
ANTHROPOLOGY OF GLOBAL HEALTH

ANTH 265 + WOODS HALL 1114 + T/TH 2:00-3:15PM



CONTACT INFO

INSTRUCTOR

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T/TH 11AM - 12PM

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TEACHING ASSISTANT

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COURSE DESCRIPTION

This interdisciplinary course provides an overview of the growing field of global health. Global health not only refers to health care systems, medical practices, and ideas about illness in cross-cultural contexts, but also includes issues of health development, global health inequity, and human rights. The course will focus on the history of global health, the critique of major international health agencies and their development paradigms, and the political economy of social inequalities and health. It will focus on key political, economic, and cultural factors associated with the nature and magnitude of global health issues such as HIV/AIDS, tuberculosis and malaria, paying particular attention to how poverty and inequalities within and between societies has accelerated the spread of infectious diseases. The course will also introduce students to how anthropology has contributed to the debates surrounding the globalization of health. The purpose of the course is to develop students' awareness of the political, socioeconomic, ecological, and cultural complexity of global health issues and the consequent need for anthropological involvement in the field of global health.

COURSE LEARNING OBJECTIVES

This course will combine lectures with structured class discussion, films, and possible guest presentations and asks students to engage several key areas of inquiry. By the end of the semester, using examples encountered throughout this course, students should be able to:

- 1) Understand a range of concepts, terms, principles and definitions used in global health
- 2) Utilize these with reference to major global health issues in specific contexts
- 3) Demonstrate familiarity with and relevance of anthropological approaches to global health
- 4) Critically evaluate epidemiological and medical approaches in global health from an anthropological perspective
- 5) Demonstrate practical skills of critical thinking and self-expression to address issues of social difference and health disparities on a global scale

ASSIGNMENTS

Assignments for this course include leading a class discussion, 5 blog posts, 2 op-eds, 2 film reviews, and a final paper. Grades will be determined on the basis of the following:

Class Discussion Leading:		10%
5 Blog Posts:	5% each=	25%
2 Op-eds:	10% each=	20%
2 Film Reviews:	10% each=	20%
Final Paper:		25%

Class Discussion Leading (10%)

Each student will be pre-assigned to a regional area, and there will be up to 6 students assigned per area. Each week, groups of up to 3 students from each regional area will be responsible for leading class discussion on a current event that involves their region that is related to global health. Students can work together or individually to present a topic and hold discussion. Each topic covered should sustain conversation for about 10 minutes (for individual presenters) or 30 minutes for group presentations. Students can bring in published articles or news items to distribute; they can show media clips, do traditional presentations, or assign in-class activities. The key is to generate discussion among the class and incorporate class readings. Students will be graded on the clarity of their presentation and ability to engage others in discussion.

Blog Posts (5% each; 25% total)

Throughout the semester, students will be required to write a total of 5 blog posts (each post is worth 5 points and will count for 25% of your grade for the class). Students post responses that connect material from assigned readings to current events occurring in their assigned global region. Current events can include any topic of relevance to the class related to global health and human diversity. To obtain credit, students must post to the class blog by 7 p.m. on Monday nights, the night before the readings and issues will be discussed in class. They must write a minimum of 300 words, address the topic of the week, and reflect on the ideas of at least one other blogger. Casual writing is fine, but this is an academic assignment and entries should be carefully composed and respectful. The blogs are a place to ask questions about complex and controversial issues and to solicit assistance in making sense of authors' findings or arguments. If effective meaning-making is to occur, a level of decorum and respect is required.

Op-ed Piece (10% each; 20% total)

One of the course goals is to strengthen your ability to write persuasive, informed pieces about specific issues. Op-eds are fairly short opinion pieces (500 words) that are intended to reach broad audiences and influential people within your community. You will be expected to compose two op-eds of potentially publishable quality on a contemporary global health issue that is important and interesting to you. You can consult newspapers or journals such as the New York Times or other outlets for examples of excellent op-eds. You should strive to make your op-ed pieces as polished and as close to publishable as possible. *Extra credit: If your TA determines that your piece is publishable, you can earn extra credit for submitting and getting your piece published.*

Film Review (10% each; 20% total)

Films are essential components of this class and we will watch several films throughout the semester. Each student is expected to watch all of the assigned movies and to compose short critical review pieces of 2 of the films (500 words) that address the central question of "How would a student in this class benefit by watching this film - what would a student gain?" A more detailed guideline of the critical film review is available on the course website on Canvas. *Extra credit: If your TA determines that your piece is publishable, you can earn extra credit for submitting and getting your review published.*

Final Paper (25%)

Throughout the course of the semester, students will be offered opportunities to attend and participate in several important events on and off campus related to global health. You will write a "participatory experience" paper based on your engagement with the event. The paper should not be a simple reporting of the event. Rather, students should use the readings from the class (minimum of 3), as well as the films, lectures, and class activities to critically reflect on the event in which s/he has participated. Papers are 5-7 pages in length double-spaced.

A rubric for this assignment will contain greater details. However, the point of the assignment is to have students articulate and analyze the participatory experience related to global health or human diversity (within individuals, family and communities), and how it enhanced your understanding of the class and how it will impact your current and future scholarship and life-long learning goals.

LATE ASSIGNMENTS

All assignments must be completed on time. Assignments not turned in on the date they are due will be penalized by a letter grade for each day they are late (for example: a B will become a C if turned in a day late) and may not receive written comments. Assignments that are four or more days late will not be accepted and will receive a failing grade.

GRADES

I do not discuss grades via e-mail; questions about grades need to be discussed in-person. Grades in this course are earned and not negotiated. My grading policies are very transparent and your progress in this course is available on Canvas as assignments are graded. It is your responsibility to keep up with your progress in this course and if you feel that your performance has not been evaluated fairly you must discuss this with me within a reasonable amount of time before the end of the semester.

The Grade Scale for this course:

97- 100 = A+ 87 – 89 = B+ 77 – 79 = C+ 67- 69 = D+ 0 – 60 = F

94 – 96 = A 84 – 86 = B 74 – 76 = C 64 – 66 = D

90 – 93 = A- 80 – 83 = B- 70 – 73 = C- 61 – 63 = D-

ATTENDANCE POLICY

Regular attendance and participation in this class is the best way to grasp the concepts and principles being discussed. However, in the event that a class must be missed, the policy is:

1. Religious Observances: it is the student's responsibility to inform the instructor or the TA of any intended absences for religious observances *within 2 weeks of the start of class*. Prior notification is especially important in connection with due dates for course assignments, since failure to reschedule these due dates may result in loss of credits during the semester.
2. Medically Necessary Absences: Students who miss a single class (lecture, recitation, or lab) for a medical reason must make a reasonable effort to contact the instructor or TA in advance, and upon return to class, present the instructor with a self-signed note which acknowledges that the information provided is accurate. A student's failure to provide an accurate statement is a violation of the Honor Code. Students who have a prolonged absence due to illness (multiple consecutive absences) are required to provide written documentation from a health care provider specifying the dates that they were in the provider's care.

In the event a student is absent for a Major Grading Event (minute paper or exam), he or she must provide documentation of illness from a health care professional, as well as make a reasonable effort notify the instructor or TA in advance. All health care professional documentation must include exact dates of absence and must be turned in within one week of the missed grading event (minute paper or exam).

COMMUNICATION

Turn on notifications for the course in Canvas and check your Email regularly, as this will be the main way that I communicate regarding updates or course news. You should attend discussion sections regularly. You can also attend office hours or contact us via email. Keep in mind, however, that after 5pm on weekdays, we are unlikely to respond to your email until the following morning.

WRITING ASSISTANCE

An essential part of scholarship is having others review and comment on your written work. Although you can enlist the assistance of our teaching assistant for feedback, brainstorming and assistance in refining your writing, the TA's time is greatly limited due to the number of students in the course. Therefore, I highly encourage you to use the University's Writing Center. The Writing Center works with students offering individual consulting on writing as well as workshops on writing and related issues in communication. Services are free to the university community.

HONOR CODE

UMD is an academic community that assumes personal and professional integrity on the part of all its members. Supporting these values in word and deed is the responsibility of each member of the community and alleged acts of academic misconduct should be taken seriously and dealt with according to the university's policy, <http://www.president.umd.edu/policies/iii100a.html>. UMD's student-administered Honor Code and Honor Pledge prohibits students from cheating on exams, plagiarizing papers, submitting the same paper for credit in two courses without authorization, buying papers, submitting fraudulent documents and forging signatures.

This course adheres to the policies of the University of Maryland's Honor Code which applies to all work submitted for academic credit. For assignments, you must cite all written sources that you consulted, whether you quote directly or paraphrase. This is true whether you are using electronic or printed materials. Incomplete or improper citations are a form of plagiarism. If you are unfamiliar with proper citation formats, or have questions please consult me, a reference librarian, the teaching assistant or a style manual. Lack of familiarity with proper procedures is not a defense.

CLASSROOM ELECTRONICS POLICY

Laptops or tablets are allowed in the classroom for note-taking only. Cell phones and any other noisemakers are to be completely turned off. If violations occur, all electronic devices will be banned.

ACCOMODATIONS FOR DISABILITIES

UMD has long been committed to providing instruction and services that help students achieve academic success. While students with disabilities have always been a part of our student body, we understand better now the difficulties they encounter while in college and the ways in which we can provide effective support. Students are required to provide documentation of a disability before we may provide reasonable accommodations.

REQUIRED BOOKS

- Paul Farmer, Arthur Kleinman, Jim Kim, Matthew Basilio. 2013. *Reimagining Global Health: An Introduction*. Berkeley, CA: University of California Press. ([Available as an ebook via UMD libraries—access through Canvas](#))
- João Biehl and Adriana Petryna. 2013. *When People Come First: Critical Studies in Global Health*. Princeton, NJ: Princeton University Press. ([Available as an ebook via UMD libraries—access through Canvas](#))

Readings are due on the day they are listed in the week-by-week outline. It is your responsibility to read the syllabus carefully and come to class prepared. I reserve the right to slightly modify the syllabus depending on how the class is progressing.

DETAILED COURSE SCHEDULE

WEEK 1: Introduction—What is Global Health and Why Does it Matter?

What is this course designed to do? What is global health and what are some of the key questions in the study of global health?

January 26:

- Introductions and Class Overview
- Global Health Pre-Test

January 28:

- Film: The water of AYOLÉ
- Garrett, L. (2007). The challenge of global health. In *Foreign Affairs*, 86: 155-161.
- Koplan, J., Bond, T., Merson, K. Reddy, M., Rodriguez, M. Sewankambo, N. & Wasserheit, J. (2009) Towards a common definition of global health. *The Lancet*, 373, 9679: 1993-1995.
- When People Come First, *Critical Global Health*, pp 1-20

WEEK 2: History of Global Health (BLOG)

Where did the idea of global health come from? What are some of the earlier institutional, political and social arrangements from which it emerged?

Film: Rx for Survival, Program 1, Disease Warriors

February 2:

- Reimagining Global Health, Introduction and Chapter 3
- Brown, TM, M. Cueto, and E. Fee. 2006, "The World Health Organization and the Transition from International to Global Public Health." *American Journal of Public Health*. 96(1): 62-72.

February 4:

- Craig Janes and Kitty Corbett, 2009. Anthropology and Global Health. *Annual Review of Anthropology* 38: 167-183.
- Cohen, Jon. 2006. "The New World of Global Health." *Science* 311(5758): 162-167.

WEEK 3: Primary Health Care and Neoliberal Policies (BLOG)

How did the concept of primary health care emerge? What are the debates and meanings of primary health care? How did neoliberal policies impact the primary health care movement?

Film: Donka: X-ray of an African hospital

February 9:

- Reimagining Global Health, Chapter 4
- M Cueto, "The origins of primary health care and selective primary healthcare," *Am J Public Health* 94 (2004), pp. 1864–1874.

February 11:

- De Vogli R., "Neoliberal globalisation and health in a time of economic crisis," *Social Theory & Health* 2011, Vol. 9, 4, 311–325
- Gorik Ooms, Ted Schrecker, "Expenditure ceilings, multilateral financial institutions, and the health of poor populations," *The Lancet*, 2005; 365: 1821–23
- Janes, Craig R. 2004. Free markets and dead mothers: The social ecology of maternal mortality in postsocialist Mongolia. *Medical Anthropology Quarterly* 18(2): 230-257.

WEEK 4: Global Health Governance (DISCUSSION)

What is global health governance? What are the challenges to global health governance? Who is authorized to act on global health issues?

Film: Contagion

February 16:

- Dodgson, Lee, and Drager. "Global Health Governance: A Conceptual Review."
- Fenk and Moon. "Governance Challenges in Global Health."
<http://www.nejm.org/doi/full/10.1056/NEJMra1109339>
- Birn, Anne-Emanuelle. (2005). "Gates's grandest challenge: transcending technology as public health ideology." *Lancet*, 366: 514-519.

February 18:

- Vincanne Adams, Thomas E. Novotny, and Hannah Leslie, 2008. Global Health Diplomacy. *Medical Anthropology* 27(4): 315-323.
- Crane, Johanna. 2010, "Unequal partners": AIDS, Academia and the rise of global health, *Behemoth: A Journal on Civilisation* Issue No. 3. 78-97.

WEEK 5: Health and Human Rights (DISCUSSION)

What is the human rights approach to health? Is it worthwhile? Who decides?

Film: In the Shadow of Ebola

February 23:

- Jonathan M. Mann, Lawrence Gostin, Sofia Gruskin, Troyen Brennan, Zita Lazzarini and Harvey V. Fineberg. Health and Human Rights. *Health and Human Rights* 1(1) (Autumn, 1994), pp. 6-23.
- WHO document, A Human Rights Based Approach to Health:
http://www.who.int/hhr/news/hrba_to_health2.pdf
- Farmer, P. 2003. "Rethinking Health and Human Rights". Chapter 9 of *Pathologies of Power*. Berkeley, Los Angeles: London: University of California Press.

February 25:

- Hunt, Lynn. 2007. *Inventing Human Rights: A History*. New York: Norton. "Introduction: 'We hold these truths to be self-evident.'"
- *When People Come First*, Chapter 3

ASSIGNMENT: OP-ED #1 Due February 28

WEEK 6: Global Health Inequities: Social Determinants of Health (DISCUSSION)

What are the structural factors that constrain or determine health outcomes?

Film: Unnatural Causes: In Sickness and In Wealth

March 1:

- Marmot, Michael. 2006. Health in an unequal world: social circumstances, biology and disease in clinical medicine. *Journal of the Royal College of Physicians* 6(6):559-572.
- Fleischman et al. Migration as a social determinant of health for irregular migrants: Israel as case study, *Social Science & Medicine*, Volume 147, December 2015, Pages 89-97

March 3:

- Nancy Romero-Daza, Margaret Weeks & Merrill Singer (2003) "Nobody gives a damn if I live or die": Violence, drugs, and street-level prostitution in inner-city Hartford, CT. *Medical Anthropology*, 22:3, 233-259.
- Fuentes, C. M. (2013). Nobody's child: The role of trauma and interpersonal violence in women's pathways to incarceration and resultant service needs. *Medical Anthropology Quarterly*, 28, 85-104.

WEEK 7: Global Health Inequities—Social Suffering and Structural Violence (DISCUSSION)

How have anthropologists long studied global health inequalities? What are the experiences of those who suffer disproportionately?

March 8:

- Arthur Kleinman. 1997. The violence of everyday life: The multiple forms and dynamics of social violence. In *Violence and Subjectivity*. Veena Das, Arthur Kleinman, Mamphela Ramphele, and Pamela Reynolds, eds. Pp. 226-241. Berkeley: University of California Press.
- Farmer, Paul. 2003. On suffering and structural Violence: Social and economic rights in the global era (Chapter 1). In *Pathologies of Power: Health, Human Rights, and the New War on the Poor*. Pp. 29-50. Berkeley: University of California Press.

March 10:

- Lockhart, Chris. 2008. The Life and Death of a Street Boy in East Africa: Everyday Violence in the Time of AIDS. *Medical Anthropology Quarterly* 22(1): 94-115.
- Drybread, Kristen. 2015. Murder and the Making of Man-Subjects in a Brazilian Juvenile Prison. *American Anthropologist* 116(4): 752-764.

WEEK 8: SPRING BREAK, March 13-20, NO CLASSES**WEEK 9: Global Health Inequities: Social Justice and Health Movements (DISCUSSION)****March 22:**

- Allan M. Brandt. How AIDS Invented Global Health. *N Engl J Med* 2013; 368:2149-2152.
- Phil Brown and Stephen Zavestoski. Social movements in health: an introduction. *Sociology of Health & Illness* 26 (6): 679–694, September 2004.

March 24:

- Nations and Monte. 1996. "I'm not a dog, no!": Cries of resistance against cholera control campaigns." *Social Science and Medicine* 43(6):1007-24.
- Suzanne Schneider. Radical remedies: women, health, and the micropolitics of grassroots organizing in Mexico. *Med Anthropol Q* 2009 Sep;23(3):235-56

WEEK 10: NO CLASSES (Society for Applied Anthropology Annual Meetings) (BLOG-TOPIC OPEN)**March 29:****ASSIGNMENT: FILM REVIEW #1 Due****March 31:****ASSIGNMENT: OP-ED #2 Due****WEEK 11: Environment (BLOG/DISCUSSION)**

How do environmental changes impact global health?

April 5:

- McMichael AJ, Friel S, Nyong A, Corvalan C. Global environmental change and health: impacts, inequalities, and the health sector. *BMJ : British Medical Journal*. 2008;336(7637):191-194.

April 7:

- Smith, Neil. There's No Such Thing as a Natural Disaster: <http://understandingkatrina.ssrc.org/Smith/>
- Sangaramoorthy T, Jamison AM, Boyle MD, Payne-Sturges DC, Sapkota A, Milton DK, Wilson SM. Place-based perceptions of the impacts of fracking along the Marcellus Shale. *Soc Sci Med*. 2016; 151:27–37.

Week 12: Infectious Disease (DISCUSSION)

What are the political, socioeconomic, and cultural complexities of infectious diseases? What are the needs for anthropological involvement?

Film: A Closer Walk

April 12:

- Gandy, Matthew, and Alimuddin Zumla. 2002. The resurgence of disease: social and historical perspectives on the 'new' tuberculosis. *Social Science and Medicine* 55:385-96
- Attaran, Amir, et al. 2004. WHO, the Global Fund, and medical malpractice in malaria treatment. *The Lancet* 363(January 17):237-240.
- An Obituary for Iulian, a Romanian XDR-TB Patient, Husband, Father, and my Friend: <http://blogs.baruch.cuny.edu/cacophony/2012/05/29/an-obituary-for-iulian-a-romanian-xdr-tb-patient-husband-father-and-my-friend/>

April 14:

- England, Roger. 2008. The Writing is on the Wall for UNAIDS. *BMJ* 2008; 336:1072.
- When People Come First, Chapter 5

Week 13: Chronic Disease (DISCUSSION)

What are the political, socioeconomic, and cultural complexities of chronic diseases? What are the needs for anthropological involvement?

April 19:

- When People Come First, Chapter 7
- Robert Proctor. Tobacco and the global lung cancer epidemic. *Nature Reviews Cancer* 1, 82-86 (October 2001).

April 21:

- Wiedman, D. 2012. "Native American embodiment of the chronicities of modernity: reservation food, diabetes, and the metabolic syndrome among the Kiowa, Comanche, and Apache." *Medical Anthropology Quarterly* 26(4):595-612
- Doerte Bemme and Nicole D'souza. Global Mental Health and its Discontents: <http://somatosphere.net/2012/07/global-mental-health-and-its-discontents.html>.

WEEK 14: Global Health Ethics (DISCUSSION)

What role do ethics play in the globalization of health?

April 26:

- [Tuskegee and Guatemala film clip](#)
- Allan M. Brandt. 1978. Racism and Research: The Case of the Tuskegee Syphilis Study.
- Reverby SM. Ethical failures and history lessons: the U.S. Public Health Service research studies in Tuskegee and Guatemala. *Public Health Reviews*.2012; 34.

April 28:

- Petryna, Adriana, 2007, "Clinical trials offshored: On private sector science and public health." *BioSocieties* 2(2007): 21-40.
- Richey, Lisa Ann and Stefano Ponte 2008, "Better (Red)TM than Dead? Celebrities, consumption and international aid." *Third World Quarterly*, 29(4):711-729.

WEEK 15: Medical Humanitarianism and Complex Emergencies (DISCUSSION)

What are the stakes for representing suffering in the service of humanitarian and social justice projects?

May 3:

- Film: Living in Emergency
- Fox, Renée, 1995, "Medical humanitarianism and human rights: Reflections on Doctors Without Borders and Doctors of the World." *Social Science and Medicine*, 41(12): 1607-1616.
- James, EC. Ruptures, Rights, and Repair: The Politics of Truth in Haiti. *Social Science & Medicine*, Special Issue on "Conflict, Violence, and Health," Vol. 70, no. 1 (2010): 106-113.

May 5:

- The Nation: How Humanitarian Aid Weakened Post-Earthquake Haiti <http://www.thenation.com/article/how-humanitarian-aid-weakened-post-earthquake-haiti/>
- Ticktin, Miriam. 2006. "Where ethics and politics meet: The violence of humanitarianism in France." *American Ethnologist* 33(1): pp. 33-49.

ASSIGNMENT: FILM REVIEW #1 Due May 7th**WEEK 16: Futures—Learning from the Past and Present (BLOG)**

What is the future of global health? How do we learn from the past and the present?

May 10:

- Frenk, Julio. 2010. "The Global Health System: Strengthening National Health Systems as the Next Step for Global Progress." PLoS Med 7(1). Online: <http://www.plosmedicine.org/article/info%3Adoi%2F10.1371%2Fjournal.pmed.1000089>
- Reimagining Global Health, Chapter 11.

ASSIGNMENT: FINAL PAPER DUE May 16 by 10:30AM