Medical Anthropology: Health, Culture, Power in a Global Context

Spring 2018: Thursdays 1:30 – 4:00 pm, ESTW 309
Instructor: Michelle Munyikwa, MD/PhD Candidate, University of Pennsylvania
Email: mmunyikwa@haverford.edu
Office hours: by appointment

Are our bodies, ourselves lively artifacts? How do social, cultural and political forces shape health, illness and survival as well as understandings and experiences of “the body” and practices of caring for it? Medical anthropology is the sub-field of anthropology devoted to the understanding of the social, political, cultural, and economic factors that impact disease and illness. We will engage work that studies biomedicine itself as a sociocultural system. We will explore how medical practitioners come to see their patients, explore practices of producing medical knowledge and technological intervention, and consider what it is like to be a subject of biomedical practice and healing. In doing so, we will discuss theories of the role of power, culture, history and identity in illness, healing, and disease, reading core texts that critically ground medical anthropology today. The course heavily engages ethnographic materials in its exploration of culture and society, considering a broad range of health-related experiences, discourses, knowledge and practice among different cultures and among individuals and groups in different positions of power. Topics include diverse concepts of disease etiology and healing practice; theories of embodiment and somatization; ethnomedicine, medical pluralism, and (bio)medicalization; structural violence, inequalities, and social suffering; political and moral economies of global health and medical humanitarianism; HIV/AIDS and other infectious diseases; and effects of new medical technologies on how “we” live and die.

Required Books

All required readings will either be provided as PDFs on our Moodle site, hyperlinks in the syllabus, or as e-books through the campus library. Please note that for your ethnography book review assignment (described below), you will be responsible for finding your chosen text, whether through the library or by purchasing it.

Course Requirements

Your grade will be dependent upon class attendance and participation (30%), two mid-term assignments (40%), and the final project (30%).

Attendance and Discussion (30 percent): This class will be conducted mainly as a seminar, which is different from a lecture format in that it is discussion-driven and thus requires input and participation on your part. In order to receive the full 40%, you must be an active, thoughtful and energetic participant. You are expected to critically engage the materials and explore various positions relative to the issues discussed, which will in turn lead to lively, respectful, and reasoned debate. If you find that you are a shy student, please contact me so that we can consider alternative modes of participation and engagement and so that
we can work together to find ways to encourage and facilitate your participation in what I understand can be a stressful

By default, you will be allowed two absences without penalty; each subsequent absence will reduce your participation grade by 5% per class missed. I assume you will only miss class with good cause and will trust you to make calculations about when it makes sense for you to do so. If you find that you will need to miss more than the two free classes for some reason, please contact me about this so that I am aware and if necessary, can arrange other ways for you to make up this part of the grade.

Participation also includes choosing a health-related artifact to share and discuss in class. You are asked to analyze the "artifact" by drawing upon course themes, concepts, and discussions.

Argumentative essay (20 percent): Due March 25, 11:59 pm
In 6-8 pages (double spaced, 1” margins, in the equivalent of 12 point Times New Roman font), you should distill the arguments of at least three texts we have read, and make an interpretive argument that binds their analyses and arguments together. You should use the ethnographic texts we’ve read, theoretical frameworks we have discussed, and are encouraged to content from class lectures and discussion with appropriate citation. Your argument cannot be a summary; it must be theoretically motivated and make evident that you are drawing on anthropological theory. There are many ways to approach this, but you should choose a theme or "problem" of health, illness, and/or suffering; develop a convincing argument about the social and cultural factors shaping experiences, knowledges, and practices of health, medicine, and care; and support your claims with evidence from the readings. The response paper should not be a summary of the readings, but rather a critical engagement with course texts, which articulates a well-developed and convincing argument. This paper is an opportunity to pursue in greater depth your thoughts as developed through active class participation.

Ethnographic book review (20 percent): Due April 15, 11:59 pm
Please identify and read an ethnography that addresses issues related to health and well-being, illness, the culture of medicine or the process of healing; this should be an ethnography you have not read for another class. You can find suggestions for medical ethnographies by scanning the reference lists for readings in class, doing a search of the literature, or asking me for instructions. In 4-6 pages (double spaced, 1” margins, in the equivalent of 12 point Times New Roman), summarize the topic, research methods, arguments, and findings of the text. Additionally, you should critically evaluate the text: which claims do you agree and disagree with? These opinions should be substantiated through conversation with other texts or sources, whether from our class readings or your outside research. Please let me know which book you will be reading or provide a short list of selections for my feedback by March 8.

Final Assignment (30 percent):
You will have three options for the final assignment, due by the end of the exam period:
1. Paper Option 1, analyzing illness or caregiving experience: this option is a paper (12 to 15 double-spaced pages) which is an analysis of an “illness narrative” based on interviews you conducted with a family member, friend, or other person who has experienced a severe and/or chronic illness or serious injury and sought treatment (biomedical or other), or an illness narrative found in first person stories, literature or film. You may also choose to interview someone who has been a caregiver for someone suffering from a severe and/or chronic illness or serious injury. For this, you will deploy what you know of the ethnographic method:
2. Paper Option 2, a research paper: this option is a paper (12-15 double-spaced pages), addressing a disease, contemporary technology, or healing practice through theories and perspectives. You should build this paper through the use of primary sources
3. **A multi-modal assignment**: Instead of writing a full paper, you may opt to instead engage one of the above prompts, producing any kind of product instead. This could be a website, art piece, musical piece, podcast episode, interactive media production, or anything else you can think of, with my approval. In lieu of 12-15 pages, I would require only 1-2 double-spaced pages contextualizing the project and its intentions, along with the project itself.

Regardless of which option you choose, you should turn in a **1-2 page proposal and bibliography for your chosen project** by March 8.

**Deadline Summary**
- **March 8**: Project proposal and ethnography selection due in class
- **March 25**: Argumentative essay due by 11:59 pm
- **April 15**: Ethnographic book review due by 11:59 pm

**Other Information**

The campus community values academic integrity. Therefore, all students should understand the meaning and consequences of cheating, plagiarism and other academic offences. Please review Haverford’s Honor Code as well as the Writing Center’s website: [http://www.haverford.edu/writing-center/resources-for-writers/plagiarism.php](http://www.haverford.edu/writing-center/resources-for-writers/plagiarism.php)

All ideas, language, and research that are not originally yours should be cited. When directly quoting someone else’s words use quotation marks around the entire selection. Please use Chicago style (either author-date or note-bibliography) for your citations.

Should you have additional questions or concerns, please don’t hesitate to speak with me. Anyone, for whom classroom or assignment accommodation is necessary, is encouraged to speak with me as soon as possible and contact the Office of Disabilities Services at: [https://www.haverford.edu/access-and-disability-services](https://www.haverford.edu/access-and-disability-services) in order to acquire the requisite paper work outlining and authorizing accommodations.
Unit 1: Foundations

January 25: Introduction, pt. 1
Introduction to the course and its expectations; tips on reading and writing in anthropology.

References:
Harvard Guide to Reading and Writing in Anthropology


February 1: Introduction, pt. 2
Assigned Readings:

February 8: Critical Medical Anthropology
“Structural violence is structured and stricturing. It constricts the agency of its victims. It tightens a physical noose around their necks, and this garroting determines the way in which re- sources—food, medicine, even affection—are allocated and experienced.” – Paul Farmer

What is critical medical anthropology? How should medical anthropologists situate practices of healing and caregiving within the cultures and societies in which they take place? Whereas last session’s focus was on the question of culture, this week engages structure and society, focusing on the factors that can act to constrain the agency and lesson the life chances of communities.

Assigned Readings:


Reference Readings:


**Unit 2: Illness Experience**

**February 15: Bodies**

What is the relationship between Western biomedicine and technology? Between biomedicine and the body? How have anthropologists and other scholars described these relationships, thinking through medical practices as part of a cultural system in which practitioners and patients alike must learn these norms and rules?

**Assigned Readings:**


**Reference Readings:**


**February 22: Symptoms**

Symptom: *A (bodily or mental) phenomenon, circumstance, or change of condition arising from and accompanying a disease or affection, and constituting an indication or evidence of it; a characteristic sign of some particular disease. Especially, in modern use, a subjective indication, perceptible to the patient, as opposed to an objective one or sign.*

-Oxford English Dictionary

What do symptoms tell us? What is the relationship between a disease and the experience of having it? What can patterns of disease and illness tell us about the society within which those people live? This week, we will read about symptoms, thinking about them as embodied responses to life’s conditions, and also explore how physicians and other healthcare providers make sense of these complex bodily expressions.
Assigned Readings:

Choose one:


Reference Readings:


March 1: Injury & Treatment
“Injury endows dreams with a renegade quality.” - Laurence Ralph

How can we make sense of communities where life is lived in close proximity with death, injury with wellness, and hope with devastation? This week’s readings will explore communities in which long-term violence, illness, and disability are pervasive, and yet, forms of deep social community persist and endure. We'll also explore the normalized modes of treating these individual and social injuries.

Assigned Readings:


Reference Readings:


March 8: Embodied Experience [Selection for Book Review & Final Proposal Due]
Assigned Readings:

**Assignment:**
Seek out an essay, film, poem, article, interactive website or other first-person narrative about illness and caregiving for sharing with the class. Think about how it relates to – or differs from – what we have covered thus far. Be prepared to show, summarize, or explain this artifact to the class. You may also, if you wish, share something of yours that you have produced as a result of personal experiences with illness or caregiving.

**Reference Readings:**


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**March 15 – Spring Break, no class**

**Unit 3: Governing Bodies, Governing Populations**

**March 22: Biopolitics, Citizenship, Sovereignty** [Argumentative Essay Due March 25]

What is the relationship between states and their populations? What is the relationship between healing people and governing them?

**Assigned Readings:**

**Reference Readings:**


March 29: Making Live, Letting Die, pt. 1
Is the prolonging of life always good? What are the ways in which the prolonging of life might exacerbate suffering or contribute to feelings of loss and abandonment? This week, we will discuss ambiguous projects to prolong life – whether in the case of suicide prevention, weight loss, and end-of-life care, we will think through ambiguous relationships between life and death, between the good of carrying on and letting go, and how these are shaped by the local specifics of different settings.

Assigned Readings:


Reference Readings:
Durkheim, Emile. Suicide, A Study in Sociology. Glencoe, IL: Free Press, 1951 [1897]. [“Anomic Suicide”]


April 5: Making Live, Letting Die, pt. 2
"The phrase slow death refers to the physical wearing out of a population and the deterioration of people in that population that is very nearly a de-finifying condition of their experience and historical existence.” - Lauren Berlant

Assigned Readings:

Holmes, Seth. Fresh Fruit, Broken Bodies: Migrant Farmworkers in the United States. University of California Press, 2013. [ebook available online through library; “We are fieldworkers: embodied anthropology of migration,” pp 49-61]

Reference Readings:


**Unit 4: Global Health, Humanitarianism, and Human Rights**

**April 12: Global Health [Ethnography Book Review Due April 15]**

What does anthropology offer in understanding global health practices in their social, political, economic, and historic contexts? With an emphasis on global health technologies and interventions, this week will begin to tackle the interwoven relationships between actors across states and spaces.

**Assigned Readings:**


**Listen:**


**Reference Readings:**


**April 19: (Post)colonial Disorders**

What are the effects of war, colonization, imperialism, and slavery on the bodies and minds of those who have lived through it? How do we make sense of trauma and injury, mental illness, and other conditions? This week will use studies of psychic injury to think through these questions.

**Assigned Readings:**


Reference Readings:


April 25: Humanitarianism
What is humanitarianism, and how is it related to human rights? Who are the beneficiaries of humanitarian practice, and what do humanitarian interventions look like on the ground? During this class session, we will discuss the effects of humanitarian reason and practice in diverse settings.

Assigned Readings:


Reference Readings:


May 3: What now?
The idea that we could possibly go somewhere that exists only in our imaginations – that is, "nowhere" – is the classic definition of utopia. Call me utopian, but I inherited my mother’s belief that the map to a new world is in the imagination, in what we see in our third eyes rather than in the desolation that surrounds us.
Robin D.G. Kelley, *Freedom Dreams*

Sometimes, critique can make us feel hopeless, convinced there is no way of acting ethically in the world. Today, we will read the words of dreamers and imagine what we might do, knowing what we know, to do our small part – with humility – to bring forth the world we desire.

**Assigned Readings:**