to 1.82 (43%) and 1.80 (65%) respectively. The risk for low-school-performance was higher for non-European immigrants only (ORa 3.02). Further adjustment for covariates reduced the OR to 1.55 (73%). The risk for quitting-school-thinking was also

significantly higher among non-European immigrants only (ORa 3.42). Further adjustment for covariates reduced the OR to 1.41 (83%). The covariates also played a role among French students.

Conclusion: Immigrant students have markedly lower school achievement, and the risk is strongly mediated by family characteristics, quality of life, and unhealthy behaviors. Public policy aiming at improving school achievement should focus on improvement of environment, living conditions, well-being, and monitoring physical/behavioral/mental difficulties as well as services to reduce school difficulties. This should promote community participation at adolescence and also at adulthood.

Keywords: school difficulty, European immigrants, non-European immigrants, potential determinants, family, socioeconomic status, health-related behaviors.

## II) *Students in the Global Village: The Effects of Different Educational Systems on Immigrant-Students' Achievements* Zemira R. Mevarech, Bar-Ilan University

In the last decades we have witnessed how the world has become a global village. Large populations move not only from one country to another, but also between continents. According to PISA (2006), there are countries in which only about 50% of the students are "native" students, i.e., the students and their parents were born in the country. Previous studies have also indicated that in general immigrants are willing to lower their standard of living because they believe that their children's future would improve. This statistics raise the question of how does the global village affect immigrant-students' achievements, and how educational systems in different countries cope with this challenge? The present study addresses this question. In particular, the purpose of this study is twofold: (a) to compare the level of reading, mathematics, and science literacy of immigrant-students to that of "native" students in OECD and non-OECD countries; (b) to conduct a *longitudinal study* following the different groups of students from the age of 15years old to young adults (about 10 years). *The sources of data are PISA 2002 files and The Israeli Bureau of Statistics.*

The analyses compared reading, mathematics, and science literacy of three groups of students: native students (students who were born in the country of assessment with at least one of their parent born in the country), first generation students (students who were born in the country of assessment but whose parents were foreign-born), and non-native students (students who were foreign-born and whose parents were also foreign-born). The findings indicate that overall in OECD countries, native students scored significantly higher on literacy compared to the first generation students, who in turn scored significantly higher than non-native students. Yet, there are large differences between countries. For example, in Israel, no significant differences were found between the above three groups on literacy, whereas in Hong-Kong as well as in the Netherlands, significant differences were found between the non-native students and the other two groups. The analyses also showed significant differences between the groups on higher-education attendance, and significant positive correlations between literacy scores and higher education for the native students (the analyses of the other groups is still in progress and will be presented at the conference). The findings will be discussed at the conference.

Keywords: immigrant students, literacy, achievement, high-school, higher education, young adults.

## III) *Mental Illness as Social Construction: Revisiting Thomas Szasz* Hans Petter Sand, University of Agder, Kristiansand

Relating to the session title it would be worthwhile to revisit Thomas Szasz' "The Myth of Mental Illness" published

as early as 1961. Szasz was among the first to attack the Western institution of mental illness, and was followed by a number of authors of the so-called anti-psychiatry movement. Also, in the 1960s and 1970s a number of sociologists called attention to the fact that what was called mental illness, could be seen in terms of social interaction, Goffman and Scheff among others.

In his book "The Myth of Mental Illness", psychiatrist Thomas Szasz argued that mental illness is a social construct created by doctors, and the term can only be used as metaphor given that an illness must be an objectively demonstrable biological pathology, whereas psychiatric disorders meet none of the criteria. What psychiatrists label mental illness is in fact nothing more than a deviation from the consensus reality or common morality, Szasz wrote. He stated that mental illness, madness and even many crimes are created or defined by cultural controls, morals and "real world" views of big science, religion and government, similar to heretics, pagans, and sinners before the industrial revolution.

This will be the theme of my proposed paper for the congress.

#### IV) *The Family as an Educator: Challenges and Opportunities in Multicultural Societies*

Esther Serok, Hebrew University, Jerusalem

The paper presents a research study on the social and psychological impact of cultural transition on the role of families as educators. Specifically, it presents the field work and findings of qualitative research involving Israeli educational settings in which innovative methods have been developed to include families in cultural transition as educators in their children's educational process. These methods include for example, the facilitation of authentic dialogue between families and educators, and the incorporation of relevant, meaningful, family cultures, traditions and narratives as enrichment resources within the school curriculum.

As such, a healthy partnership of this nature between the family and the educational framework which relates to the child's cultural world is advantageous not only for the child's learning process – thereby enhancing school achievement, it also preserves the family's educational leadership role and culturally assigned responsibility for strengthening their cultural identity passing on its heritage from one generation to the next. It also enables to incorporate the families' multiple educational intelligences that have not been studied and appreciated enough. Therefore, such a school-family partnership has the potential to minimize the risk of crises and collapse in the immigrant family's traditional structure and role which commonly include psychological phenomena such as the loss of parental authority; children acting as the social bridge and translators between family and school; domestic violence, and so forth. The study also emphasizes the fact that usually evaluation and interventions of such families are not being done by the same culture evaluator but by an outside professional.

#### V) *He Avoids Eye-contact - Western Specialists Diagnose Ethiopian Children for Learning Disabilities*

Rita Sever, Hebrew University, Jerusalem

Huge waves of global migration are turning most Western countries into culturally diverse societies. Many of their immigrants come from so-called third-world countries and are often diagnosed and treated by Western specialists who lack the necessary cultural competence and appropriate diagnostic tools.

In Israel, immigrant youngsters from Ethiopia are quite over-represented in special education frameworks. Since placement in these frameworks requires prior assessment by a professional didactic diagnostician, this over-representation elicits question such as whether it is caused by invalid assessment by Western specialists or due to racial prejudice.

This paper will present findings from a pilot- research that attempted to address these issues.

A sample of 40 Israeli didactic diagnosticians were each asked to review a set of diagnostic reports and (a) judge each report's professional quality, in terms of validity and reliability, (b) recommend further treatment for the diagnosed child.

The reports were all basically authentic assessments of school children who had been diagnosed for learning disabilities by Western professional diagnosticians in Israel. Some of the children were native Israelis, others were immigrants from Ethiopia. Each report was reproduced for use in the research, in two versions: one attributed to an Ethiopian child, the other to a native-Israeli child.

The findings showed no main effect of the *declared* origin of the assessed child. In other words, there was no significant difference between the perceived quality of reports that were attributed to Ethiopian children and those attributed to native Israeli children. But the findings did show a main effect of the true origin of the child (i.e. the original subject of the assessment): diagnostic reports of Ethiopian children were judged to be of lower quality than those of native Israelis, even when the expert judges were made to believe that the subjects of the reports were native Israelis. Interestingly enough, they still recommended special education more often for the subjects of these reports, despite the poor quality of their assessment.

These findings and their meaning will be discussed in the paper.

Keywords: cross-cultural diagnosing, learning disabilities, Ethiopian immigrants.

#### Distributed papers:

*Suicide Behaviors and Role of Family Characteristics, School Difficulties, Unhealthy Behaviors, and Mental Health among Multi-cultural Students*

Michèle Baumann, University of Luxembourg, Walferdange

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Nearkasen Chau, INSERM, Paris, Université Paris-Sud, and Université Paris Descartes

Background: School is a multi-cultural setting where students are trained for community participation, especially at adulthood. But some students experience suicidal behaviors and the risk may be exacerbated among immigrant students because of their living conditions. In an early adolescence context, this study assessed of risk for suicide behaviors among European and non-European immigrants and the roles of family characteristics, school difficulties, unhealthy behaviors, and mental health.

Methods: Questionnaires were completed by 1559 middle-school adolescents from north-eastern France (mean age 13.5 (SD 1.3) years) including: sex, age, family structure, nationality, father's occupation, unhealthy behaviors (last-30-day consumption of tobacco/alcohol/cannabis/hard drug, no regular sports/physical activities), repeating a school year, low-school-performance ( $<10/20$ ), and quitting-school-thinking, depressive symptoms, victim of violence or sexual abuse, implication in violence, and suicide behaviors. Data were analyzed using logistic models.

Results: Last-12-month suicidal ideation (SI) and lifetime suicide attempts (SA) affected 11.7% and 9.9% of students. The risk for SI was higher for European immigrants (gender-age-adjusted odds ratio ORa 2.06) and non-European immigrants (2.60) compared with French. Further adjustment for father's occupation and family structure reduced the ORs to 1.76 (28%) and 2.43 (11%) respectively. Further adjustment for unhealthy behaviors, school

difficulties, depressive symptoms, victim of violence or sexual abuse, and implication in violence reduced the ORs to 1.50 (53%) and 2.23 (23%) respectively. The risk for SA was higher for European immigrants only (ORa 2.21). Further adjustment for father's occupation and family structure reduced the OR to 2.03 (15%), and further adjustment for other covariates reduced it to 1.59 (51%).

Conclusion: Immigrant students have a higher risk for suicidal ideation or suicide attempts depending on their origin. The risk is strongly mediated by family characteristics, school difficulties, unhealthy behaviors, and mental health. Public policy may focus on these issues. This should promote school achievement and community participation.

Keywords: Suicide behaviors, European immigrants, non-European immigrants, family, socioeconomic status, school difficulties, mental health, health-related behaviors.

### *Psychosociological Work in Transcultural Contexts - The Case of Cambodian Survivors*

Gwynyth Overland, Regional Trauma Centre in Southern Norway (RVTS) and University of Agder, Kristiansand

Western social science theory has to a certain degree developed in tandem with Western mental health science and practice. There are both psychological and sociological behaviours, constructivisms, and cognitive perspectives. This has continued to occur in contexts of gradually increasing cultural pluralism. In Western psychology, the sense of self is now more often seen as dependent on a mental action in which a person creates the idea of himself, a development which links these perspectives more closely to Eastern worldviews and has consequences for psychological work (as in, for example, the proliferation of mindfulness practices in therapy). In Western sociologies and theories of social and psychosocial work, awareness of adaptation to these world historical changes is shown by an increased attention to, for example, cultural sensitivity in the transcultural meeting.

How does this play out in practice? As a sociologist, I have studied the work done in the meetings between refugees from war zones and those whose job it is to meet them and evaluate their psychosocial needs. In particular, I have studied a group of resilient survivors of the Khmer Rouge regime, to find out how they managed and to learn from them something that may improve future transcultural meetings.

Findings suggested that these successful survivors used their religion and culture as secure 'knowledge' of how to act and how to explain the traumatic events of the Cambodian holocaust. A *nomos*<sup>1</sup>, the internalised cognitive and normative edifice used by the individual in his own subjective ordering of experience, was the key to survival and post-traumatic recovery. Their resilience built on self-reliance, a strong work ethic, and social integration founded in an endemic cultural worldview. The *DSM-IV* provides a tool for accessing patients' explanatory models in its "Outline for cultural formulation"; yet accessing the cultural/religious resources of survivors in the interests of building personal and group resilience is often neglected.

A Cultural Resilience Interview is suggested - a simple instrument designed for health and social workers interested in doing resilience-building with vulnerable war survivors.

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<sup>1</sup> Berger, *The Sacred Canopy*, 1967.