

# Clinical Case Study: Cultural Dimensions in the Treatment of Postpartum Psychosis in Togo

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## Abstract

This case study explores the culturally sensitive therapeutic management of Kafui, a 28-year-old woman from a rural Togolese community who experienced postpartum psychosis. The treatment underscores integrating cultural practices with psychological principles, emphasizing the role of cultural distress, idioms, and traditional healing in addressing psychiatric symptoms. The case illustrates the importance of cultural insight in achieving resolution and reintegration.

## Keywords

Postpartum Psychosis, Cultural Psychiatry, Traditional Healing, Insight, African Culture, Spiritual Reconciliation, Togo, Idioms of Distress, Maternal Mental Health

## 1. Introduction

In Togo, tradition and modernity coexist, with conventional medicine and traditional healing practices playing integral roles in health care. Many people continue to rely on traditional healers and “Traditherapy” for treatment, particularly when illnesses are perceived as spiritual or moral in origin. When a new illness emerges, it is often interpreted as punishment for wrongdoing, a spiritual calling, or an alert to address an underlying issue before it worsens. As psychologists and community members, practitioners are frequently confronted with cases where symptoms align with diagnoses outlined in the DSM-5-TR and can be effectively treated using conventional methods. However, respecting the client’s cultural preferences and practices is essential.

Kafui’s case illustrates the intersection of conventional and traditional ap-

proaches. It raises critical questions: Are all cases effectively treated with conventional medicine, or is traditional treatment sometimes necessary? Postpartum psychosis, a rare but severe psychiatric condition, provides a compelling example of this complexity. Its manifestation and interpretation can vary significantly across cultural settings, influenced by local beliefs, practices, and spiritual frameworks.

This case study explores the culturally sensitive therapeutic management of Kafui, a 28-year-old woman from a rural Togolese community who experienced postpartum psychosis. It emphasizes the importance of integrating cultural perspectives into mental health care, highlighting how cultural idioms of distress and traditional healing practices can complement conventional treatment to foster resolution and reintegration. By examining Kafui's journey, this case underscores the value of cultural insight in addressing psychiatric symptoms and promoting recovery. Through this exploration, we aim to illuminate the critical role of culturally informed care in enhancing therapeutic outcomes and fostering holistic well-being.

## **2. Presentation of the Psychopathological Problem**

### **2.1. Presentation of Psychopathology and Problem**

Postpartum psychosis is a severe mental health condition characterized by the sudden onset of psychotic symptoms in the postpartum period. These symptoms may include hallucinations, delusions, mood swings, and disorganized behavior, posing significant risks to both the mother and her child (Brockington, 2004). Despite its rarity, with an incidence of 1 - 2 per 1000 births, postpartum psychosis is considered a psychiatric emergency due to its association with maternal morbidity and infanticide (Oates, 2003).

In culturally diverse contexts, the presentation and interpretation of postpartum psychosis can be influenced by cultural beliefs and practices. This variability presents a challenge for mental health professionals who must navigate cultural nuances while ensuring accurate diagnosis and effective treatment (Tseng & Streltzer, 2008). For individuals from collectivist cultures, like Kafui, a Togolese woman, the stigma surrounding mental health issues may hinder timely intervention, emphasizing the need for culturally sensitive care (Cooper & Nicholas, 2017).

### **2.2. The Problem**

The primary issue highlighted in this case is the lack of integration of cultural perspectives in mental health care. While clinical interventions focus on symptom management, they often overlook cultural and spiritual dimensions that shape an individual's experience of illness. This gap can lead to misdiagnosis, inadequate treatment, and poor outcomes, particularly for individuals from marginalized or culturally diverse backgrounds (Patel & Prince, 2010).

## **3. Case Description**

### **3.1. Context**

Togo, a small West African nation, faces a complex mix of economic opportuni-

ties and challenges influenced by its geography, resources, and socio-political context. The country's economy is predominantly reliant on agriculture, with key exports including cotton, coffee, and cocoa. Subsistence farming serves as the primary livelihood for most Togolese people, but the sector remains vulnerable to climate variability, limited infrastructure, and insufficient access to modern farming techniques (World Bank, 2022).

Situated along the Gulf of Guinea, Togo is bordered by Benin to the east, Ghana to the west, Burkina Faso to the north, and the Atlantic Ocean to the south. Its tropical climate supports agriculture, which dominates the local economy. In rural regions, animism remains the predominant religion, deeply influencing cultural practices and perspectives.

Togo benefits from its strategic location as a regional trade hub. The Port of Lomé, one of the few deep-water ports in West Africa, plays a crucial role in facilitating trade and economic connectivity across the region (African Development Bank, 2020). Additionally, as a member of the West African Economic and Monetary Union (WAEMU), Togo enjoys economic integration and monetary stability through the CFA franc. Despite these advantages, the nation continues to grapple with high poverty rates, unemployment, and income inequality (International Monetary Fund, 2023).

While the industrial sector is gradually expanding, it remains underdeveloped, and the service sector is largely concentrated in urban areas, creating a pronounced urban-rural divide. Structural challenges such as inadequate infrastructure, limited access to education, and insufficient healthcare services further hinder economic progress and exacerbate inequalities (United Nations Development Programme, 2021).

Efforts to address these challenges include government-led reforms aimed at attracting foreign investment, fostering entrepreneurship, and diversifying the economy. However, sustainable growth and equitable development require complementary investments in social services, capacity building, and inclusive policies (OECD, 2022).

Despite an economic growth, Togo continues to face significant poverty, particularly in rural areas such as Tchékpo-Dédékpoé. Poverty exacerbates social issues, including high maternal and infant mortality rates, with limited access to healthcare and resources contributing to these challenges. Addressing these systemic issues requires targeted interventions that integrate economic development with social support initiatives.

This case study focuses on Tchékpo-Dédékpoé, a village in the Yoto borough in southeastern Togo, highlighting the unique socio-economic dynamics and the pressing need for inclusive development strategies.

## 3.2. Presentation of case

### Patient Profile

Kafui, a 28-year-old woman from a polygamous family in rural Togo, is the

eldest of eight siblings. Her father, a traditional priest and farmer, has 27 children from five wives. Raised in a community deeply rooted in African traditions, Kafui's upbringing was shaped by the cultural and spiritual practices of her family, including a strong belief in Vodou. After discontinuing formal education due to academic challenges, Kafui pursued vocational training in tailoring. At 21, she migrated to Benin for economic opportunities, where she met Zinsou, a 55-year-old businessman seeking a Togolese partner. Despite favorable living conditions, Kafui's relationship with Zinsou became complicated when she engaged in a parallel relationship with Kofi, a Ghanaian coworker.

### **Pregnancy and Prenatal Distress**

During her pregnancy, Kafui exhibited significant behavioral changes, including withdrawal, irritability, and severe sleep disturbances. Her symptoms included hyperemesis gravidarum and phobias, such as fear of darkness and insects, which escalated in the later stages of her pregnancy. In African cultural contexts, such symptoms are often viewed as indicative of spiritual disturbances or interpersonal conflicts, aligning with beliefs in the interconnectedness of physical and spiritual well-being (Mbiti, 1991).

### **Postpartum Onset of Psychosis**

Three months postpartum, Kafui experienced an acute psychotic episode. She displayed disorganized behavior (e.g., singing, crying, and stripping naked), delusions about her child's paternity, and aggression, including an attempt to harm her child. Her family sought treatment at a psychiatry hospital, but during the admission process, the chief of Kafui's family—a 70-year-old man—requested discharge against medical advice. He explained that her condition was not a matter for "European or conventional medicine". Instead, he attributed the psychosis to spiritual causes, believing it could be treated traditionally.

The chief stated that no one in their family had ever exhibited symptoms of psychosis, especially women, which led him to suspect a spiritual cause. He consulted the spirits of their ancestors and was told that Kafui might need to confess to a wrongdoing to be healed. He instructed the medical team not to administer any injections, warning that it could complicate her healing process. Kafui was discharged against medical advice, with the family agreeing to return if her condition failed to improve or to share the results of traditional interventions.

### **Traditional Beliefs and Vodou Practices**

Kafui's family members practice traditional religion, specifically Vodou, which emphasizes the spiritual origins of illnesses. In Vodou and many African belief systems, mental illness is often viewed as a disruption of the individual's spirit or ego, caused by interpersonal transgressions, curses, or ancestral displeasure (Augé, 1999). The family believed that Kafui's condition reflected spiritual disorganization stemming from her relationship with Zinsou and Kofi. This disorganization, they asserted, served as a call for restitution and reconciliation.

According to Vodou practices, mental illness can signal that an individual has offended spiritual forces or violated community norms. Such offenses may result

in a spell or curse designed to restore balance through public acknowledgment and atonement (Génilo, 2018). Kafui's behaviors were interpreted as a sign that she needed to address a wrongdoing to achieve healing. Consequently, the family turned to traditional healers in her village for treatment.

#### **Cultural Idioms of Distress**

In Kafui's community, mental health symptoms are often expressed and understood through cultural idioms of distress. These idioms include the concept of "gbɔgbɔnu", which in Ewe culture refers to spiritual imbalance or disorganization, often believed to stem from interpersonal conflict, transgressions, or spiritual retribution. This term aligns with Kafui's family's interpretation of her condition as a result of spiritual or moral wrongdoing.

Another relevant idiom is the belief in "tsɔ̀dɛkpɔ̀", meaning "ancestral punishment", where a disruption in one's mental or physical health is attributed to angered spirits of the ancestors, requiring confession and rituals to restore harmony. These beliefs highlight the interconnectedness of individual behavior, social relationships, and spiritual forces in interpreting illness (Kohrt & Hruschka, 2010b; Mbiti, 1991).

In Kafui's case, her symptoms were attributed to a curse placed by Zinsou, reflecting local interpretations that interpersonal betrayal or conflict can result in spiritual retribution. Such idioms provide insight into how mental health symptoms are contextualized within the broader framework of cultural and spiritual beliefs in her community (Ngubane, 1977).

### **4. Cultural Therapy and Intervention**

**Traditional Healing Practices** Kafui's treatment began with consultations with a diviner who used traditional methods, such as scarifications, divination, and the Fa system, to identify the source of her illness. The diviner confirmed that Zinsou's anger and spiritual actions caused Kafui's psychosis.

**Restorative Rituals** To resolve the conflict, Kafui's family negotiated with Zinsou, who demanded compensation of 800,000 CFA francs (~\$1300 USD). Following this, a purification ritual involving herbal potions and spiritual cleansing was conducted. Kafui's symptoms improved rapidly within three days of using the prescribed potion during her baths.

**Resolution and Reintegration** After the family repaid the demanded sum, a liberation ceremony lifted the spiritual burden. Kafui's symptoms resolved completely, enabling her to relocate to Côte d'Ivoire, where she remarried and had three additional children.

### **5. Cultural Insight and Recovery Process**

**Cultural Identity and Therapeutic Integration** Ignoring a patient's cultural background equates to disregarding their individual identity. In African contexts, behavioral disorders are often interpreted through spiritual frameworks emphasizing the union of body and spirit. Traditional healing practices, such as divination,

aim to uncover the root cause of illness and restore harmony.

Role of Insight in Recovery Insight, as defined by [Wolfgang Köhler \(1927\)](#), involves the reorganization of problem elements to resolve inner conflicts. In Kafui's case, recounting her experiences during traditional therapy served as a pivotal moment of discernment, reorganizing her psychological and spiritual tensions. This process aligns with [Hermine von Hug-Hellmuth's \(1921\)](#) emphasis on externalizing unresolved issues in therapeutic settings.

Reparative Actions and Cultural Narratives Kafui's recovery involved acknowledging personal responsibility and participating in reparative actions, including purification rituals. [Najib Djawiri's \(2013\)](#) research highlights how cultural narratives provide frameworks for understanding mental health, often framing the mother as less culpable. The spiritual dimension of Kafui's illness offered a culturally acceptable explanation for her symptoms, fostering communal support and facilitating her reintegration into social and familial roles.

### Case Summary and Intervention

Kafui's postpartum psychosis manifested as delusions involving ancestral spirits, which she attributed to unresolved family disputes. Her belief system, rooted in traditional Ghanaian culture, complicated her acceptance of conventional psychiatric care. Through a culturally sensitive approach, the treatment team combined psychopharmacology with spiritual reconciliation and counseling. This holistic intervention facilitated Kafui's recovery by addressing both her psychological symptoms and her cultural and spiritual needs.

The successful resolution of Kafui's case underscores the importance of integrating cultural perspectives into mental health care. Studies highlight that culturally tailored interventions enhance therapeutic alliances and improve patient outcomes ([Tseng & Streltzer, 2008](#)). By validating Kafui's cultural beliefs and involving traditional healers, the treatment team demonstrated how culturally informed care can bridge the gap between traditional practices and modern psychiatry ([Cooper & Nicholas, 2017](#)).

## 6. Conceptual and Theoretical Frameworks

This case study on Kafui's treatment for postpartum psychosis highlights several conceptual and theoretical frameworks, particularly in the areas of cultural psychiatry, therapeutic interventions, and psychological processes.

### 6.1. Cultural Psychiatry and Idioms of Distress

- **Cultural Interpretations of Mental Health:** Kafui's symptoms were viewed through a cultural lens, where psychiatric disorders were often interpreted as manifestations of spiritual or moral issues. The attribution of her condition to a "curse" placed by Zinsou is an example of how culture influences the understanding and expression of mental health. This ties into [Kohrt and Hruschka's \(2010a\)](#) work, which emphasizes that cultural beliefs and local idioms of dis-

tress significantly shape the diagnosis and treatment of mental health conditions.

- **Cultural Idioms of Expression:** Kafui's delusions and fears, such as the belief that her child had two fathers, reflect the cultural narratives of betrayal, guilt, and spiritual imbalance. These idioms provide a culturally specific framework for expressing and understanding psychological distress. [Hinton & Lewis-Fernández \(2010\)](#) explore how culturally specific expressions of distress are crucial in addressing mental health issues within specific cultural contexts.

## 6.2. Integration of Traditional Healing Practices

- **Traditional Healing:**

The involvement of traditional healers in Kafui's treatment highlights the significance of culturally relevant healing practices. [Djawiri's \(2013\)](#) work on cultural metaphors around illness in African contexts suggests that traditional healing practices often frame the individual as a participant in the community's spiritual life. In Kafui's case, rituals such as divination, scarification, and purification were central to resolving her psychosis. These methods not only addressed the symptoms but also the spiritual and social dimensions of her illness, illustrating the need for culturally grounded interventions in treating mental health disorders.

- **Restorative Rituals:**

The family's role in resolving the interpersonal conflict with Zinsou and the subsequent purification rituals were essential for Kafui's healing. These rituals provided a sense of closure and spiritual healing, facilitating her emotional and psychological recovery. [Ngoma et al. \(2003\)](#) have documented similar practices in other African cultures, where traditional healing helps restore balance between the individual and the community.

## 6.3. Psychological Concepts of Insight and Conflict Resolution

- **Insight in Therapy:**

Kafui's recovery also reflects Wolfgang [Köhler's \(1927\)](#) concept of insight, which involves reorganizing problem elements to achieve a new understanding of the situation. In Kafui's case, this occurred when she acknowledged her responsibility in the conflict with Zinsou and participated in the reconciliation process. This insight led to psychological and spiritual reorganization, marking the resolution of her inner conflicts.

- **Reconciliation and Emotional Closure:**

The confession and reconciliation process also aligns with [Hermine von Hug-Hellmuth's \(1921\)](#) emphasis on externalizing unresolved issues in therapy. By addressing her personal guilt and reconciling with the spiritual and social causes of her distress, Kafui experienced emotional closure, which contributed to her recovery.

## 6.4. Cultural Identity and Healing

- **Cultural Identity:**

The concept of cultural identity plays a critical role in understanding how Kafui's mental health was influenced by her social and cultural environment. Tison (2007) and Kaufman (2004) suggest that a blend of cultural references shapes an individual's identity, and addressing these in therapy is essential for holistic healing. In Kafui's case, traditional healing practices were deeply embedded in her cultural identity and provided a path to reintegration into her community.

- **Spiritual Reconciliation:**

Integrating traditional spiritual practices with psychological principles highlights the importance of acknowledging cultural identity in therapeutic settings. The resolution of Kafui's postpartum psychosis was achieved not only through biomedical understanding but also through spiritual reconciliation, emphasizing the role of cultural practices in mental health care.

### 6.5. Cultural Sensitivity in Global Mental Health

- **Culturally Sensitive Approaches:**

The case emphasizes the need for integrating cultural understanding into psychiatric care. Kirmayer et al. (2011) argue for the importance of combining cultural and biomedical practices in global mental health to address the diverse needs of patients across different cultural contexts. The success of Kafui's treatment demonstrates the potential for synergy between these two approaches, leading to more effective mental health care that is sensitive to cultural beliefs and practices.

As a practitioner of conventional medicine, Kafui's parents expressed their preference for treatment rooted in their cultural beliefs and the local representation of puerperal psychosis. As a psychologist, it is essential to respect the client's preferences while balancing evidence-based approaches with cultural sensitivity. Drawing on the concepts of cultural expressions and idioms of distress, the goal was to integrate culturally relevant practices into the treatment plan.

In Togo, the cultural representation of mental illness remains significant, with many people attributing such conditions to spiritual actions or supernatural forces. Mental illness is often perceived as an opportunity to repent for past wrongdoings or to repair imbalances in spiritual or social harmony. These cultural interpretations influence help-seeking behavior, often leading individuals and families to consult traditional healers or spiritual leaders as part of their therapeutic journey (White, 2015; Mullet et al., 2016).

Ethical practice in psychology emphasizes respecting client preferences, particularly when these preferences are rooted in cultural or religious beliefs (American Psychological Association, 2017). In African contexts like Togo, mental health practitioners must navigate the intersection of conventional medicine and traditional healing systems, ensuring that treatment approaches honor the client's cultural background while addressing their psychological needs (Patel et al., 2018).

The cultural idioms of distress in Togo highlight the importance of understanding how mental illnesses are perceived and experienced within the community. For example, postpartum psychosis may be seen not only as a medical condition

but also as a spiritual signal requiring reconciliation with cultural norms or spiritual practices. Such perspectives necessitate a collaborative approach that integrates conventional psychological interventions with culturally relevant practices, ensuring holistic and effective care (Kirmayer & Swartz, 2013).

By respecting Kafui's family's cultural preferences and understanding the broader societal context, the treatment approach aimed to bridge the gap between conventional medicine and traditional practices. This underscores the importance of culturally informed care in fostering trust, improving therapeutic outcomes, and promoting mental health awareness within diverse communities.

This case study underscores the importance of cultural sensitivity in the diagnosis and treatment of mental health conditions, particularly postpartum psychosis. The integration of traditional healing practices, psychological insights, and cultural identity provides a comprehensive framework for addressing mental health in culturally diverse contexts.

## 7. Conclusion

Kafui's case underscores the importance of integrating cultural perspectives into therapeutic interventions for mental health conditions. The successful resolution of her postpartum psychosis highlights the interplay between cultural identity, spiritual reconciliation, and psychological insight, offering valuable lessons for culturally sensitive psychiatric care.

Kafui's case emphasizes the necessity of culturally sensitive approaches in psychiatric care, particularly for conditions like postpartum psychosis. This case highlights the interplay between cultural identity, spiritual reconciliation, and psychological insight, offering valuable lessons for global mental health practices. As Patel and Prince (2010) suggest, integrating traditional healing practices with clinical care can provide a comprehensive framework for addressing mental health in culturally diverse populations.

## Declaration of Generative AI and AI-Assisted Technologies in the Writing Process

During the preparation of this work, the author, Kodjo Anahlui, used ChatGPT to improve the writing. After using this tool to correct this article, I, Kodjo Anahlui, reviewed and edited the content as needed and took full responsibility for the publication's content.

## Conflicts of Interest

The authors declare no conflicts of interest related to the content of this article.

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