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東亞跨文化精神病理研究—
東亞青少年心理健康指標之跨文化比較研究(1/2)

A Comparative Study on Adolescent Mental Health Index in East Asia

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主持人：宋維村 國立台灣大學醫學院精神科

中文摘要

以台、日、韓三國研究人員共同編製的青少年心理衛生指標 (Adolescent Mental Health Index, 簡稱 AMHI) 施行於大一學生：台 954 人，日 1404 人，韓 1019 人。比較 AMHI 之精神病理總量表與 5 個分量表得分，發現台灣樣本之得分均最高，日本樣本在總量表及三個分量表之得分最低，而韓樣本在二個分量表之得分最低。進一步分析發現台灣樣本之填答方式，在 0~3 分之選項中，較少勾選「0」這一選項，是造成精神病理平均分數偏高的原因。此一選答之文化趨勢差異值得進一步探討。

在中學生樣本之研究中，由於日本樣本之資料收集較晚，來不及進行跨國比較。台灣共從 5 所國中收集 3542 份有效樣本資料。先分析台灣樣本之價值觀與精神病理之關係，發現六型價值取向的少年之精神病理得分差異，以個人主義取向型得分最高，傳統取向型之得分最低，其他四型介於二者之間。

關鍵詞：青少年、心理健康指標、價值取向、台日韓比較研究

A. Abstract

Adolescent Mental Health Index (AMHI) was jointly developed by Taiwanese, Japanese and Korean psychiatrists. 954, 1404 and 1019 freshmen from Taipei, Tokyo, and Seoul, respectively, returned valid AMHI for comparison. The study revealed that on the AMHI

Psychopathology section Taiwanese scored highest in the full scale and all 5 subscales, the Japanese scored lowest in the full scale and the Affective, the Neurotic, and the Somatic subscales, the Korean scored lowest in the Psychotic and the Externalizing subscales. Further analysis revealed that among 0~3 Likard scale the Taiwanese respondents less frequently select "0" than freshmen in other two nations. The cross-cultural difference in response selection needs further study.

Cross-national comparisons on junior high school sample will be done after the completion of Japanese data collection. 3542 valid AMHI samples were collected from 5 junior high schools in Greater Taipei and Tainan. A preliminary analysis of the Taiwanese data on value-orientation and psychopathology was performed. It revealed that the Individualistic type has highest psychopathology score and the traditionalistic type has lowest score. The other four types score in between them.

Keyword : adolescent mental health index, value orientation, Taiwan-Japan-Korea comparison

B. Introduction and Objectives

Cross-cultural comparison of psychopathology has long been the focus of social-cultural science researchers. To make the comparison more meaningful, psychiatrists interested in adolescent mental health from Japan, Korea and Taiwan worked together to develop AMHI for use in the 3 nations to collect data for cross-

cultural comparison. The objective is to compare psychopathology among adolescents in the 3 nations.

C. Results and Discussions

1. The freshmen study

The subject of the 1st study consisted of freshmen of average universities in or near the capital of the three nations. The data were collected one month after the respondents had entered university, being April 1998 in Japan and Korea and October 1998 in Taiwan. The Japanese sample was from the departments of literature, law and economics of two private universities. The Korean subjects were from departments of literature, science, and engineering of four universities. While the Taiwanese sample was composed of students of law, literature, foreign languages, business administration, social science and science of a private university.

This is the first study to collect data with same protocol on adolescents in Japan, Korea and Taiwan. The psychopathology questionnaire was developed in Korea, translated into English, and finally translated into Japanese and Chinese, respectively. The double translation may create trivial, if not major, differences in the semantics of the questionnaire among the three versions. These differences may contribute partly to the differences observed in this study. The back translation of the Japanese and the Taiwanese AMHI into Korean could have been done to ensure the exactness of the meaning of each item in all three versions.

The observed cross-national differences in the Psychopathology full scale and its subscales deserve further discussion. In the epidemiological studies of adulthood mental disorders with the Diagnostic Interview Schedule (DIS), the Seoul study [1] reported higher life prevalence rates for major depression, dysthymic disorder, panic disorder, phobic disorder, and obsessive compulsive disorder than those of the Taiwan study [2]. The two studies also

For the purpose of comparison, only those aged 20 years or younger were included in the analysis. The sample size was 1404, 1019 and 954 for Japan, Korea, and Taiwan, respectively.

Table 1 shows the means and the standard deviations of AMHI Psychopathology full scale and 5 subscales of the three samples. ANOVA was used to test the significance of difference. A significant difference was followed by post hoc comparison between two samples. The most striking feature of this table is the consistently highest mean scores in the full scale and all the subscales of the Taiwanese. The Korean was the lowest in Psychotic subscale and Externalizing subscale; while the Japanese had the lowest mean scores in the full scale and the Affective and the Somatic subscales. In the Neurotic subscale, the difference between Korean and Japanese mean scores did not reach statistical significance.

revealed higher life prevalence rate for generalized anxiety disorder in Taiwan and same prevalence rate for somatization disorder. The higher Neurotic score in the Taiwanese in the current study is in keeping with the findings of the adult studies. But the higher Affective and Somatic scores in the Taiwanese in the current study is different from the adult studies.

A higher mean score does not necessarily mean higher illness prevalence rate. There are two ways to examine this issue. One is to sort out the number of persons with moderate or severe (scored 2 or 3) symptoms, and to compare the rate with moderate-severe symptoms across three samples. The other is to do a validity study on AMHI by interviewing a subsample of both high and low scorers with a standardized interview schedule, e.g., DIS or SCID or SADS. The former is done. It revealed that the Taiwanese respondents scored less frequently on "0"(nil) and "3"(severe), but more frequently on "2"(moderate). This may reflect a cultural difference in response and needs further

study.

2. The Junior-High Students Study

For the Japanese junior-high student study was complete in September 1999, the 3-nation comparison is not done while preparing this report. A preliminary analysis on parts of the Taiwanese data was performed and reported here.

A total of 3542 valid AMHI from 5 schools were collected. Factor analysis was performed on the Value-Orientation Scale. Two factors, named Individualism and Traditionalism, were extracted. The orthogonal relationship of the two factors (figure1) makes it possible to classify the value-orientation into 6 types (figure 2). Comparison of the psychopathology total score means of the 6 value-orientation types were done.

Tables 2 shows the mean(SD) of the psychopathology total score of the 6 value-orientation types. The means are highest in Individualistic type, 47.14(23.69), followed by Confused type 39.68(22.18), Alienated type 36.97(23.05), Mid-range type 34.26(21.05), Balanced type 33.66(19.52), and lowest in Traditionalistic type, 27.06(20.02). The 6 means are not all equal (ANOVA F=32.88, p<.0001).

Scheffe test revealed I > C, A, M, B, >T. Nearly identical results were found in the 6 psychopathology subscale

Table 1. Comparisons of psychopathology in Japan, Korea and Taiwan.

	Japan (N=1404)	Korea (N=1019)	Taiwan (N=952)
Affective	.75±.58	.80±.54	.90±.55
Neurotic	.56±.49	.59±.45	.78±.44
Psychotic	.41±.43	.34±.43	.53±.44
Somatic	.35±.51	.55±.59	.63±.55
Externalizing	.49±.48	.45±.42	.69±.44
Full scale	.51±.42	.55±.41	.70±.43

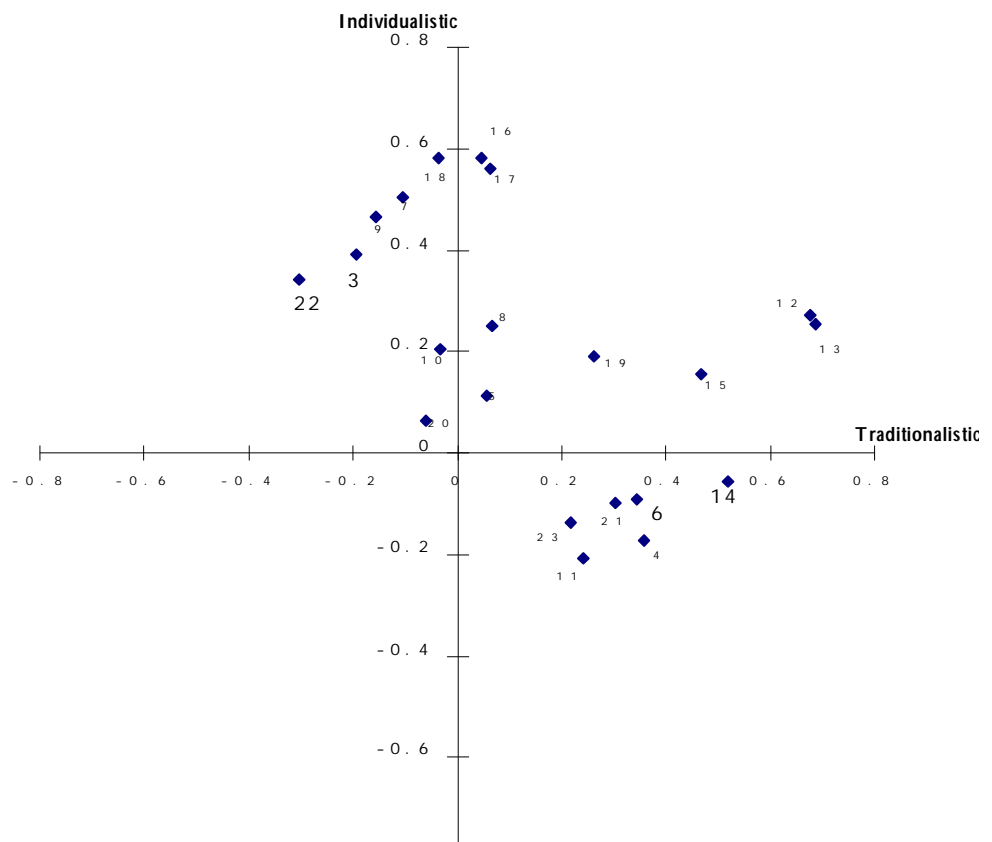
*p<.05 **p<.01 ***p<.001
Abbreviations: T = Taiwan, K = Korea

Table2. Value orientation and psych

Value orientation	N	Mean (sd)	Statistics
Individualistic	394	47.14 (23.69)	ANOVA
Confused	128	39.68 (22.18)	F=32.88***
Alienated	118	36.97 (23.05)	P < .0001
Mid-range	1364	34.26 (21.05)	Post-hoc Scheffe [§]
Balanced	1415	33.66 (19.52)	I > C, A, M, B, >T
Traditional	123	27.06 (20.02)	

§ : Scheffe significance level =.05
I : Individualistic. C: Confused. A: Alienated.
M : Mid-range B: Balanced T: Traditional.

This study revealed a robotic psychopathology profile among the 6 value-orientation types, i.e., the Individualistic types has the highest psychopathology score, the Traditionalistic type has the lowest psychopathology scores, and the other 4 types fall in between. Taiwan is a rapid changing society. However the emphasize in academic achievement orientation family responsibility, filial piety, and other traditional value is still a common practice that makes the Individualists receive more strain in school. Hence, may precipitate



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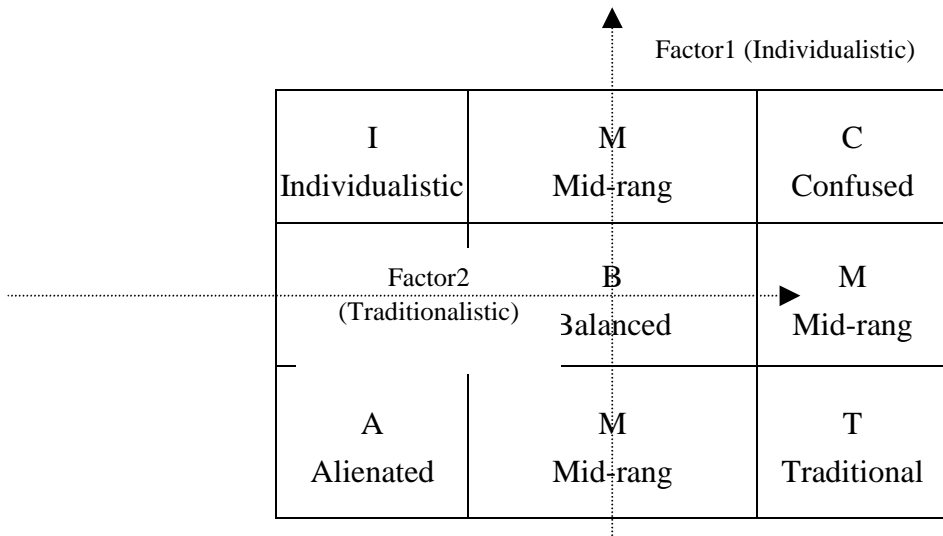


Figure 2. Value-Orientation Types