6.S: CONCLUSION and Questions

As the global population becomes larger, it is increasingly challenging to address the health needs of the world’s population. Today, 1 in 8 people in the world do not have access to adequate nutrition, the most basic element of good health. More than half the human population lives in an urban environment where infectious diseases can spread rapidly, sparking pandemics. Many of these cities include dense concentrations of poverty and healthcare systems that are not adequate to meet demand. Globalization, a process that connects cultures through trade, tourism, and migration, contributes to the spread of pathogens that negatively affect human health and exacerbates political and economic inequalities that make the provision of healthcare more difficult.

Human health is complex and these are daunting challenges, but medical anthropologists have a unique perspective to contribute to finding solutions. Medical anthropology offers a holistic perspective on human evolutionary and biocultural adaptations as well as insights into the relationship between health and culture. As anthropologists study the ways people think about health and illness and the socioeconomic and cultural dynamics that affect the provision of health services, there is a potential to develop new methods for improving the health and quality of life for people all over the world.

DISCUSSION QUESTIONS

This chapter describes several examples of diseases that result from interactions between biology and culture such as obesity. Why is it important to consider cultural factors that contribute to illness rather than placing blame on individuals? What are some other examples of illnesses that have cultural as well as biological causes?

Many cultures have ethno-etiologies that provide explanations for illness that are not based in science. From a biomedical perspective, the non-scientific medical treatments provided in these cultures have a low likelihood of
success. Despite this, people tend to believe that the treatments are working. Why do you think people tend to be satisfied with the effectiveness of the treatments they receive?

How does poverty influence the health of populations around the world? Do you see this in your own community? Who should be responsible for addressing health care needs in impoverished communities?

Glossary

Adaptive: traits that increase the capacity of individuals to survive and reproduce.

Biocultural evolution: describes the interactions between biology and culture that have influenced human evolution.

Biomedical: an approach to medicine that is based on the application of insights from science, particularly biology and chemistry.

Communal healing: an approach to healing that directs the combined efforts of the community toward treating illness.

Culture-bound syndrome: an illness recognized only within a specific culture.

Emotionalistic explanation: suggests that illnesses are caused by strong emotions such as fright, anger, or grief; this is an example of a naturalistic ethno-etiology.

Epidemiological transition: the sharp drop in mortality rates, particularly among children, that occurs in a society as a result of improved sanitation and access to healthcare.

Ethno-etiology: cultural explanations about the underlying causes of health problems.

Ethnomedicine: the comparative study of cultural ideas about wellness, illness, and healing.

Humoral healing: an approach to healing that seeks to treat medical ailments by achieving a balance between the forces, or elements, of the body

Maladaptive: traits that decrease the capacity of individuals to survive and reproduce.

Medical anthropology: a distinct sub-speciality within the discipline of anthropology that investigates human health and health care systems in comparative perspective.

Naturalistic ethno-etiology: views disease as the result of natural forces such as cold, heat, winds, or an upset in the balance of the basic body elements.

Personalistic ethno-etiology: views disease as the result of the actions of human or supernatural beings.

Placebo effect: a response to treatment that occurs because the person receiving the treatment believes it will work, not because the treatment itself is effective.

Shaman: a person who specializes in contacting the world of the spirits.
Somatic: symptoms that are physical manifestations of emotional pain.

Zoonotic: diseases that have origins in animals and are transmitted to humans.

ABOUT THE AUTHOR

Sashur Henninger-Rener is an anthropologist with research in the fields of comparative religion and psychological anthropology. She received a Master of Arts from Columbia University in the City of New York in Anthropology and has since been researching and teaching. Currently, Sashur is teaching with The University of LaVerne and the Los Angeles Community College District in the fields of Cultural and Biological Anthropology. In her free time, Sashur enjoys traveling the world, visiting archaeological and cultural sites along the way. She and her husband are actively involved in animal rescuing, hoping to eventually found their own animal rescue for animals that are waiting to find homes.

NOTES


15. Ibid., 775


17. Foster, "Disease Etiologies in Non-Western Medical Systems," 775.


50. Ibid., 369–371

51. Robert Bud, “Antibiotics: From Germophobia to the Carefree Life and Back Again.”


58. For more about these and other examples, see Carol P. MacCormack, Ethnography of Fertility and Birth (New York: Academic Press, 1982).

