

## From cross-cultural to cultural thinking in psychological research and practice in Ghana

Joseph Osafo

To cite this article: Joseph Osafo (2017): From cross-cultural to cultural thinking in psychological research and practice in Ghana, International Journal of Culture and Mental Health, DOI: [10.1080/17542863.2017.1409780](https://doi.org/10.1080/17542863.2017.1409780)

To link to this article: <https://doi.org/10.1080/17542863.2017.1409780>



Published online: 07 Dec 2017.



Submit your article to this journal [↗](#)



Article views: 101




View Crossmark data [↗](#)

COMMENT



## From cross-cultural to cultural thinking in psychological research and practice in Ghana

Joseph Osafo 

School of Social Sciences, Department of Psychology, University of Ghana, Centre for Suicide and Violence Research (CSVR), Accra, Ghana

### ABSTRACT

The importance of cultural factors has been a contested issue in psychological research and practice around the world. This paper argues for the importance of conducting psychological research and practice with respect to the cultural context of Ghana. The first part of this article focuses on definition of culture as a concept in psychology and the challenges and theoretical positions of the relationship between culture and psychology. The essay further focuses on the factors necessitating the shift from cross-cultural thinking to cultural thinking in psychological research and practice in the country. The final part of the essay examines the implications of cultural thinking for research methodologies in psychological research and practice in Ghana. It assertively concludes that psychological science can aid service users better if its Westernized focus is challenged and realigned with the cultural context of the country.

### ARTICLE HISTORY

Received 18 December 2016  
Accepted 22 November 2017

### KEYWORDS

Cross-cultural; cultural thinking; psychology; Ghana

### Introduction

The role of culture has been emphasized in psychological/mental health research and practice (Cohen, 2009; Marsella & Yamada, 2007), yet cross-cultural studies still transfer instruments with concepts and norms developed from few Western educated groups into non-Western cultures in an attempt to establish their equivalence (Fernando, 2003). The underlying assumption is that Western concepts can be applied across the board (regardless of the acceptance of diversity of culture; Miller, 1999; Reid, 1994). Poor attitudes towards other non-Western forms of psychologies, the lack of cultural competence, and sensitivity in providing psychological health services are some of the manifestations of ignoring cultural particularities (Fernando, 2003). Sadly, this is observed in psychological practices in some low- and middle-income countries, including Ghana.

The goal of cultural research has been contentious in mental health-related disciplines, including psychology (López & Guarnaccia, 2000). Whilst some have emphasized the relevance of culture in establishing the validity of general psychological models in research (e.g. Beiser, 2003), others have focused on cultural specificity in mental health (e.g. Fabrega, 1990; Rogler, 1989). This has produced what has been generally referred to as cultural and cross-cultural research in the social and behavioural sciences. However, to advance the frontiers of theorizing in understanding the relationship between culture and the psychological, there is a need to reconsider thinking broadly, rather than simply establishing comparisons.

This paper aims at emphasizing the cultural factors in psychological research and practice around the world, with special focus on Ghana. It argues for the importance of conducting in-depth studies

of the psychology of the person in context. The first part of this essay focuses on the definition of culture as a concept in psychology. It continues to review some of the challenges and theoretical positions of the relationship between culture and psychology. The second part demonstrates how cultural psychology has facilitated the development of cultural sensitivity in research and practice and how this could guide psychological research and practice in Ghana. The final part of the essay examines the implications of cultural thinking on research methodology in psychological research and practice in the country.

## The concept of culture

The concept of *culture* has been a very popular and influential idea in the twentieth century, but difficult to define (Keesing & Strathern, 1998; Valsiner, 2007). According to Marsella, Dubanoski, Hamada, and Morse (2000, p. 50), culture refers to the ‘shared acquired patterns of behaviour and meanings that are constructed and transmitted within social-life context for the purposes of promoting individual and group survival, adaptation and adjustment’. Valsiner (2003, 2007) has indicated that, in social psychological thought, the term ‘culture’ has three meanings. Firstly, culture has been used to designate some group of people who *belong together* by virtue of some shared features. Here the person *belongs to a culture* and such use of culture denotes relative commonality and similarity of all such persons seen as belonging together. This common sense view of culture obscures other relevant underlying phenomena (Markus & Hamedani, 2007; Valsiner, 2007). Secondly, culture can be seen as an inherent systematic organizer of the psychological systems of individual persons. In this way, *culture belongs to the person*. It is functioning within the intra-psychological systems of the individual. The third use of culture refers to the interrelatedness that exists between the individual and his environment. Thus *culture belongs to the relating of the person and the environment* (Valsiner, 2007). In this sense, culture is viewed through the various processes by which people relate to their world. Part of the difficulty in arriving at a single definition of culture is the increasingly fluid and constantly changing nature of culture in most societies (Cohen, 2009; Helman, 2007). Despite such complications in definitional issues, certain aspects of culture, such as the interactions humans have with their environments, shared elements of culture, and the transmission of culture across time and generations, have reached academic consensus (e.g. Lehman, Chiu, & Schaller, 2004; Triandis, 2007).

Currently, researchers empirically conceptualize culture as *a process* or as a *social influence* (Markus & Hamedani, 2007). As a *process*, culture is seen as a constituent process that is considered when one is explaining basic psychological phenomena, and emphasizes that culture and cognition are inseparable (Lehman et al., 2004; Marsella, 1998; Miller, 1999; Shweder & Sullivan, 1993; Sloan, 2001). However, when culture is conceptualized as *social influence*, the assumption is that the psychological system is core, basic, universal, and unstructured by culture. In other words, the psychological is affected by culture only when the appropriate situational conditions arise.

This paper adopts Markus and Hamedani’s (2007, p. 12) view of culture as ‘the implicit and explicit patterns of meanings, practices and artifacts distributed throughout the contexts in which people participate and on how people are engaged, invoked, incorporated, contested or changed by agents to complete themselves and guide their behaviour’. Such a view acknowledges culture as both occurring outside the person (Strodtbeck, 1964) and inside the person (Triandis, 2007). It provides a view of a dynamic relationship between the person and his environment, in which the individual is not only a passive recipient of cultural influences but also an active agent making meaning from the interaction between him and his environment.

## Cultural factors in psychological research and practice in Ghana

Since the 1890s, when psychology became a part of pedagogical requirements in Teacher Training Colleges and Missionary centres, to the time it became a formalized discipline in universities, the

dimension of cultural issues has not been heavily emphasized (Asante & Opong, 2012; Opong, 2017). This might, in part, be due to the non-professional approach that characterized psychological training from its embryonic stages in Ghana (Opong, Asante, & Kumaku, 2014). In fact, the proclivity to rely heavily on Western theories and practices as well as an inability to conduct research that is sensitive to the Ghanaian sociocultural landscape have been listed as some of the problems confronting psychological research and practice in Ghana (Asante & Opong, 2012). Several studies from philosophers and sociologists have confirmed the extensive permeation of cultural issues in the social arrangements, thoughts, and behavioural expressions of Ghanaians (Assimeng, 1999; Nukunya, 2003; Gyekye, 1996). Several sources of folk psychologies exist in Ghana, evident from ethno-philosophical themes such as dirges, proverbs, folktales, etc. In respect of this, Opong and his colleagues (2014, p. 15) have recommended that one way of infusing culture into psychological enterprise in Ghana is 'to draw on the oral literature (folktales, songs, values, proverbs, maxims, and beliefs) of the various ethnic groups in Ghana to develop acceptable psychological theories and models that best explain certain phenomena in their cultural context'. Specific areas of psychological research continue to demonstrate the role of cultural factors which may be considered in the conceptualization and measuring of psychological phenomena in Ghana. These include the meaning of suicide (Osafo, 2016; Osafo, Hjelmeland, Akotia, & Knizek, 2011), emotion (Dzokoto & Adams, 2007), spirituality (Gyekye, 2010), personality (Mate-Kole, 2013), intelligence and cognitive abilities (Opoku, 2012), and many more.

There have not been any clear concerted efforts to integrate cultural aspects into psychological practice in Ghana. The Ghanaian cultural landscape is pervasively fused with intense awareness of the religious and the spiritual, yet there are no developed culturally sensitive therapeutic systems which incorporate the religious/spiritual into therapy plans (Osafo, 2016). In fact, there is no provision in the graduate psychology curriculum to address the assessment of spiritual crises and their therapeutic treatment plans (Opong, 2017). The lack of space for cultural issues in psychological research is also found in the area of praxis. An interesting observation is that there appears to be some increasing awareness of the role of cultural factors in medical research and practice among medical professionals (Osafo, Akotia, Hjelmeland, & Knizek, 2017). This interest, however, is not seen much in the psychological sciences in Ghana. Opong (2017) indicated that one way of reducing the wholesale consumption of Western ideologies, concepts, measures, and praxis in psychology in Ghana is to embrace indigenization. Ghana can learn lessons from Asian countries such as India and the Philippines, where indigenization of concepts, problems, methods, and tests (though they are met with challenges) have made some progress (Adair, Puhon, & Vohra, 1993; Church & Katigbak, 2002).

### **The shift from cross-cultural thinking to cultural thinking**

Methodologically, one way psychology came close to considering the role of culture in the making of the *psychological* was through cross-cultural psychological research. Cross cultural psychology involves comparing psychological differences in behaviour between two or more groups of people (Berry, Poortinga, Segal, & Dasen, 1992; Valsiner, 2003, 2007). One assumption of cross-cultural psychology is the view that culture is qualitatively homogeneous; thus every member of the culture shares with each and every other member the same set of cultural features and this underlies the claim of uniformities in psychological functioning (Berry et al., 1992; Valsiner, 2003). The other property is temporal stability, which assumes that the set of cultural features remains the same over time even as the membership of persons in a culture changes from generation to generation (Valsiner, 2003, 2007). In the 1950s, psychologists became increasingly interested in cross-cultural research with a special interest in personality measures. By the 1970s, the awareness that these assumptions guiding personality researches risk cultural bias became apparent (Marsella et al., 2000).

Cross-cultural thinking in psychological research has contributed immensely toward understanding the role of culture in human psychology. It has, however, been hampered by the ambiguities generated by the limited and misguided number of comparisons (Sloan, 2001). Fernando (2003)

contends that comparing and contrasting cultures creates complications arising from the differences and similarities that exist within cultural traditions. For instance, concepts may have little or no meaning in other settings, and problems of interpretations are likely to abound; some of which is what Kleinman (1977) called 'category fallacy': the tendency to assume that the meaning of a cultural category is the same in another culture. Thus cross-cultural studies can produce errors of commission, expressed in the disregard of the unique experiences of the cultural group under study (Marsella et al., 2000). As asserted by Opoku (2012), comparisons in the area of measuring cognitive abilities within the African context, for instance, create great cross-cultural deviations.

The assumption underlying cross-cultural thinking in research is therefore akin to the traditional ethos of general psychology, with its interests in discovering basic universal psychological truths across cultures, such as classification of mental illness, reductionist ways of knowing, etc. (Keith, 2011). In typical Kantian terms, Western psychology might view a person as human because he/she possesses metaphysical qualities such as knowing, feeling, etc. These, however, diverge from an interdependent context in which a human being is viewed from a more social and communal context; thus how harmonious he/she is with the social group (Ikuenobe, 2006). Thus, the Western Kantian ethos is what psychologists in Ghana have been actively engaged with over a considerable period of time, virtually obscuring cultural dimensions.

Furthermore, seeking understanding of human behaviour through cross-cultural research engenders the tendency for its findings to lead toward condescending attitudes such as prejudice, ethnocentrism, or racism. Fernando (2003) has contested that Western ideologies such as dualism, degeneration, and atavism, as well as the medicalization of illness by psychiatrists, led to the creation and imposition of mental health practices on non-Western cultures. The result is that indigenous forms of mental health practices are considered underdeveloped, primitive, and unscientific and are, thus, disregarded or ignored (Gergen, Gulerce, Lock, & Misra, 1996). Factors such as the pervasion of the numinous in the African worldview, interconnectedness of the universe, and communal consciousness may not be viewed as relevant aspects of psychological research and practice in Ghana.

Western culture seems to favour knowing and analysing through reading and writing (Appiah, 2005). It uses the reductionist analytic approach, which emphasizes gathering bits of knowledge, and assuming that the whole can be understood by studying its constituent parts. Extended to knowledge on health, Western scientific knowledge thrives largely on the biomedical model of health, which views disease as a simplistic result of an invasion of a specific foreign pathogen, a disease-causing organism (Rohleder, 2012). It was this view that gave informal prominence to the development of synthetic drugs, medical technology, and the curative thought (Canino & Alegria, 2008; Lim, Cruz, Pumariega, & Cutler, 2005). Such views also influenced the development of canonized classificatory systems of mental health problems (e.g. the Diagnostic and Statistical Manual of Mental Disorders and the International Statistical Classification of Disease). Emphasis was placed on diagnosis and treating the disease rather than treating the individual, resulting in the dehumanization of the patient (Castillo, 1997).

In contrast, cultures in Asia and Africa still manifest certain aspects of human life, such as the spiritual dimension and connection between themselves and their environment, as a relevant aspect of the complexity of being (Fernando, 2003; Gyekye, 2013). For instance, as Blazer (2007) reported, the experience of depression in Sri Lanka is somatized due to stigma from the social environment. This diverges sharply from how depression is viewed in the West. Feelings, believing, and knowing are therefore not separate entities but connected in non-Western cultures (Kitayama, Markus, & Kurokawa, 2000). Whilst self-efficacy, personal autonomy, efficiency, and self-esteem are some ideals of Western thought, harmony, social integration, balanced functioning, protection, and caring are key in non-Western ones such as East Asia and Africa (Fernando, 2003; Gyekye, 1996; Kitayama et al., 2000). The African ontology, for example, has been described by researchers as a connected one, and thus what is not related in the web of the universe cannot exist (Gyekye, 2013; Ikuenobe, 2006; Mbiti, 1989; Verhoef & Michel, 1997). Set against this background, one begins to interrogate

the application of Western psychology to non-Western cultures. Furthermore, the need to incorporate non-Western psychologies as a means of extending psychological knowledge becomes apparent (Moghaddam, 1987).

The search for a shift from cross-cultural thinking to cultural thinking has long been emphasized. Marsella (1998, p. 1285) explicitly pointed out that Western psychology's focus on 'the individual, objectivity, quantification, narrow disciplinary specialization, and universal "truths" may be irrelevant and meaningless for non-western people and their life contexts'. Non-Western people have their own forms of psychologies that emerge from unique historical and situational circumstances (Marsella, 2009). Developing psychological science that closely reflects cultural realities is an important step in expanding the frontiers of new knowledge in the field (Keith, 2011).

### **Cultural sensitivity in psychological research and practice in Ghana**

Blazer (2007) contended that the pervasiveness of spirituality within the Ghanaian cultural context is so deep that a study of the symptoms of depression (and perhaps by extension some other common mental disorders) should not be detached from such extensive religious cultural context. Today, sociocultural variables such as homelessness, urbanization, migration, and poverty remain critical influences on mental health in Ghana (Canavan et al., 2013; De-Graft Aikins & Ofori-Atta, 2007). The impact of these factors on mental health in Westernized settings might not be different from Ghana; it is, however, certain that the phenomenological experience of these factors in the Ghanaian sociocultural context might make them psychologically unique.

Cultural thinking in psychological research and practice in Ghana represents a call to paying greater attention to the role of culture in research and practice as a symbolically structured environment (Benson, 2002; Miller, 1999). I concur with others that the thought of culture as a variable, or a quantifiable dimension, is an oversimplification (Harkness & Keefer, 2000). As researchers develop more in-depth understanding of the Ghanaian population they study, greater efforts should be made to bring to bear a cultural perspective such as ethnic values, clan, spirituality, and other factors which inform research constructs and methods (Oppong, 2016). Thus, considerations pertinent to the cultural characteristics of the group under study become an integral part of the research process (Keith, 2011). Practically, cultural thinking in psychological research in Ghana is still conceptually akin to indigenous psychology (Oppong, 2017). According to Sinha (1997) and others (e.g. Adair et al., 1993), psychological knowledge should arise from within a culture, reflect local behaviours, be interpreted within its frame of reference, and yield results that are locally relevant. Arguing along these lines, Oppong (2013, 2016) indicated that psychological knowledge in Ghana and Africa at large should be stripped of its Eurocentric attributes and become relevant and meaningful to both practitioners and service users in the local contexts.

Cultural thinking further represents a shift from pervasive orthodox curative systems to considerations of local systems of therapies. Ghanaian practitioners could learn from such systems as Ayurveda, yoga, Chinese medicine (e.g. acupuncture), Shamanism, and other complementary and alternative approaches (Helman, 2007) and develop their own contextual therapies. For example, NTU (pronounced 'in to') therapy has been developed from a Bantu concept describing a universal and unifying force that touches upon all aspects of existence in a person's environment. In NTU therapy, people are assisted to build a harmonious and balanced relationship with the natural order (Phillips, 1990). Such focus of NTU therapy is consistent with the African cosmology of being and doing (Ikuenobe, 2006) and Ghanaian psychologists can adapt and build on its core assumptions and utilize it. A Ghanaian PhD candidate is presently testing NTU therapy in Ghana.

Deeper analysis of some of such local therapy practices has revealed that the treatment of mental illness in non-Western cultures is a social event that strengthens the ties within and between groups (Helman, 2007). Thus the community becomes an integral part of the healing process (McCabe, 2007).

Furthermore, in contemporary research and practice, cultural thinking is redirecting Ghanaian psychology researchers' attention to cultural forms such as religion and spirituality and their relationship with psychological/mental health. Generally, these phenomena have been considered abstract and vague and have been neglected in general psychological research (Colucci, 2008; Tarakeshwar, Stanton, & Pargament, 2003). Several researchers, however, have pointed out that religion/spirituality have positive effects on mental health (e.g. Klaassen, McDonald, & James, 2007; Koenig, 2008). Today, within the arena of general psychology and cultural psychology in particular, researchers are realizing the important role of religion in psychological studies (Cohen, 2009; Koenig, King, & Carson, 2012; Triandis, 2007). Two key health acts in Ghana – The Mental Health Act (Act 846) and the Ghana Health Professionals Act (the portion on psychological practice) – contain glimpses that recognize the important dimensions of localized and lay professionals who should be strategically engaged for collaboration. For example, one of the functions of the Mental Health Act (Act 846), as indicated in the act, is to *'collaborate with the Traditional and Alternative Medicine Council and other providers of unorthodox mental health care to ensure the best interest of persons with mental disorder'* (Section 3m). Recently in Ghana, some studies are reporting the revived interest of researchers in traditional and complementary forms of therapy and healing systems such as exorcism, prayers, etc. and arguing for potential collaboration between orthodox and traditional practitioners of healing (Arias, Taylor, Ofori-Atta, & Bradley, 2016; Kretchy et al., 2016; Osafo, 2016).

Paying greater attention to the role of culture in psychological research and practice provides a sustained focus on the study of the individual person as an integrated whole within a particular context. Such a step views the person with perspective, beliefs, and values formed within the fringes of a specific cultural context. Relative differences between persons are therefore not given absolute interpretations and generalizations (Valsiner, 2007), but rather how one variable is connected to another in a unique pattern (Price-Williams, 1999).

## Implications for research and practice

The interest to intensively study specific cultures (*emic elements*) requires a methodological orientation that seeks understanding rather than explanation (Hjelmeland & Knizek, 2010). Furthermore, such thinking requires methods that allow people to talk about their experiences, more than simply sharing these experiences in numerical forms. This is what qualitative methodology brings to the table as researchers become more interested in the complexities between culture and the psychological processes of behaviour. Thus, qualitative methods can facilitate the formulation of cultural thinking in contemporary psychological research and practice in Ghana.

Qualitative research uses a lens that permits a much less precise vision of a much broader strip (McCracken, 1988). The researcher is not interested in how many or what kinds of people share a certain characteristic. The interest lies in gaining access to the cultural categories and assumptions according to which a particular culture conceives the world. By the use of qualitative methods, the researcher organizes and describes phenomena with much depth and richness (Hill, Thompson, & Williams, 1997; Willig, 2013). Therefore the crux of research is not to tell people what they already know, but to help them understand people's experiences in a deeper fashion (Baptiste, 2001). Arguing for the kind of research method needed in suicidology, Hjelmeland and Knizek (2010) asserted that the contexts of people are of prime importance in grasping the meaning of suicide, and qualitative methods provide a better means to unravel such meaning. Since 2008, the importance of a qualitative study of suicidality in Ghana in advancing the frontiers of psychological research and practice in this area of interest has been extensively demonstrated (Osafo, 2012). This approach has facilitated interest in conducting context-based studies of attitudes, meanings, reasons for, and reactions to suicide in the country.

The sensitivity cultural thinking brings to bear on research also involves using indigenous people who have knowledge of their own culture during research. Arguing for meaningful psychiatric studies in contemporary research, Fernando (2003, p. 216) stated that:

In such research service users- people who have experienced the problems identified for research- should be closely involved in planning the research and guiding researchers because they are really in the best position to judge the sort of questions that research needs to find answers for.

Implicitly, the statement points toward the relevance of collaborating with indigenous researchers to study their own culture. Most indigenous psychologists today not only bring their local epistemologies, paradigms, and knowledge to the research literature (Rains, Archibald, & Deyhle, 2000), but, equally, convert their own folk psychologies into scientific psychological theory (Triandis, 2007). For instance, the study of suicidal behaviour within the context of Ghana showed that the act constitutes a social injury (Osafo et al., 2011). This is one of the major cultural meanings of the act in Ghana, which is presently being carefully examined as a potential contextual theory about attitudes and meanings of suicide in Ghana. Culturally sensitive research approaches must be viewed as not only legitimate and appropriate, but also critical to understanding the experiences of particular cultural groups (Altheide & Johnson, 1994; Tillman, 2002). More than three decades ago, Danquah (1982) indicated that applying psychoanalytic/psychodynamic therapeutic principles in Ghana was ineffective, and that an important element was to integrate traditional values into clinical behavioural practice. Further, developing context-based assessment tools in the delivery of school psychological services in Ghana were also viewed as important in the country several years ago (Danquah, 1987). However, such observations have not yet materialized, even in the training and practice of clinical psychology in Ghana, partly because the enthusiasm to study local concepts, develop and utilize them in our own setting is weak. It is my strong proposal in this essay that leading researchers should encourage budding scholars to unpack local concepts and develop tools that can be deployed within their own cultural settings.

## Conclusion

In conclusion, it is important to acknowledge that indigenous groups have their own particular ways of knowing and acting in the world (McCabe, 2008). Therefore, specific cultural categories and concepts deserve to be studied in their own right. They reveal diversity and show cultural variations in psychological conceptualizations and expressions. Cultural thinking advocates for the preservation of diversity rather than destroying it (Fernando, 2003). Psychologists in Ghana need to challenge the Westernized views of the discipline and repackage psychological services to be realigned with the African ethos. I assert that psychological research and practice will continue to be colonized and insensitive to practitioners and service users in the country if the 'foreign' shell that continues to protect its contents and concepts remains unchallenged. A culturally sensitive psychological science in Ghana should be malleable to the cultural particularities rather than discarding them. Such view resonates in the more than a decade-old assertions of Marsella (2003, p. 13) that 'the world is culturally pluralistic and that accuracy requires an understanding of phenomena within its unique cultural context'.

## Disclosure statement

No potential conflict of interest was reported by the author.

## Notes on contributor

*Joseph Osafo* holds a PhD in Health Sciences and Mphil in Psychology (Clinical). He is a Senior Lecturer at the Department of Psychology, University of Ghana. Dr Osafo is the Executive Chair of Centre for Suicide and Violence Research (CSVR), Ghana. His research area focuses on Suicidal behaviours; mental illness and caregiving; religion and mental health; adolescent sexuality and mental health; maternal and child mental health services in LAMICs.

## ORCID

*Joseph Osafo*  <http://orcid.org/0000-0003-4002-291X>

## References

- Adair, J. G., Puhan, B. N., & Vohra, N. (1993). Indigenization of psychology: Empirical assessment of progress in Indian research. *International Journal of Psychology*, 28(2), 149–169.
- Altheide, D., & Johnson, J. M. (1994). Criteria for assessing interpretive validity in qualitative research. In K. D. Norman & S. L. Yvonna (Eds.), *Handbook of qualitative research* (pp. 485–499). London: Sage.
- Appiah, K. A. (2005). African studies and the concept of knowledge. *Poznan Studies in the Philosophy of the Sciences and the Humanities*, 88(1), 23–56.
- Arias, D., Taylor, L., Ofori-Atta, A., & Bradley, E. H. (2016). Prayer camps and biomedical care in Ghana: Is collaboration in mental health care possible? *PloS one*, 11(9), e0162305. doi:10.1371/journal.pone.0162305
- Asante, K. O., & Oppong, S. (2012). Psychology in Ghana. *Journal of Psychology in Africa*, 22(3), 473–476.
- Assimeng, M. (1999). *Social structure of Ghana: A study in persistence and change* (2nd ed.). Tema, Ghana: Ghana Publishing Co.
- Baptiste, I. (2001). Qualitative data analysis: Common phases, strategic differences [Electronic Version]. *Forum: Qualitative Social Research*, 2(3). Retrieved November 18, 2015, from <http://www.qualitative-research.net/fqs-texte/3-01/3-01baptiste-e.htm>
- Beiser, M. (2003). Why should researchers care about culture? *The Canadian Journal of Psychiatry*, 48(3), 154–160.
- Benson, C. (2002). *The cultural psychology of self: Place, morality and art in human worlds*. London: Routledge.
- Berry, J. W., Poortinga, Y. H., Segal, M. H., & Dasen, P. R. (1992). *Cross-cultural psychology. Research and applications*. London: Cambridge University Press.
- Blazer, D. (2007). Spirituality, depression and suicide: A cross-cultural perspective. *Southern Medical Journal*, 100(7), 735–736.
- Canavan, M. E., Sipsma, H. L., Adhvaryu, A., Ofori-Atta, A., Jack, H., Udry, C., ... Bradley, E. H. (2013). Psychological distress in Ghana: Associations with employment and lost productivity. *International Journal of Mental Health Systems*, 7(1), 9.
- Canino, G., & Alegria, M. (2008). Psychiatric diagnosis- is it universal or relative to culture? *Journal of Child Psychology and Psychiatry*, 49, 237–250.
- Castillo, R. J. (1997). *Culture & mental illness. A client-centred approach*. Pacific Grove, CA: Brooks/Cole.
- Church, A. T., & Katigbak, M. S. (2002). Indigenization of psychology in the Philippines. *International Journal of Psychology*, 37(3), 129–148.
- Cohen, A. B. (2009). Many forms of culture. *American Psychologist*, 64(3), 194–204.
- Colucci, E. (2008). Recognizing spirituality in the assessment and prevention of suicidal behaviour. *World Cultural Psychiatry Research Review*, 3(2), 77–95. Retrieved from [www.wcprr.org](http://www.wcprr.org)
- Danquah, S. A. (1982). The practice of behavior therapy in West Africa: The case of Ghana. *Journal of Behavior Therapy and Experimental Psychiatry*, 13(1), 5–13.
- Danquah, S. A. (1987). School psychology in Ghana. *Journal of School Psychology*, 25(3), 247–253.
- De-Graft Aikins, A., & Ofori-Atta, A. L. (2007). Homelessness and mental health in Ghana: Everyday experiences of Accra's migrant squatters. *Journal of Health Psychology*, 12(5), 761–778.
- Dzokoto, V., & Adams, G. (2007). Analyzing Ghanaian emotions through narrative: A textual analysis of Ama Ata Aidoo's novel changes. *Journal of Black Psychology*, 33(1), 94–112.
- Fabrega, H. (1990). Hispanic mental health research: A case for cultural psychiatry. *Hispanic Journal of Behavioral Sciences*, 12, 339–365.
- Fernando, S. (2003). *Cultural diversity, mental health and psychiatry. The struggle against racism*. New York: Brunner-Routledge.
- Gergen, K. J., Gulerce, A., Lock, A., & Misra, G. (1996). Psychological science in cultural context. *American Psychologist*, 51, 496–503.
- Gyekye, K. (1996). *African cultural values. An introduction*. Accra, Ghana: Sankofa Publishing Company.
- Gyekye, K. (2010). African ethics. In E. Zalta (Ed.), *Stanford encyclopedia of philosophy*. Retrieved September 10, 2016, from <http://plato.stanford.edu/entries/african-ethics/>
- Gyekye, K. (2013). *Philosophy culture and vision: African perspectives: Selected essays*. Accra, Ghana: Sub-Saharan Publishers.
- Harkness, S., & Keefer, C. (2000). Contributions of cross-cultural psychology to research and interventions in education and health. *Journal of Cross-Cultural Psychology*, 31(1), 92–109.
- Helman, C. G. (2007). *Culture, health and illness* (5th ed.). New York: Hodder Arnold.
- Hill, C. E., Thompson, B. J., & Williams, E. N. (1997). A guide to conducting consensual qualitative research. *The Counseling Psychologist*, 25, 517–572.
- Hjelmeland, H., & Knizek, B. L. (2010). Why we need qualitative research in suicidology. *Suicide and Life-Threatening Behavior*, 40(1), 74–80.
- Ikuenobe, P. (2006). *Philosophical perspectives on communalism and morality in African traditions*. Lanham: Lexington Books.

- Keesing, R. M., & Strathern, A. J. (1998). *Cultural anthropology. A contemporary perspective* (2nd ed.). Belmont: Wadsworth.
- Keith, K. D. (2011). *Cross-cultural psychology: Contemporary themes and perspectives*. Malden, MA: Wiley-Blackwell.
- Kitayama, S., Markus, H. R., & Kurokawa, M. (2000). Culture, emotion, and well-being: Good feelings in Japan and the United States. *Cognition & Emotion*, 14(1), 93–124.
- Klaassen, D. W., McDonald, M. J., & James, S. (2007). Advance in the study of religious and spiritual coping. In P. T. P. Wong & L. C. J. Wong (Eds.), *Handbook of multicultural perspectives on stress and coping* (pp. 105–132). New York: Springer.
- Kleinman, A. M. (1977). Depression, somatization and the “new cross-cultural psychiatry”. *Social Science & Medicine*, 11(1), 3–9.
- Koenig, H. G. (2008). *Medicine, religion and health. Where science and spirituality meet*. New York: Templeton Foundation Press.
- Koenig, H., King, D., & Carson, V. B. (2012). *Handbook of religion and health*. New York: Oxford University Press.
- Kretchy, I. A., Okere, H. A., Osafo, J., Afrane, B., Sarkodie, J., & Debrah, P. (2016). Perceptions of traditional, complementary and alternative medicine among conventional healthcare practitioners in Accra, Ghana: Implications for integrative healthcare. *Journal of Integrative Medicine*, 14(5), 380–388.
- Lehman, D. R., Chiu, C.-Y., & Schaller, M. (2004). Psychology and culture. *Annual Review of Psychology*, 55, 689–714.
- Lim, R. F., Cruz, M., Pumariega, A. J., & Cutler, D. L. (2005). Introduction to the special issue on culture and community mental health. *Community Mental Health Journal*, 41, 505–508.
- Lopez, S. R., & Guarnaccia, P. J. (2000). Cultural psychopathology: Uncovering the social world of mental illness. *Annual Review of Psychology*, 51(1), 571–598.
- Markus, H. R., & Hamedani, M. G. (2007). Sociocultural psychology. The dynamic interdependence among self systems and social systems. In S. Kitayama & D. Cohen (Eds.), *Handbook of cultural psychology* (pp. 3–39). New York: Guilford Press.
- Marsella, A. (1998). Toward a “global-community psychology”: meeting the needs of a changing world. *American Psychologist*, 53, 1282–1291.
- Marsella, A. (2009). Some reflections on potential abuse of psychology’s knowledge and practices. *Psychological Studies*, 54, 23–27.
- Marsella, A. J. (2003). Cultural aspects of depressive experience and disorders. In W. J. Lonner, D. L. Dinnel, S. A. Hayes, & D. N. Sattler (Eds.), *Online readings in psychology and culture (Unit 9, Chpt 4)*. Retrieved from <http://www.wvu.edu/~culture>
- Marsella, A., Dubanoski, J., Hamada, W. C., & Morse, H. (2000). The measurement of personality across cultures: Historical, conceptual, and methodological issues and considerations. *The American Behavioral Scientist*, 44, 41–62.
- Marsella, A. J., & Yamada, A. M. (2007). Culture and psychopathology. Foundations, issues and directions. In S. Kitayama & D. Cohen (Eds.), *Handbook of cultural psychology* (pp. 797–818). New York: The Guildford Press.
- Mate-Kole, C. C. (2013). Psychology in Ghana revisited. *Journal of Black Psychology*, 39(3), 316–320.
- Mbiti, J. S. (1989). *African religions and philosophy* (2nd ed.). Johannesburg: Heineman Publishers.
- McCabe, G. (2008). Mind, body, emotions and spirit: Reaching to the ancestors for healing. *Counselling Psychology Quarterly*, 21, 143–152.
- McCabe, G. H. (2007). The healing path: A culture and community derived indigenous therapy model. *Psychotherapy: Theory, Research, Training and Practice*, 44, 148–160.
- McCracken, G. (1988). *The long interview* (vols. 13). Beverly Hills, CA: SAGE.
- Miller, J. G. (1999). Cultural psychology: Implications for basic psychological theory. *Psychological Science*, 10, 85–91.
- Moghaddam, F. M. (1987). Psychology in the three worlds. As reflected by the crisis in social psychology and the move toward indigenous third-world psychology. *American Psychologist*, 42, 912–920.
- Nukunya, G. K. (2003). *Tradition and change in Ghana. An introduction to sociology* (2nd ed.). Accra, Ghana: Ghana Universities Press.
- Opoku, J. Y. (2012). Some theoretical and practical problems associated with using western instruments to measure cognitive abilities on the African continent. In H. Laurer & K. Anyidoho (Eds.), *Reclaiming the human sciences and humanities through African perspectives* (Vol. 1, pp. 537–546). Accra, Ghana: Sub-Saharan Publishers.
- Oppong, S. (2013). Indigenizing knowledge for development: Epistemological and pedagogical approaches. *Africanus: Journal of Development Studies*, 4(2), 34–50.
- Oppong, S. (2016). The journey towards Africanising psychology in Ghana. *Psychological Thought*, 9(1), 1–14.
- Oppong, S. (2017). History of psychology in Ghana since 989AD. *Psychological Thought*, 10(1), 7–48.
- Oppong, S., Asante, K. O., & Kumaku, S. K. (2014). History, development and current status of psychology in Ghana. In C. S. Akotia & C. C. Mate-Kole (Eds.), *Contemporary psychology: Readings from Ghana* (pp. 1–17). Accra, Ghana: Digibooks Ghana Ltd.
- Osafo, J. (2012). *Attitudes towards suicide: Exploring the cultural meanings of suicide in Ghana*. A PhD dissertation submitted to the Norwegian University of Science and Technology (NTNU), Trondheim, Norway.
- Osafo, J. (2016). Seeking paths for collaboration between religious leaders and mental health professionals in Ghana. *Pastoral Psychology*, 65(4), 1–16.

- Osafo, J., Akotia, C. S., Hjelmeland, H., & Knizek, B. L. (2017). From condemnation to understanding: Views on suicidal behavior in Ghana in transition. *Death studies*, 41(8), 532–541.
- Osafo, J., Hjelmeland, H., Akotia, C. S., & Knizek, B. L. (2011). Social injury: An interpretative phenomenological analysis of the attitudes toward suicide of lay persons in Ghana. *International Journal of Qualitative Studies on Health and Well-Being*, 6(2), 8708–8718.
- Phillips, F. B. (1990). NTU psychotherapy: An afrocentric approach. *Journal of Black Psychology*, 17(1), 55–74.
- Price-Williams, D. R. (1999). Cross-, intra-, inter-, and just plain cultural. In W. J. Lonner & D. L. Dinnel (Eds.), *Merging past, present, and future in cross-cultural psychology: Selected papers from the Fourteenth International Congress of the International Association for Cross-Cultural Psychology* (pp. 40–45). Lisse, Netherlands: Swets & Zeitlinger.
- Rains, F. V., Archibald, J. A., & Deyhle, D. (2000). Introduction: Through our eyes and in our own words. *International Journal of Qualitative Studies in Education*, 13, 337–342.
- Reid, P. T. (1994). The real problem in the study of culture. *American Psychologist*, 49, 524–525.
- Rogler, L. H. (1989). The meaning of culturally sensitive research in mental health. *American Journal of Psychiatry*, 146, 296–303.
- Rohleder, P. (2012). *Critical issues in clinical and health psychology*. London: Sage.
- Shweder, R. A., & Sullivan, M. A. (1993). Cultural psychology: Who needs it? *Annual Review of Psychology*, 44, 497–523.
- Sinha, D. (1997). Indigenizing psychology. In J. W. Berry, Y. H. Poortinga, & J. Pandey (Eds.), *Handbook of cross-cultural psychology: Vol. 1. Theory and method* (pp. 129–169). Boston, MA: Allyn & Bacon.
- Sloan, T. (2001). Culture, cognition, and psychological individualism. In T. Ward & J. F. Schumaker (Eds.), *Cultural cognition and psychopathology* (pp. 3–15). London: Praeger.
- Strodtbeck, F. (1964). Considerations of meta- method in cross-cultural studies. *American Anthropologist*, 66, 223–229.
- Tarakeshwar, N., Stanton, J., & Pargament, K. I. (2003). Religion an overlooked dimension in cross-cultural psychology. *Journal of Cross-Cultural Psychology*, 34(4), 377–394.
- Tillman, L. C. (2002). Culturally sensitive research approaches: An African-American perspective. *Educational Researcher*, 31, 3–12.
- Triandis, H. C. (2007). Culture and psychology. In S. Kitayama & D. Cohen (Eds.), *Handbook of cultural psychology* (pp. 59–76). New York: The Guildford Press.
- Valsiner, J. (2003). Culture and its transfer: Ways of creating general knowledge through the study of cultural particulars. In W. J. Lonner, D. L. Dinnel, S. A. Hayes, & D. N. Sattler (Eds.), *Online readings in psychology and culture (Unit 2, Chpt 12)*. Retrieved from <http://www.wvu.edu/~culture>
- Valsiner, J. (2007). *Culture in minds and societies*. Los Angeles: SAGE Publications.
- Verhoef, H., & Michel, C. (1997). Studying morality within the African context: A moel of moral analysis and contruction. *Journal of Moral Education*, 26, 389–407.
- Willig, C. (2013). *Introducing qualitative research in psychology*. Berkshire: McGraw-Hill Education (UK).