

## **ANTH 215Ea-b Health, Healing and Culture: An Introduction to Medical Anthropology**

### **Course description**

This course is an introduction to Medical Anthropology, and it focuses on the relationship between individuals and culture. The student will have available a range of readings that will help to illustrate the different relationships between culture and the subject's perceptions of health and healing. This introductory course aims to provide students with a basic understanding of some of the anthropological approaches and tools that are relevant to the study of health and illnesses and to the improvement of the impact and sustainability of health work.

It is aimed at those new to anthropology and can thus be used as an introduction to the subdiscipline for health novice social scientist. It will introduce students to the topics, theories, and methods of the discipline, applied to the scientific study of the social and cultural determinants of health. We will explore topics such as mental health and illnesses, systems of healing, woman's health, ethics, intercultural competence, and practical uses for health care settings.

In addition to this, it will enable you learn theoretical concepts and no less importantly, to become able to use them in cases and examples directly connected to daily life, including examples of actual topics. The course will include the latest anthropological perspectives on the COVID-19 pandemic since the COVID -19 pandemic has disrupted the normal lifestyle of people across the globe. Conducted in English.

### **Course goals and methodology**

This course aims at providing a basic understanding of some of the anthropological approaches and tools that are relevant to the study of health and illness. We will delve into the connections between our conceptions of health and healing processes and sociocultural contexts. This course will introduce Medical Anthropology, which is the subfield of anthropology concerned with how human societies respond to and shape the experiences of health, illness, and recovery. As we move on, we will delve into to more specific and complex aspects, such as the meaning and value of healing in particular cultures, different etiological systems, ethno-medical systems, reproductive health, and mental illnesses, among others. Classes will consist of lectures and class discussions. Students are encouraged to use a Blackboard site, where the professor will post slides, journal articles, assignment instructions and additional resources such as audiovisual material.

The general objectives that this course addresses will enable you to:

- Demonstrate an analytical understanding of a range of concepts, principles and definitions used in medical anthropology.
- Show awareness of cultural competence in health care, enabling effective work across

racial, ethnic, and cultural lines.

- Be able to explain the role of the main social and cultural determinants of health.
- Explain how culture influences our perception of health and healing, and become aware of the risk of ethnocentrism.
- Be able to apply what you learn to your daily life and own experiences.

There is no textbook required for this course. Therefore, students are not expected to purchase any material. The instructor will post the class material on Blackboard, which is accessible both on campus and off campus. To log in, you need to sign in on <https://campusvirtual.upo.es> using the username and password you received in your orientation folder. Coursework will include lectures, students' presentations, videos, outside readings and short written assignments. Participation is a key factor in this course. Engaging in discussions and presenting the contents that you will actively learn about the theory but also about how to apply it, getting feedback and guidance and assuring proper understanding. Students will be expected to come prepared to class, reading the daily assignment. In class, the instructor will use audiovisual materials to supplement the information presented in the readings. Every session will be structured around class discussion, focusing on the readings assigned and the audiovisual material presented.

### **Learning Objectives**

By the end of the semester, students who complete all necessary assignments will be able to:

- Be able to define and explain what culture and Medical Anthropology are, and their meaning in different cultures.
- Describe the nuances separating illness from disease.
- Debate and think critically about different perceptions and experiences of health, and of healing processes as a result of acculturation.
- Identify processes related to health and illness as diverse as cultural backgrounds can be identified.
- Discuss with an appropriate vocabulary about cultural influences, healing processes and medical systems.
- Demonstrate the ability to translate knowledge into practice using examples and cases.

### **Required Texts**

- Abrams, EIM et al (2021). COVID-19 and the impact of social determinants of health. *The Lancet Respiratory Medicine*, Volume 8, Issue 7, 659 - 661
- Boddy, J., & Boddy, J. (2016). The normal and the aberrant in female genital cutting: Shifting paradigms. *HAU: Journal of Ethnographic Theory*, 6 (2), 41–69.
- Boseley, S (2016). NHS can fund 'game-changing' PrEP HIV drug, court says. *The Guardian*. August, 2<sup>nd</sup>
- El Guindi, F (2020) "What the Coronavirus Crisis Needs from Anthropology." *Anthropology News website*
- Farmer, P. & Kleinman, A. (1989). AIDS as human suffering. *Daedalus*, 118 (2), 135-160
- Foster, G. (1976). Disease etiologies in Non-Western medical systems, *American Anthropology*, 78 (4), 773-782

- Gamlin, J., Segata, J., Berrio, L., Gibbon, S., & Ortega, F. (2021). Centring a critical medical anthropology of COVID-19 in global health discourse. *BMJ Global Health*, 6(6), e006132. Gamlin, J et al. (2021) "Centring a critical medical anthropology of COVID-19 in global health discourse"
- Joralemon, Donald (1999) *Exploring Medical Anthropology*. Needham Heights, MA: Allyn & Bacon.
- Kaptchuk, T. J., & Eisenberg, D. M. (2001). Varieties of healing. 1: medical pluralism in the United States. *Annals of Internal Medicine*, 135(3), 189–95
- Kleinman, A. (2004). Culture and depression. *New England Journal of Medicine*, 351, 951-952.
- Kleinman, A. (2008). Catastrophe and caregiving: the failure of medicine as an art. *Lancet* (London, England), 371(9606), 22–3
- Kleinman, A., Abramowitz, S., Kleinman, A., Berger, P., Luckmann, T., Farmer, P., Petryna, A. (2010). Four social theories for global health. *Lancet* (London, England), 375(9725), 1518–9.
- Kolata, G (2016) The Shame of Fat Shaming. *The Sunday review*. October, 1st.
- Lévi-Strauss, C., Jacobson, C., & Schoepf, B. G. (1963). *Structural anthropology*. New York: Basic Books.
- Lyall, J (2006). The struggle for 'cultural competence'. *The Guardian*. April, 12<sup>th</sup>
- Marmot, M (2005). The social determinants of health inequalities. *The Lancet*.
- Moerman, D. E. (2000). Cultural variations in the placebo effect: ulcers, anxiety, and blood pressure. *Medical Anthropology Quarterly*, 14(1), 51–72.
- Pinching, A., Higgs, R., Boyd K (2000). The impact of AIDS on medical ethics. *Journal of medical ethics*, vol: 26 (1) pp: 3-8
- Pool, R., & Geissler, W. (2005). *Medical anthropology*. Open University Press.
- Scheper-Hughes, N. (1992). "Two Feet Under." *Death Without Weeping: The Violence of Everyday Life in Brazil*. Berkeley: University of California Press, pp. 268- 339.
- Scheper-Hughes, N., and Lock, M. (1987). *The Mindful Body: A Prolegomenon to Future Work in Medical Anthropology*. *Medical Anthropology Quarterly*, 1(1), new series, 6-41
- Strong, T., Trnk, S. y Winn, L. "L'ENFER, C'EST LES AUTRES": Proximity as an Ethical Problem during COVID-19
- Van der Geest, S. (1999). Training shopkeepers and schoolchildren in medicine use: experiments in applied medical anthropology in east Africa. *Medical Anthropology Quarterly*, 13 (2), 253–5.

### Course Requirements and Grading

Students will be evaluated on their ability to articulate and critically apply the terms, concepts and theories from class and readings verbally, during class discussions, as well as in writing, on exams and in written assignments. The final grade for the course is comprised of the following:

- Focus Essay (25%)
- Class presentations (10%)

- Participation (15%)
- Midterm exam (25%)
- Final exam (25%)

*Focus Essay (25%):*

Students are required to write a personal reflection essay of 1500 words on a subject chosen from the range of questions below, which are based on topics and readings that are covered in the course. Students can also write an essay about a topic of their interest related to the course but it has to be connected with personal experiences. Students are required to type their essay in a Word processing programme using Arial font in size 12, double spaced. On a cover page, students should indicate the essay question they are answering and provide a word count of the essay. To prepare for their essay, students should build on reading material from the course, other literature sought from sources external to the course, examples used in class and their own experiences. All references to literature and ideas given by others should be cited throughout the essay in 'Author, Date' format, for example (Davis, 1995), and should be listed in full at the end of the document.

Essay Questions

1. Medical pluralism and ethnomedical systems
2. Female Genital Mutilation and Female Genital Cosmetic Surgery
3. Healing processes in different cultures
4. Ethics in anthropology
5. Intercultural Competence
6. Racism
7. COVID-19 and anthropology
8. Free topic

*Class presentations (10%):* This activity is intended for the students to do research (non-participant observation in a supermarket, including information about COVID-19 and social distance measures). After this exercise, students will organize a debate to discuss the analysis with the class. These presentations will be organized and scheduled ahead.

*Class participation 15%:* Students are expected to regularly participate in class discussions. Class participation will therefore be graded according to the students' previous work and reflections about the provided material. Active participation means not only attendance (being there ≠ participation) but discussion with relevant basis (text-based and not just random personal experience and background), asking and answering questions in class, engaging in class discussions and conversations with classmates, questioning information presented and discussed. This course is based on the assumption that students take part not as *passive* consumers of knowledge but as *active* participants in the exchange, production, and critique of ideas—their own ideas and the ideas of others.

To this end, **students need to prepare themselves reading the contents due for each session.** While students may be regularly keeping up with the required readings and assignments it also important that they come prepared to *show* that they are keeping up with those readings/assignments through active class participation.

Participation points will be assigned based on the following criteria:

	<b>Exemplary (9-10)</b>	<b>Proficient (8-9)</b>	<b>Developing (7-8)</b>	<b>Unacceptable (0-7)</b>
<b>Frequency of participation in class</b>	Student initiates contributions more than once in each class.	Student initiates contribution once in each class.	Student initiates contribution at least in half of the classes.	Student does not initiate contribution & needs instructor to solicit input
<b>Quality of comments</b>	Comments always insightful & constructive; uses appropriate terminology. Comments balanced between general impressions, opinions & specific, thoughtful criticisms or contributions.	Comments mostly insightful & constructive; mostly uses appropriate terminology. Occasionally comments are too general or not relevant to the discussion.	Comments are sometimes constructive, with occasional signs of insight. Student does not use appropriate terminology; comments not always relevant to the discussion.	Comments are uninformative, lacking in appropriate terminology. Heavy reliance on opinion & personal taste, e.g., "I love it", "I hate it", "It's bad" etc.
<b>Listening Skills</b>	Student listens attentively when others present materials, perspectives, as indicated by comments that build on others' remarks, i.e., student hears what others say & contributes to the dialogue.	Student is mostly attentive when others present ideas, materials, as indicated by comments that reflect & build on others' remarks. Occasionally needs encouragement or reminder from T.A of focus of comment.	Student is often inattentive and needs reminder of focus of class. Occasionally makes disruptive comments while others are speaking.	Does not listen to others; regularly talks while others speak or does not pay attention while others speak; detracts from discussion; sleeps, etc.

Source: Eberly Center for Teaching Excellence. Carnegie Mellon University

#### *Midterm (25%) and Final Exams (25 %)*

Exams will include a mixture of multiple choice, short answer and short essay questions. Students must demonstrate that they have mastered the theories, concepts and terms from lecture, class discussions, videos and readings.

**Final Grade Expectations:** The instructor will use the Spanish 10-point grading scale. The grades that will appear on your final transcript are also Spanish grades.

- Grade A/A- (9-10) — Outstanding performance showing a thorough knowledge and understanding of the topics of the course. The best possible grade.
- Grade B+/B (8-9) — Remarkable performance with general knowledge and understanding of the topics. Next highest.
- Grade B/B- (7-8) — Good performance with general knowledge and understanding of the topics. Indicates high average performance.
- Grade C+/C (6-7) — Fairly good performance showing an understanding of the course on a basic level. Indicates low average performance.
- Grade C/C- (5-6) — Passable performance showing a general and superficial understanding of the course's topics. Lowest passing grade
- Grade F (0-5) — Unsatisfactory performance in all assessed criteria. Failing grade.

Please be aware that anything below a 5 (i.e. a C- on the U.S. scale) is a failing grade. There is no pass/fail option at UPO. If you do not officially withdraw from a class by the withdrawal deadline, a failing grade will appear next to the course name. Check out the Student Handbook for the grade conversion table (some universities may use a slightly different scale).

### **General Course Policies**

Each student is expected to be familiar with the course syllabus. Students are expected to focus their full attention on the class, arrive on time, and stay until class ends. Leaving the classroom on repeated occasions is disturbing to both your professor and your classmates and may adversely affect your participation grade. Please make use of the 10-minute breaks in between classes to fill up your water bottle, use the restroom, etc.

Students are expected to listen and respect other points of view. Phone calls, social media, email, or Internet browsing at any time during class are not acceptable during class except for specific class-related activity expressly approved by your instructor. You are responsible for any and all course material covered in class, announcements, and/or handouts if you are not present for any reason. Students will be held responsible to be up to date by attending class regularly and checking both email and the Blackboard site of the course frequently (monitor your email and Blackboard announcements at least once every 24 hours).

Communicating with instructor: Please allow at least 48 hours for your instructor to respond to your emails. The weekend is not included in this timeframe. If you have an urgent request or question for your professor, be sure to send it during the week.

### **Attendance and Punctuality**

Attendance is mandatory at all classes. As we understand that you might fall ill or be unable to come to class (e.g. due to a religious holiday, a flight delay, a family wedding/reunion, a graduation, a job interview, etc.) at some point during the semester, you are allowed up to 4 absences. You will be responsible for the material covered and any work missed. You will not need to justify your absences (up to 4) in any way unless you miss an exam, a presentation, a quiz, etc. In this case, you must present a doctor's note (signed, stamped and dated) to be able to reschedule the exam, etc. It will still count as an absence but you will be allowed to retake the exam, etc. We don't encourage you to use all 4 days unless you really need them as your

participation grade may suffer if you are not in class. If used unwisely and you get sick late in the semester, the following penalties will apply:

- On your 5th absence, 1 point will be taken off of your final Spanish grade
- On your 6th absence, 3 points will be taken off of your final Spanish grade
- On your **7th absence, you will be suspended with a failing grade.**

For classes that meet once a week, each absence counts as two. For classes that meet daily, the penalties outlined above apply if you go over 6 absences (7th absence=5th absence above). Exams missed due to an excused absence must be made up within a week of returning to classes. Talk to your professor immediately after your return.

### **COVID-19**

Regarding any changes related to the COVID-19 pandemic, the procedure to follow will be in accordance with the current legislation in the region of Andalucía, Spain

### **Academic Honesty**

Academic integrity is a guiding principle for all academic activity at Pablo de Olavide University. Cheating on exams and plagiarism (which includes copying from the Internet) are clear violations of academic honesty. A student is guilty of plagiarism when he or she presents another person's intellectual property as his or her own. The penalty for plagiarism and cheating is a failing grade for the assignment/exam and a failing grade for the course. The International Center may also report this to your home university. Avoid plagiarism by citing sources properly, using footnotes and a bibliography, and not cutting and pasting information from various websites when writing assignments.

### **Learning Accommodations**

If you require special accommodations or have any other medical condition you deem may affect your class performance, you must stop by the International Center to speak to Marta Carrillo ([mcaroro@acu.upo.es](mailto:mcaroro@acu.upo.es)) to either turn in your documentation or to confirm that our office has received it.

### **Behavior Policy**

Students are expected to always show integrity and act in a professional and respectful manner. A student's attitude in class may influence his/her participation grade. The professor has a right to ask a student to leave the classroom if the student is unruly or appears intoxicated. If a student is asked to leave the classroom, that day will count as an absence regardless of how long the student has been in class.

## Course Content

Topic	Readings
<b>Course presentation</b>	No readings required
<b>Introduction to Medical Anthropology Case study: COVID-19</b>	<i>Kleinman, A. (2010), Four Social Theories for Global Health</i>
<b>Doing Anthropology. COVID-19 and Ebola</b>	<i>Chapter 2 in Pool and Geissler (2005) "Anthropological perspectives", pp 15-27</i>
<b>Medical pluralism I</b>	<i>Tilburg, Jon C and G. Miller, Franklim. Responding to Medical Pluralism in Practice: A Principled Ethical Approach</i>
<b>Medical Pluralism II</b>	<i>No reading</i>
<b>The relationship between anthropology and biomedicine</b>	<i>Moerman D (2000). Cultural Variations in the Placebo Effect: Ulcers, Anxiety, and Blood Pressure, pp: 51-72</i>
<b>Social Determinants of health</b>	<i>Documentary: Unnatural causes. Intro.</i>
<b>Non-Western disease etiologies</b>	<i>Foster, G (1976) Disease etiologies in Non- Western medical systems, 773-782</i>
<b>Tabboos and invisibilisation. The role of medical anthropology. Short essay</b>	<i>Boddy J (2016). The normal and the aberrant in female genital cutting: Shifting paradigms</i>



<b>Culture and. The subject The body in anthropology</b>	Scheper-Hughes, & Lock, <i>The mindful body</i> , 6- 41
<b>Mid-term preparation Activity: Social Determinants of Health</b>	<i>Marmot, M (2005). Social determinants of health inequalities</i>
<b>Reproductive Health</b>	<i>Scheper-Hughes, Nancy. 1992. "Two Feet Under." Death Without Weeping: The Violence of Everyday Life in Brazil. 268- 339</i>
<b>Mid-term exam</b>	
<b>Traditional anthropologist and political economy anthropologist. The case of HIV and COVID-19.</b>	<i>Gamlin, J e al. (2021) "Centring a critical medical anthropology of COVID-19 in global health discourse"</i>
<b>Mental health in different cultures</b>	<i>Kleinman, Culture and depression, 951-952.</i>
<b>Communication in clinical settings</b>	<i>Lyll, J. (2006) The struggle for 'cultural competence'. The Guardian. April, 12th</i>
<b>Intercultural competence</b>	<i>Kleinman, 'Catastrophe and Caregiving: The Failure of Medicine as an Art', The Lancet, 371</i>
<b>Citizenship , governance and health. The case of HIV and AIDS</b>	<i>Boseley, S (2016). NHS can fund 'game-changing' PrEP HIV drug, court says</i>
<b>Experimental subjects, ethics (House: episode 8 "informant consent")</b>	<i>Pinching ,A., Higgs, R., Boyd K (2000). The impact of AIDS on medical ethics</i>
<b>Interventions</b>	<i>Van der Geest, S. Training shopkeepers and schoolchildren in medicine use: experiments in applied medical anthropology in East Africa, pp 253-255</i>
<b>COVID-19: Ongoing Global Responses and Social Impact</b>	<i>El Guindi, F (2020) "What the Coronavirus Needs From Anthropology." Anthropology</i>



	<i>News website</i>
<b>Activities: Field cases and trials Documentary</b>	<i>Strong, T., Trnk, S. y Winn, L. "L'ENFER, C'EST LES AUTRES": Proximity as an Ethical Problem during COVID-19</i>
<b>Healing in different cultures (Final focus essay deadline)</b>	<i>No readings required. Class with a Prananadi healer</i>
<b>Medical Anthropology Presentations 1 (non-participant observation)</b>	<i>No readings required</i>
<b>Medical Anthropology Presentations 2 (non-participant observation)</b>	
<b>Medical Anthropology Presentations 3 (non-participant observation)</b>	
<b>Final exam review</b>	

Note: This syllabus is subject to change.