**Anthropology 4200.001**

**Health, Healing, and Culture:**

**an Introduction to Medical Anthropology**

**Spring 2014**

**TR 9:30 – 11:00**

**ART Building 226**

**Instructor:** Doug Henry

**Office Hours:** Tues, Thurs 11:00am – 1:00pm (or by apt).

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**COURSE DESCRIPTION AND OBJECTIVES**

**Course Content**

This course is an introduction to a vast subfield within anthropology – medical anthropology. Medical anthropologists study the relationships between culture, society, disease, health, and healing, both in the US and around the world. This includes disease etiology, the experience of suffering, “ethnomedical” beliefs, “sick role” behavior, the provision of health services, so called “biocultural” aspects of disease, structural violence, and the political economy of illness. *My general teaching philosophy about all this: this is not a course about facts; it’s exposure to new ideas and to new ways of thinking. My goal is to introduce you to how interesting, relevant, and important medical anthropology is, so you’ll want to learn more.*

**Objectives – Your Development as Scholars**

***Overview***: I want you to learn how to think critically about the material that you are studying, especially what you are reading. It is not holy writ; these are ideas that can be challenged but which must be challenged thoughtfully. Your feelings matter here, but your feelings must be backed up by your thoughts. It is OK to “not like” or “like” something, that’s the beginning of being interested in an idea. But you have to make yourself go a little bit deeper and explain to yourself (and occasionally to me); WHY you like or don’t like something by creating an intellectual framework for your ideas. How does what you are reading relate to something else you have been thinking about?

**By the end of the course I expect that:**

1. Every one of **you will have participated in class** to the extent possible in a class this size. I want to hear a comment from every student at least once during class sessions and will try to find ways to make it possible for everyone to feel comfortable speaking in class. **I** will make an effort to learn everyone’s name.
2. You will have become more comfortable with reading **journal articles** for class-based reading assignments. You will **learn how to read these *actively***, asking questions and making connections to other sources of information, building on your existing knowledge.
3. You will have become **comfortable with regular writing** assignments. There will be a lot of writing in this class, and step by step assignments along the way to the final paper.

**ATTENDANCE POLICY**

**I expect you to come to every class**. Attendance will be randomly taken over the course of the semester, and then calculated as part of your participation grade. MORE IMPORTANTLY, your actual learning (what you’re paying tuition for) depends on listening to, and participating in, class discussion.

**CLASSROOM COMMUNITY**

This is a big class but I would like to be “seminar” in style (ie., incorporate discussion to the extent possible). In order for discussions to be most useful, I expect you to have completed the reading assignments BEFORE class.

**I want you to ask questions** and make comments, or email me questions (if that makes you more comfortable) which I will address at the next available class time. There is no such thing as a stupid question! (except to *NOT TO ASK one when you have it!).*

During classroom discussions, I want to get to know you, so I’ll ask you to remember as much as possible to say your name (at least for the first month or so) before you start in on your comment. Also, I would like you to TALK TO EACH OTHER – not just to me. There will be more to say on this topic as the semester proceeds.

**Cell phones, pagers, text messaging systems must have their ringers turned OFF during class. No exceptions, not even for me.**

**OTHER REQUIRED READING:**

**All articles in the syllabus are required**. They will be available through the online Blackboard Learn site for this course: <https://learn.unt.edu>

**COURSE REQUIREMENTS**

1. **30%. Weekly commentaries.** These are short (approximately 250 words) comments on two of the assigned readings for the week, due IN CLASS every Thursday as noted in the syllabus (one commentary should account for both readings). These must be typewritten and double-spaced.

*Don’t JUST write summaries of the reading!* Commentaries should be more personal and/or more analytical. If I don’t have something specific in the syllabus requested that week, here are some suggested ways of approaching this assignment:

* 1. You may “react” to the readings by writing about how you felt about them – did you agree or disagree with authors’ analysis? Explain why.
  2. Compare/ contrast these two readings with each other.
  3. Connect these two readings with previous ideas discussed in class or read about either in the course or on your own.
  4. Take some specific aspect of the articles that was of particular interest to you and explain why it was interesting to you.

1. **25% Mini-Medical Ethnography**

This assignment involves you taking on the role of a student medical anthropologist and actually doing “fieldwork” and reporting on your experience. The main goal of this exercise is to enable you to connect your fieldwork experience with some of the key concepts in medical anthropology that we’ve talked about so far in this course. You’ll have to write observational “fieldnotes” in a diary (a notebook), and turn them in as an appendix for your paper. Fieldnotes include what you observe, what people tell you, the environment- EVERYTHING. Your paper should be summary, analysis, and a documentation of the difficulties you experienced while carrying out this exercise – i.e. your “travails” experienced as a medical anthropologist. It helps to also be “reflexive:” Do you think your gender made a difference in how easy or how difficult it was for you to gather the data? Did you experience any discomfort when gathering the data? Did you become self-conscious? Did this assignment teach you anything about what it means to gather data as an anthropologist? I am absolutely fine with you guys doing this with other people from this class as part of your research population. Here are some possibilities for your ethnography project:

1. Engage in an informal conversation with someone who you know has been sick recently, preferably if and when they lived with other people in the house/ apartment. Elicit information on the medical decision-making process that was involved in the sick person’s search for therapy. Identify the patient’s therapy management group. Who all were involved in negotiating the identity of the illness? Who made the most critical treatment-related decisions? Based on the data you gather, spell out the ways in which the “micropolitics” of therapy management might have been at work in the case at hand.

2. Have a discussion with a sample of 4-5 friends about college students and how they control “sleep/ being alert.” How is the way your sample views sleep different now than it has been in the past? How do men vs. women consider sleep differently? What strategies exist to stay awake? What strategies exist to get to sleep? What considerations go into decisions about medication (including self-medication) or therapies? Is there anything within the social context or environment that shapes your sample’s sleep strategies, how they interpret sleep/ alert problems?

3. Watch a few “weight loss” TV commercials, describe them in brief, reflect on the hype surrounding such commercials, and the consequences you think these commercials have in terms of “behavioral change” among potential customers. Follow this up by going to a restaurant/ the Union, hang out there for a couple of hours, make some detailed observations about the kinds of foods people/ students/friends order/eat. Then talk to your friends, engage in an informal group discussion and/or simply “listen” to “body talk” (self-image, the gym, dieting, calories, weight watching, etc.,) among your women and men friends. What differences do you see in the ways in which men and women respond to the hype surrounding weight?

4. Interview someone who has ever consulted an “alternative” health care practitioner (someone other than an MD, a nurse, an osteopath, etc.). Ask them about their regarding their Explanatory Model for what was going on, including the reasons for the consultation, reasons for the choice of practitioner, their concepts of sickness causation, and their expectations for a treatment or cure.

Other ideas: high school/ junior high sex ed programs, dancers’ perceptions of their bodies, nudists’ perceptions of their bodies, eating disorders, refugee/ immigrant health, intimate partner violence, someone you know who’s given birth, someone you know who’s had an abortion, “pro-life” movement on campus, medical marijuana, etc.

1. **25%. Attendance and Participation**
2. **20%. Final (take home) exam**

**Plagiarism and Cheating**. The Department of Anthropology does not tolerate plagiarism,

cheating, or helping others to cheat. Plagiarism is defined as misrepresenting the work of others

(whether published or not) as your own. It may be inadvertent or intentional. Any facts,

statistics, quotations, or paraphrasing of any information that is not common knowledge, should

be cited. Students suspected of any of these will be provided the opportunity for a hearing; if

found guilty they can receive an automatic “F” in the course. In addition, I reserve the right to

pursue further disciplinary action within the UNT legal system, which may result in your

dismissal from the university. For more information on paper writing, including how to avoid

plagiarism, and how to use citations, see http://www.unt.edu/anthropology/writing.htm. For

information on the University’s policies regarding academic integrity and dishonesty, see the

UNT Center for Student Rights and Responsibilities, http://www.unt.edu/csrr/.

**DETAILED COURSE PLAN (DRAFT!):**

***Week 1. MEDICAL ANTHROPOLOGY: an Overview with Key Concepts***

**Tuesday, January 14**

Introduction to course and each other

**Thursday, January 16**

Brown, Peter, Ronald Barrett, Mark Padilla, and Erin Finley (2010). Medical Anthropology: an Introduction to the Fields. In *Understanding and Applying Medical Anthropology, 2nd edition.* Pp. 3-15. Boston: McGraw Hill.

*Weekly commentary (see above: these should be 250 words): Which “approach” in Medical Anthropology do you either identify with the most, or find the most intriguing? Why? Normally these will be due Thursday of every week, but this week you can turn them in either in class Thursday or in my office mailbox by 5pm Friday.*

***Week 2. Medical and Cultural Ecology***

**Tuesday, January 21**

McElroy, A. and P. Townsend (1996). The Ecology of Health and Disease. Chapter 1 in *Medical Anthropology in Ecological Perspective*. Pp. 1-29. Boulder, CO: Westview Press.

**Thursday, January 23**

Brown, Peter (1981). Cultural Adaptations to Endemic Malaria in Sardinia. *Medical Anthropology* 5 (3): 311-339.

Desowitz, Robert (1981). How the Wise Men Brought Malaria to Africa. Chapter 4 in *New Guinea Tapeworms and Jewish Grandmothers*. New York: W.W. Norton Press. Pp. 46-58.

**Due Thursday, January 23: Weekly reading commentary (see syllabus)**

***Week 3. “Ethnomedicine” and Illness Beliefs Cross-Culturally***

**Tuesday, January 28**

Foster, George (1988). Disease Etiologies in Non-Western Medical Systems. *In* Understanding and Applying Medical Anthropology. Peter Brown, ed. Pp. 110-117.

**Thursday, January 30**

Maupin, Jonathan, and Norbert Ross (2012) Expectations of Similarity and Cultural Difference in Conceptual Models of Illness: A comparison of medical staff and Mexican migrants. *Human Organization* 71 (3): 306-316.

Rekdal, Ole Bjorn (1999). Cross-cultural Healing in East African Ethnography. *Medical Anthropology Quarterly* 13 (4): 458-482.

**Due January 30th: Weekly reading commentary #3**

***Week 4. The “Sick Role,” Health Behavior, and Therapy Management***

**Tuesday Feb 4**

Janzen, John (1987) Therapy Management: Concept, Reality, Process. Medical Anthropology Quarterly 1 (1): 68-84..

**Thursday Feb 6**

Price, Laurie (2003). Illness Management, Social Alliance, and Cultural Identity in Quito, Ecuador. *In* Medical Pluralism in the Andes. Koss-Chioino Joan, Thomas Leatherman, and Christine Greenway, eds. Pp. 209 – 233. New York: Routledge

Press, Nancy, S. Reynolds, L. Pinsky, V. Murthy, M. Leo, and W. Burke (2005). “That’s like Chopping Off a Finger Because You’re Afraid it Might Get Broken:” Disease, and Illness in Women’s Views of Prophylactic Mastectomy. Social Science and Medicine 61 (5): 1106-1117.

**Due February 6: Weekly reading commentary #4**

***Week 5. CASE STUDY – A MEDICAL ANTHROPOLOGIST IN DOMINICA***

**Tuesday, February 11**

Marsha B. Quinlan (2004). From the Bush: The Front Line of Health Care in a Caribbean Village. Belmont, CA: Wadsworth/Thomson Learning. CHAPTER 1, 3, AND 4

**Thursday, February 13**

Marsha B. Quinlan (2004). From the Bush: The Front Line of Health Care in a Caribbean Village. Belmont, CA: Wadsworth/Thomson Learning. CHAPTERS 5, 6, AND 7

**Due February 13:** *This week, I want you to really pay attention to the Dominican ethnomedical system, and the WHY of people’s treatment seeking behaviors. In about a single spaced page, map out the kinds of sicknesses and problems that bother people. Not really a map, but a “mental template.” E.g.- what kinds of personalistic and naturalistic ailments exist, what kinds of sectors exist to treat them? How are these ailments related to “ethnophysiology,” and the idea of humors? This all doesn’t have to be written in an elegant style- a page of notes would be perfect.*

***Week 6. The Culture of “Biomedicine”***

**Tuesday, February 18**

Kleinman, Arthur (1980). Patients and Healers in the Context of Culture. Berkeley: University of California Press, pp. 71-118. Read pp. 104-118 carefully.

**Thursday, February 20**

Davenport, Beverly A. (2000). Witnessing and the Medical Gaze: How Medical Students Learn to See at a Free Clinic for the Homeless. Medical Anthropology Quarterly 14(3):310-327.

Keshet, Yael, and Popper-Giveon, Ariela (2013). Integrative Health Care in Israel and Traditional Arab Herbal Medicine: When Health Care Interfaces with Culture and Politics. Medical Anthropology Quarterly 27 (3): 368-384.

**Due Thursday, February 20: *Weekly Commentary #6.*** *In 300 words, how does our med-ical system have a unique culture? Describe it. What are your personal experiences with it?*

***Week 7. Gender, Reproduction, and Health***

**Tuesday, February 25**

Martin, Emily (1991). The Egg and the Sperm: How Science Has Constructed a Romance Based on Stereotypical Male-Female Roles. Signs: Journal of Women in Culture and Society 16 (3): 485-501

**Thursday, February 27**

Bell, Kirsten (2005). Genital cutting and Western Discourses on sexuality. Medical Anthropology Quarterly 19 (2): 125-148.

Kral, Michael (2013). “The Weight on Our Shoulders is too Much, and we are Falling”: Suicide among Innuit Male Youth in Nunavut, Canada. Medical Anthropology Quarterly 27 (1): 63-83.

**Due Thursday, Feb 27th: Weekly reading commentary #7**

***Week 8. Public Health, Poverty, and Development***

**Tuesday, March 4**

Hamlin, Christopher (1995). Could You Starve to Death in England in 1839? the Chadwick-Farr Controversy and the Loss of the "Social" in Public Health. American Journal of Public Health 85(6): 856-866.

**Thursday, March 6**

Harper, Janice (2004). Breathless in Houston: A Political Ecology of Health Approach to Understanding Environmental Health Concerns. Medical Anthropology 23:295-326.

Crooks, Deborah (2001). Poverty and Nutrition in Eastern Kentucky: The Political Economy of Childhood Growth. *In* Building a New Biocultural Synthesis. A.H. Goodman and T.L. Leatherman, eds. Pp. 339-355. Ann Arbor: University of Michigan Press.

**Due Thursday, March 6: Weekly reading commentary #8**

**March 10-16: SPRING BREAK**

***Week 9. Case Study in Nutrition and International Health***

**Tuesday, March 18**

Dettwyler, Katherine (1994). Dancing Skeletons: Life and Death in West Africa. Prospect Heights, IL: Waveland Press. CHAPTER 1 AND 2

**Thursday, March 20**

Dettwyler, Katherine (1994). Dancing Skeletons: Life and Death in West Africa. Prospect Heights, IL: Waveland Press. CHAPTER 4, 7, AND 8

**Due March 20: Weekly reading commentary #9 Class time Thursday will be used to work on your reading response for this week (i.e., we won’t meet in the classroom). This week’s reading response needs to be turned in (paper copies) to the course’s Blackboard Learn webpage by 5:00pm Thursday!**

***Week 10. Political Economy and Health***

**Tuesday, March 25**

Nichter, Mark, and Elizabeth Cartwright (1990). Saving the Children for the Tobacco Industry. Medical Anthropology Quarterly 5(3):236- 256.

**Thursday, March 27**

Moniruizzaman, Monir (2012). “Living Cadavers” in Bangladesh: Bioviolence in the Human Organ Bazaar. Medical Anthropology Quarterly 26 (1): 69-91.

Lockhard, Chris (2008). The Life and Death of a Street Boy in East Africa. Medical Anthropology Quarterly 22 (1): 94-115.

**Due March 27th.** **Weekly reading commentary #10**

***Week 11. Public Health and Structural Violence***

**Tuesday, April 1**

Farmer, Paul (1999). Infections and Inequalities: The Modern Plagues; updated edition with a new preface. Berkeley: University of California Press. Chapter 4 “The Exotic and the Mundane,” pp. 94-126.

**Thursday, April 3**

Singer, Merrill, F. Valentin, H. Baer, and Z. Jia (1992). Why does Juan García have a drinking problem? The perspective of critical medical anthropology. Medical Anthropology. 14 (1): 77-108.

Nations, Marilyn K, and C. Monte (1996). “I’m not dog, no!” Cries of resistance against cholera control campaigns. Social Science and Medicine 43: 1007 – 1024.

**Due April 3: Weekly reading commentary #11**

***Week 12. Structural Violence II***

**Tuesday, April 8**

Singer, Merrill, A. Herring, J. Littleton, and M. Rock (2011). Chapter 8: Syndemics in Global Health. *In* A Companion to Medical Anthropology. M. Singer and P. Erickson, eds. Pp. 159-180. San Francisco: Wiley Blackwell.

**Thursday, April 10**

No extra reading for today!

**Mini-ethnographies due! Come to class prepared to talk about them!!**

***Week 13. Culture and The Body***

**Tuesday, April 15**

Scheper-Hughes, Nancy (1987). The Mindful Body: a prolegomenon to future work in medical anthropology. Medical Anthropology Quarterly 1: 6-41.

**Thursday, April 17**

Sweetman, Paul (1999). Only Skin Deep? Tattooing, Piercing and the Transgressive Body. Pp. 165-187. *In* Michelle Aaron, eds. The Body’s Perilous Pleasures: Dangerous Desires and Contemporary Cutlure. Edinburgh: Edinburgh University Press.

MacLeish, Kenneth (2012). Armor and Anesthesia: Exposure, Feeling and the Soldier’s Body. Medical Anthropology Quarterly 26 (1): 49-68.

**Due April 17: Weekly reading commentary #12**

***Week 14. EMBODIMENT and NARRATIVE***

**Tuesday, April 22**

Henry, Doug (2006). Violence and the Body: Somatic Expressions of Trauma and Vulnerability during War. Medical Anthropology Quarterly 20 (3):345-378.

**Thursday, April 24**

Low, Setha (1994). Embodied Metaphors: nerves as lived experience. *In* Embodiment and Experience: The existential ground of culture and self. T.J. Csordas, ed., pp. 139-162. Cambridge: Cambridge University Press.

Coker, Elizabeth (2004). "Traveling pains": embodied metaphors of suffering among Southern Sudanese refugees in Cairo. Culture, Medicine, and Psychiatry 28(1): 15-39.

**Due Thursday, April 24: Weekly reading commentary #13**

***Week 15. EMBODIMENT and NARRATIVE***

**Tuesday, April 29**

Wilce, James M., and Laurie J. Price (2003). Metaphors our bodyminds live by. *In* The Social and Cultural Lives of Immune Systems, James Wilce, ed., pp. 50-80. London: Routledge.

**Thursday, May 1- Course Wrap-up and review** – come to class with questions.

**Take home final exam will be handed out this week! (probably Tuesday)**

**Wednesday, May 7 – FINAL EXAM DUE IN MY BOX IN THE DEPARTMENT BY NOON!**