Synopsis
How is the experience of being ill shaped by one’s culture? How is sickness caused by one’s structural conditions? Does biomedicine stand apart from “culture” and “tradition” in our understanding of health and disease? Are biomedicine and international public health as specific cultural domains in themselves, and how does that shape their practice? How do specific messages about culture get circulated in global health activism and development interventions? And how are culture and health being brought together in international research?

In this course, we engage these questions by drawing upon the work of scientists, social scientists, and humanists to study how health, culture, and institutions are forces that shape health experience in the 21st century. This course is meant to serve as a graduate-level introduction to the field of critical medical anthropology – a branch of medical anthropology that applies critical theory in the consideration of the political economy of health, and the effect of social inequality on people’s health. In our understanding of global health, the problem of culture, power, networks and circulation, and authority are always underlying issues. Therefore, in this course, we emphasize culture histories, illness experiences, and multiscalar processes and structures to interrogate how macro processes, institutions, and forces intersect with the micro-worlds of families, localities, and individual experiences in health-related domains. This course also engages critical questions regarding scientific knowledge, institutional forms of recognition, cultural representations, and communication in its interrogation of understandings of the body, embodiment, healing systems, medical explanatory models, health politics, and health as a human right.

This course uses ethnographic and theoretical writings from all across the world to explore health experience, health discourses, traditional and biomedical practices, and health governance in a global perspective. Our readings and conversations will serve as the springboard for a semester-long discussion about the meanings of health, sickness, and health justice, with an eye towards interrogating the emerging international principle of “health as a human right.” Through this discussion, we will be challenged to reconsider some of our own taken-for-granted assumptions about the infections and inequalities, global hierarchies of power, health cultures and experiences, transnational health movements, and global arrangements of development and underdevelopment.

Course Aims
- By the end of the semester, you will have been introduced to a diversity of cultural approaches to health and illness, and examined the utility of concepts like “embodiment,” “experience,” and “structural violence” in medical anthropological research.
- You will have been trained to understand health in transcultural perspective, but you will also understand health from the perspectives of circulations of knowledge, power, resources, and authority.
- You will have studied biomedical knowledge as a cultural domain.
- You will have acquired an introduction to the realm of global health: which includes pandemic diseases, global forms of health intervention, the creation of international health standards, and the provision of NGO and state-sponsored health resources.
- You will have engaged thoughtfully with the problems of power, hierarchy, containment, and contamination as it relates to the formulation of health policy at local, national, and international levels.

Class Participation
As is evident from the grading structure for this course, class participation is the most important element of this class. Therefore students must come prepared to class meetings, and participate actively in class discussions. Attendance is mandatory. This class will be reading intensive, and all weekly readings must be completed by the start of class each week. Each student must sign up to give two presentations on the course material during class that synthesize the week’s readings. These presentations may be worked out in consultation with other students giving presentations on the same day, or they may be developed independently.
Final Paper
Final papers are on a topic of the student’s choice, and are due on April 28, 2015 at 5pm. Detailed information about the final paper will be available on the course Sakai website. The basic parameters are as follows: papers are to be **12-15 single-spaced** pages in length, and are to be written in the format of a journal article for a specific journal of the student’s choice. Topics must be worked out in consultation with the Professor by March 20, 2015, and they must advance the student’s overall course of graduate study. Final submissions must also be accompanied by a cover letter to the editor of the journal explaining why this paper is appropriate for the selected journal.

Grades
Final grades will be based on the following scale: A (94-100), A- (90-93), B+ (87-89), B (84-86), B- (80-83), C+ (77-79), C (74-76), C- (70-73), D+ (67-69), D (64-66), D- (60-63), E (<60).

GRADE STRUCTURE
45% Class Participation, including presentations
55% Final Paper

Appropriate Seminar Conduct Applies.

Attendance Policy
Students and auditors are responsible for satisfying all academic objectives as defined by the instructor, to include mandatory attendance at all class meetings. Absences count from the first class meeting. In general, acceptable reasons for absence from class include illness, serious family emergencies, special curricular requirements (e.g., judging trips, field trips, professional conferences), military obligation, severe weather conditions, religious holidays and participation in official university activities such as music performances, athletic competition or debate. Absences from class for court-imposed legal obligations (e.g., jury duty or subpoena) must be excused. Other sound reasons may be offered.

Attendance is required at all class meetings. Excused absences will require appropriate documentation. Assignments missed due to excused absences will be accepted, without a penalty, within 1 week after the absence. Work missed due to unexcused absences will be accepted, but will be penalized, as the Late Assignment Policy explains.

Policy on Late Assignments
You are required to complete all assignments by the stated due dates. Late assignments will lose one half-letter grade for each day past the deadline. Additionally, the final term deadline for submission of response papers is firm – there will be no exceptions made. There are no make-up opportunities for any assignment, as you will have ample time to complete each requirement. I will not assign grades of “incomplete” except under extreme circumstances (and only if you have completed 50% of the coursework). You must provide documentation of such circumstances from an appropriate authority.

Academic Honor Code
Students are expected to uphold the Academic Honor Code of the University of Florida. The Academic Honor Code is based on the premise that each student has the responsibility (1) to uphold the highest standards of academic integrity in the student's own work, (2) to refuse to tolerate violations of academic integrity in the University community, and (3) to foster a high sense of integrity and responsibility on the part of the University community. Please see the following website for a complete explanation of the Academic Honor Code: [www.registrar.ufl.edu/catalog/policies/students.html](http://www.registrar.ufl.edu/catalog/policies/students.html).

Americans with Disabilities Act
Students with disabilities, who need reasonable modifications to complete assignments successfully and otherwise satisfy course criteria, are encouraged to meet with the instructor as early in the course as possible to identify and plan specific modifications. Students requesting accommodation must first register with the Dean of Students Office and then provide documentation to the instructor. For more information about services available to University of Florida students:

Dean of Students Office Disability Resource Center
202 Peabody Hall or 0020 Reid Hall
Phone: (352) 392-1261 Phone: (352) 392-8570

University of Florida Counseling Services
Resources are available on-campus for students that feel like they are struggling in their personal or academic life. These
resources include:
- University Counseling Center, 301 Peabody Hall, 392-1575, personal and career counseling
- Student Mental Health, Student Health Care Center, 392-1171, personal counseling
- Sexual Assault Recovery Services (SARS), Student Health Care Center, 392-1161, sexual counseling
- Career Resource Center, Reitz Union, 392-1601, career development assistance and counseling.

Other Resources on Critical Medical Anthropology
The department of anthropology offers numerous courses at all levels in culture, health, and medicine. Please consider them as you register for classes in coming semesters.

Readings and Assignments

Week 2: MEDICAL ANTHROPOLOGY FOUNDATIONS
Clifford Geertz, “From the Native’s Point of View” and “Common Sense as a Cultural System,” Local Knowledge, 1983

Week 3: EMBODIMENT
Kirmayer, L.J. The Body’s Insistence on Meaning: Metaphor as Presentation and Representation in Illness Experience. Medical Anthropology Quarterly 6(4) pp. 323-346
Lester, Rebecca. 1995 Embodied Voices: Women’s Food Asceticism and the Negotiation of Identity. Ethos 23(2)

Week 4: BIOPOWER
Foucault, Michel. The Birth of the Clinic: An Archeology of Medical Perception
Foucault, Michel. 2004. The Crisis of Medicine of the Crisis of Antimedicine? Foucault Studies No. 1 pp5-15

Week 5: STRUCTURAL VIOLENCE, CULTURE, AND LIBERATION THEOLOGY
Martin-Baro, Ignacio. Writings for a Liberation Psychology: Harvard UP.

Week 6: SOCIAL SUFFERING & INTERPRETATION

**Week 7. GENEALOGIES OF HEALTH**

Claude Levi-Strauss, *The Sorcerer and His Magic*
Arthur Kleinman. Chapter 2 “What is Specific to Biomedicine?” In *Writing at the Margin*

**Week 8. SCIENCE, RESEARCH, ETHICS AND EVIDENCE**
Brandt, Allan. *Racism and Research: The Case of the Tuskegee Syphilis Study.* The Hastings Center Report 8(6)

**Week 9. EXPERIENCE, NARRATIVE, and EXPLANATION**

Byron Good, “The narrative representation of illness,” in *Medicine, Rationality and Experience* (ch 6).

**Week 10. EPIDEMICS**


**Week 11. SOVEREIGNTY, HUMANITARIANISM, THE NORMAL AND THE PATHOLOGICAL**

Excerpts from Bakhtin, Durkheim, Devereaux
Canguilhem, G. *The Normal and the Pathological.*

**Week 12: PHENOMENOLOGY**

Douglas, Mary. “Secular Defilement,” *Purity and Danger*.

**Week 13: GENDER AND SEX**

Additional readings TBA.
Week 14: SCIENCE, SCIENTIFIC FACTS, AND ‘TRUTHINESS’
Hacking, Ian. The Emergence of Probability OR The Social Construction of What?
Excerpts from The Ground Between: Anthropologists Engage Philosophy

Week 15. DRUG CULTURES