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Panel Proposal

Panel organizer: **Paola Cavaliere, University of Milan**

Chair: Paola Cavaliere

Panelists

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Title: Cultural and Practical Pathways to Wellbeing: Care, Narrative, and Non-Clinical Responses to Distress in Asia

Panel abstract

This panel brings together five interdisciplinary contributions that examine how wellbeing, resilience, and recovery are conceptualised and pursued through culturally situated pathways that operate outside conventional biomedical frameworks, enabling forms of local resilience under conditions of socioeconomic, political, and environmental fragility. Focusing primarily on Japan, with comparative and regional perspectives from East and Southeast Asia, the papers explore emotional care (*kokoro no kea*), disaster storytelling (*kataribe*), community-based arts therapies, philosophical conceptualisations of health and illness, and applied models of community health and empowerment. The first paper examines Japanese women's engagement with *kokoro no kea*, meditation, yoga, and holistic spirituality as non-pathologising coping strategies and gaps in health access shaped by gender norms, caregiving burdens, and dissatisfaction with institutional care. The second paper analyses *kataribe* storytelling in post-disaster Japan as a form of narrative exposure that supports trauma processing, identity reconstruction, and community resilience. The third contribution investigates arts therapy initiatives in Japan, highlighting how creative and embodied practices foster wellbeing, social cohesion, and culturally sensitive forms of care beyond clinical settings. The fourth paper offers a comparative conceptual framework, contrasting Chinese and Japanese attitudes to Western understandings of health and illness, revealing differing assumptions about wellbeing in our daily lives, purity, and the boundaries of body and self. The final paper extends the discussion to Southeast Asia, analysing MedAcross's community-based health interventions in Myanmar and Thailand as integrated models linking healthcare provision, women's empowerment, and local resilience in contexts of political and environmental fragility. Taken together, the panel advances a critical reflection on care as a cultural, social, and ethical practice. It demonstrates how non-clinical approaches expand existing health ecologies, offering inclusive and context-sensitive responses to distress in contemporary Japan and Asia.

Keywords: Health and illness; body and wellbeing; psychosocial care; *kokoro no kea*; *kataribe*; arts therapies; community-based responses

Individual abstracts

1. Paola Cavaliere, University of Milan

***Kokoro no Kea* and Spiritual Coping: Women's Wellbeing Strategies in Contemporary Japan**

A growing body of research shows that religiosity and spirituality contribute to the development of coping strategies and resilience in managing stress. This study presents the results of an ethnographic investigation carried out between 2020 and 2024 with thirty-two Japanese women engaged in holistic spiritual practices such as meditation and yoga, including both members of religious organizations and non-affiliated participants. Using a descriptive phenomenological approach, the study examines the relationship between socioeconomic status (SES), biographical experiences, and the adoption of religious and spiritual coping strategies. Findings indicate a rising preference for holistic spiritual practices even among women affiliated with religious communities. Central to this trend is *kokoro no kea*, a form of “emotional care” offered by Buddhist temple monks and by professionals with a religious background known as *rinshō shūkyōshi*. In a context where formal psychological services often medicalize anxiety, depression, and emotional distress, *kokoro no kea* is experienced as a non-pathologizing form of support, perceived as more closely aligned with the participants' identity-related, spiritual, and everyday needs. This preference also responds to pressures faced by women arising from economic precarity, increased caregiving responsibilities, and the associated emotional burden. Among religiously affiliated women aged 25–40, it further reflects growing dissatisfaction with traditional gender norms and the emphasis on family devotion promoted by many religious institutions. Overall, the spread of *kokoro no kea* emerges as a form of female resistance to the structures of the “care economy” and as a process of redefining wellbeing in contemporary Japan.

Keywords: *Kokoro no kea*; gender; spirituality; Japanese religions; intersectionality

2. Veronica De Pieri, University of Bologna

***Kataribe*: Storytelling as a Form of Narrative Exposure Therapy in the Wake of Disaster**

The study focuses on the figure of the *kataribe* (storyteller-witness), who has historically played a central role in Japan's post-disaster reconstruction planning. These figures are recruited voluntarily through bottom-up activities by local groups and associations, and serve multiple purposes: (1) Revitalise the area through events, workshops, and exhibitions on local history, encouraging tourism in the region; (2) Contribute to the creation of an archival repository based on testimonial accounts; (3) Perform a pedagogical-educational function in the field of DRR.

Notwithstanding, little research has been done on the relationship between *kataribe* and their role as storytellers and guides for listeners at disaster sites or memorials. These activities, repeated over time, constitute a form of Narrative Exposure Therapy (NET), which, based on the principles of exposure therapy used in cognitive-behavioural psychotherapy, exposes the *kataribe* to

habituation, thereby reducing dysfunctional emotional responses. The witness's activity can actively contribute to the reworking of traumatic memories associated with the event and promote the coherent reconstruction of one's own experience, leading to post-traumatic growth (PTG).

The study aims to explore two case studies of community-led initiatives that focus on the activities of *kataribe*, specifically the *Tomioka Fukushima* *kataribe* and *RE: Project tsūshin* of the Sendai Cultural Foundation, both of which emerged after the triple disaster in Tōhoku, Japan. In doing so, the research adopts an interdisciplinary approach to investigate the activities of *kataribe* from the perspectives of NET (Neuner, Schauer, Elbert, & Roth, 2002), testimonial therapy (Lira & Weinstein, 1983), and the possible implications of post-traumatic growth (Tedeschi et al., 2018). The ultimate goal is to demonstrate how testimonial activity is not only a form of empowerment for individuals that contributes to post-disaster community reconstruction, but also, and above all, it enables therapeutic outcomes and enhances mental well-being through the verbalisation of psychological trauma, reconstructing the fragmented identity of survivors, and acquiring new awareness of their value and role within the local community.

Keywords: *Kataribe*; NTW (narrative-exposure therapy); Post-Traumatic Growth (PTG); community-based disaster responses

3. Sofia Rossatelli, University of Milan

Art Therapy in Japan: Promoting Resilience and Wellbeing through Community-Based and Culturally Rooted Practices

In contemporary Japan, mental health has become one of the most pressing social concerns. Anxiety, depression, and various forms of psychosocial distress affect a growing number of people within a cultural environment that often silences suffering and places strong emphasis on self-control. Although the healthcare and social welfare system is highly developed, it continues to struggle with complex forms of distress deeply embedded in everyday social relations. Against this backdrop, non-pharmacological approaches capable of restoring a more human, holistic, and community-oriented dimension to care are attracting increasing interest.

Among these approaches, the arts therapies stand out for their capacity to integrate the aesthetic, bodily, and relational dimensions of health. Artistic practices – including music, movement, visual arts, and collaborative creation – play a central role in supporting emotional control, identity reconstruction, social cohesion, and active participation, fostering forms of well-being that are both sustainable and culturally sensitive. Nevertheless, dedicated arts therapy centres offering high-quality and coherent programmes remain limited and unevenly distributed across Japan, reflecting a field that is still in the process of consolidation, while seeking broader institutional recognition.

Within this landscape, the experience of the centre known as *momo* (Music, Outsider Art, Movement, Open Studio) in Kyoto, alongside other emerging initiatives across the country, offers a significant example of innovation. By integrating multiple arts-therapeutic disciplines, *momo* provides accessible, non-clinical spaces in which artistic practice becomes a means of expression, self-construction, and the reweaving of community bonds. The centre has also contributed to the development of the Integrated Arts Therapy Evaluation Framework (IATEF), an interdisciplinary methodological tool designed to document engagement, creativity, and psychosomatic well-being without reducing these processes to overly clinical parameters.

Beyond methodological advancement, this work invites a broader understanding of care as a social and cultural practice. In a Japan marked by widespread psychological fragility, the arts therapies are increasingly recognised as a crucial resource for regenerating social bonds, promoting creativity and community cohesion, and articulating shared forms of resilience. More than therapeutic techniques, they constitute cultural processes capable of mitigating social fragmentation and strengthening collective well-being in contemporary Japan.

Keywords: Arts therapies in Japan; psychophysical well-being; community interventions; momo; IATEF

4. Galia Dor, Tel Aviv University

Conceptualizing Health and Illness: Chinese, Japanese and Western Perspectives.

The various ways in which cultures, philosophies, and medical systems conceptualize the body are deeply interconnected with fundamental questions that have occupied generations across cultures, including the mind–body problem, notions of the self, and ideas of life and death. Naturally, differing conceptualizations of health and illness constitute an inseparable dimension of these broader inquiries.

In line with the conference theme and with the aim of contributing to an interdisciplinary and transcultural discussion, my talk presents three distinct conceptualizations of health and illness: two from East Asia—Chinese and Japanese—and a third, Western perspective, offered as a point of comparison and reference. The Chinese perspective, grounded in early philosophical and medical texts, reveals a persistent concern with external threats and their potentially damaging effects. This concern underpins the need for constant safeguarding of the vital essence or energy of the body–mind. In this model, the existence of an “inside” is not taken for granted but understood as an achievement, attainable through continuous self-cultivation and preventive practices embedded in everyday life.

I then turn to the Japanese perspective, focusing on Shinto concepts of purity and impurity and the triad *ke-kegare-hare*, in which a healthy bodily state is a prerequisite for ordinary, everyday life (*ke*), regarded as the most sacred condition. Finally, I offer a cross-cultural discussion with Western thought—drawing, for example, on Lakoff and Johnson’s metaphor of the body as a “closed container bounded off from the rest of the world” (1980)—and on Western medical approaches to health. The most striking difference between Eastern and Western conceptualizations, I suggest, lies in whether the mere absence of disease can be considered proof of health.

Keywords: Body; health and illness; Chinese and Japanese philosophy and Medical Thought; Shinto; Western medicine; comparative (East-West) perspectives

5. Erika Vitale, MedAcross

MedAcross between Political Crisis, Community Health, and Rural Resilience: Integrated Models of Healthcare Provision and Community Empowerment in Southeast Asia

Southeast Asia today represents one of the most complex and dynamic contexts for analyzing the intersections between public health, socio-political transformations, and community resilience.

This paper presents the experience of *MedAcross*—a Turin-based organization chaired by Dr. Daniele Regge and one of the few Italian NGOs operating in Myanmar and Thailand—as an interdisciplinary case study that connects community-based medical care, community empowerment, and social security in fragile rural areas.

In Myanmar, in the Tanintharyi region, the political crisis following the 2021 coup has severely restricted access to healthcare services and international cooperation. In this context, MedAcross has developed a hybrid model of mobile clinics integrated with local training programs and decentralized health data management systems, ensuring continuity of care through community-based approaches and adaptive security strategies. The intervention not only addresses primary healthcare needs but also strengthens the role of women as community health workers and social mediators, contributing to local cohesion in a conflict-affected setting.

At the same time, in the provinces of Phang Nga and Ranong (Thailand), MedAcross is implementing innovative programs that integrate health, food security, and sustainable development, with a strong focus on women's economic empowerment and eco-community practices. These initiatives are grounded in collaboration among coastal communities, promoting knowledge exchange and reinforcing community ties in a region characterized by regional mobility and environmental pressures.

The analysis highlights how place-based health approaches, supported by local partnerships and gender-sensitive intercultural perspectives, can contribute to social resilience and peacebuilding in contexts marked by institutional fragility, geographic marginalization, and socio-environmental transformations. The paper offers a critical, multidisciplinary reflection on operational models of Italian development cooperation in Asia, proposing transferable insights for global health policies and practices in complex settings.

Keywords: Health cooperation; Southeast Asia; Community resilience; Gender and health; Political crisis and access to services

Presenters' bios

Paola Cavaliere, University of Milan

Paola Cavaliere is a Senior Research Fellow at the University of Milan, Department of Languages, Literatures, Cultures and Mediation. She holds a BA and MA in Japanese Language and Literature (University of Venice) and a double PhD in East Asian Studies (University of Sheffield) and Law (Tohoku University). Her academic training includes sociology and disaster studies at the University of Tokyo. Her research focuses on the intersections of critical disaster studies, gender, and religion in Japan, with particular attention to faith-based responses to crises and mental health. From 2022 to 2025, she has been part of the WHO-sponsored *EviMaPS* project on Mental Health and Psychosocial Support in disaster settings. She is the author of *Promising Practices* (Brill, 2015) and co-editor of the *Handbook of Disaster Studies in Japan* (MHM 2025; Routledge, 2026).

Galia Dor, Tel Aviv University

Galia Dor, Ph.D. is a Research Fellow in Tel Aviv University, Department of East Asian Studies and a Lecturer in Tel Hai college, Department of East Asian Studies. She has received her M.A. and Ph.D. in East Asian studies and Philosophy from Tel Aviv university; previous to her studies in the humanities, she had earned degrees in the life sciences (M.Sc.) and a diploma in Chinese medicine (TCM Diploma). Her main research interest is the philosophy and manifestation of emptiness and spaces of in-betweenness (*jian/ma 間*) in the philosophy, medical

thought and arts of Chinese and Japanese cultures; her research is characterized by a comparative, crosscultural, interdisciplinary and intradisciplinary point of view. She is the author of *Unlocking the Chinese gate: Manifestations of the Space In-Between in Early Chinese Thought* (Suny Press, 2024), which constitutes a treatise on the Chinese gate from several perspectives—philosophy, medical thought, architecture and art, eschatology and psychology.

Sofia Rossatelli, University of Milan

Sofia Rossatelli is a Postdoctoral Research Fellow at the University of Milan, Department of Languages, Literatures, Cultures and Mediation. She holds a Bachelor's and a Master's degree in Linguistic and Intercultural Mediation (Arabic and Japanese) and a PhD in Japanese Language and Culture. Her academic background also includes training in music and psychological sciences. Her main research explores arts therapies and psychosocial methodologies in contemporary Japanese sociocultural contexts, addressing non-pharmacological approaches to mental health and the relationship between creativity, well-being, and social participation. She conducts fieldwork primarily in Kyoto, in collaboration with local arts therapy centres.

Veronica De Pieri, University of Bologna

Veronica De Pieri is a Senior Researcher and Adjunct Professor in Japanese Literature and Culture at the Alma Mater Studiorum University of Bologna. She earned her PhD in Japanese Studies from Ca' Foscari University of Venice, focusing on contemporary Japanese literature related to post-catastrophe narratives. Her interests have focused on testimonial narrative, trauma studies, and the ethics of memory since 2011, with a comparative perspective (Holocaust literature, atomic bombing literature, 3.11 literature). She has also been trained in assessment and intervention in traumatic situations (Master's Program). De Pieri is currently an Italian translator of literary testimonies related to atomic bombing and the Fukushima disaster.

Erika Vitale, MedAcross

Erika Vitale is the Executive Director of MedAcross, an international non-profit delivering primary healthcare and community-based programs in five countries across Asia and Africa. She focuses on building multidisciplinary teams, partnerships with local authorities, and innovative models that integrate nutrition, women's empowerment, and environmental stewardship. Drawing on more than fifteen years of experience in humanitarian operations and program design in Asia, she focuses on strengthening resilient health systems in fragile and remote settings. Erika holds degrees in international science and is passionate about inclusive, locally led development.