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# METHOD AND THEORY IN MEDICAL ANTHROPOLOGY AND GLOBAL HEALTH

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ANTH 465/665 + WOODS HALL 1114 + T/TH 12:30-1:45PM



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## CONTACT INFO

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### INSTRUCTOR

Dr. Thurka Sangaramoorthy

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T/TH 11AM - 12PM

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## **COURSE DESCRIPTION**

Contemporary challenges to global health are not only biological and technical, but also social, economic and political. This course is aimed at understanding the complex interplay of the economic, social, ethical, behavioral, and biomedical dimensions of health from the perspective of medical anthropology. This course introduces you to the central concepts and methods of medical anthropology with an emphasis on global health. From this course, you will understand the breadth of scope and the specific health problems facing people at home and around the globe and the intersecting economic, political and cultural factors that determine them. Drawing on a number of classic and contemporary texts, we will consider both the specificity of local medical cultures and the processes which increasingly link vast systems of knowledge and practice around health. For instance, we will study the social and political economic shaping of illness and suffering and examine medical and healing systems – including biomedicine – as social institutions and as sources of epistemological authority. Topics covered will include the problem of belief; local theories of disease causation and healing efficacy; the placebo effect and contextual healing; theories of embodiment; medicalization; structural violence; modernity and the distribution of risk; the meanings and effects of new medical technologies; and global health.

Throughout this course, we will critically consider the theoretical and methodological questions of how one approaches “illness,” “healing” or “medicine” as an object of ethnographic study. All of the scholars whose work we shall read examine illness, healing and medicine in sociocultural and historical context. Medical anthropologists rely on ethnographic research methods (e.g. open-ended interviews and observation of social life over an extended time) and mixed methods (e.g. qualitative and quantitative). Within this very broad consensus, however, there remain significant differences in the kinds of questions medical anthropologists ask, and the kinds of insights they achieve. Through lectures and readings, you will refine and enhance your understanding of the global conjunctures that both produce and alleviate human suffering in order to develop insights about the field of medical anthropology and the methods of ethnography. Written and oral assignments all contribute to the goal of enabling you to conduct original research, delivering well-organized oral presentations, and preparing a professional manuscript.

## **REQUIRED READINGS**

All required readings can be found in CANVAS at <http://myelms.umd.edu>.

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.

**LEARNING OUTCOMES**

	Learning Outcome	Evaluation and Grading Criteria
1	You will develop your analytical skills by assessing relevant areas of scholarship. By selecting, reading, and discussing various case studies, ethnographies, and peer-reviewed articles in medical anthropology and global health, you will evaluate the kinds of questions medical anthropologists ask and the kinds of insights they achieve in the study of health globally. You will also assess basis of human diversity (biological, cultural, historical, social, and economic) and how socially-driven constructions of difference contributes to experiences of health and illness.	<ul style="list-style-type: none"> <li>• Discussion leading</li> <li>• Exams</li> </ul>
2	Medical anthropologists examine illness, healing and medicine in sociocultural and historical contexts and rely on ethnographic and mixed methods to collect relevant data to answer research questions. You will apply relevant methods and frameworks to the planning and preparing necessary to produce an original research project of your choosing that demonstrates your understanding of factors that influence health and well-being of global societies, their experiences and distributions of illness, and the cultural importance and utilization of pluralistic medical systems.	<ul style="list-style-type: none"> <li>• Research proposal</li> <li>• Annotated bibliography</li> <li>• Progress report</li> <li>• Original research paper</li> </ul>
3	You will critique, revise and refine your research project explicating the policies and processes that influence health inequalities based on notions of human difference through continuous feedback from your colleagues and the instructor.	<ul style="list-style-type: none"> <li>• Research proposal</li> <li>• Progress report</li> <li>• Peer review</li> <li>• Original research paper</li> <li>• Research presentation</li> </ul>
4	Through written assignments, participation in classroom activities and discussion, and a presentation on your final research project, you will develop effective written and oral communications skills in reading, writing, and speaking about how social and economic inequalities within a population are closely related to health in developed societies and the dynamic relations between social inequalities and population health.	<ul style="list-style-type: none"> <li>• Discussion leading</li> <li>• Exams</li> <li>• Research proposal</li> <li>• Annotated bibliography</li> <li>• Progress report</li> <li>• Original research paper</li> <li>• Research presentation</li> </ul>

**EVALUATION AND GRADING CRITERIA**

Discussion Leading: Since the viability of the seminar depends in large measure on student participation, you are expected to be prepared to discuss the readings and research issues, and lead a group discussion section for one class with colleagues in the style of a conference panel. This means you will need to familiarize yourself with all of the readings assigned each week, even if you aren't responsible for leading group discussions.

Each student is responsible for leading a class discussion in the forms of a conference presentation with colleagues which involves taking responsibility for the discussion of the week's reading and its relevance to the course. No single topical chapter or article should consume more than 20 minutes of discussion, so you can use this time frame as a guide for thinking about framing the discussion. In leading class discussion, please pay attention to: (a) summary of major points or arguments; (b) what you regard as the most important "take away" points or observations; (c) making connections with other readings; (d) relevance to medical anthropology and global health; and (e) explicate the policies and processes that do or do not create health inequalities based on notions of human difference. This is a group project, meaning that you should work with your colleagues to decide on how to divide up the readings and to think through connections between readings. The goal here is to not only present material but to also engage with colleagues in a discussion about relevant topics. You will be graded on the content of your presentation as well as how you are able to generate a productive discussion. *This exercise addresses the 1<sup>st</sup> and 4<sup>th</sup> Learning Outcomes for this class.*

Exams: There will be two take-home exams. These will ask you to respond to questions in a short essay format that demonstrate your understanding of the range of topics, concepts and arguments covered in course readings and during the class discussions. The exams are designed to help you develop your analytical skills through the assessment of relevant areas of scholarship. Thus exam questions will ask you to consider the major issues addressed; how these issues relate to the field of medical anthropology/global health; how socially-driven constructions of difference impact health and illness experiences; how policies and social structures influence health inequalities; how a medical anthropologist collects, analyzes and interprets data; and how the material might relate to your project. The exams are both an extension of class discussions and designed to assist you with your final research project. *These exercises address the 1<sup>st</sup> and 4<sup>th</sup> Learning Outcomes for this class.*

Original Research Project: In class, through readings and discussions, we will build a robust understanding of scientific processes that medical anthropologists use to study contemporary global health problems and the socially-driven constructions of difference that contribute to health inequalities. Part of this experience is to also afford you the opportunity to actively practice applying what we learn about in class in the form of an original research project. Medical anthropologists begin research with a research question that seeks to understand how cultural, social, economic and/or political factors influence individual and collective illness experiences, especially those that lead to inequitable burden of disease and suffering. Through the readings and discussions, we will first examine the kinds of research questions that are asked in the field of medical anthropology. We will then strive to understand how original fieldwork using ethnographic and qualitative methods will help us answer our research questions. Readings and discussions will help you gain familiarity in using anthropological methods; by conducting the research project, you will then exhibit the ability to apply anthropological methods in an appropriate manner. Throughout the class, you will communicate your findings with your colleagues and the instructor in order to get ongoing feedback on your project. You will also be asked to engage with the work of your colleagues by providing feedback on their projects. Finally, you will be asked to present your findings in the form of an oral presentation and a final report. We will undertake this project in small incremental steps which will include the following assignments:

1. Research Proposal: The proposal should be at least 1000 words in length and should convey a tentative plan/design for a project. A good research design is based on solid background research; this means delving into what has already been learned through class discussions and readings, using library and online resources. Using this background research, you will propose a research question that can lead to an original project within the semester time frame. A well-organized research proposal should have the following elements:
  - A specific research question.
  - Identification of relevant data/background information that are needed to answer the question.
  - Techniques or methods for acquiring original data (participant observations of people or groups, analysis of existing data, interviews, surveys, etc.).
  - Mention how the methods (from lectures and readings) might be employed.

- Address any ethical issues that the research raises especially in relation to working with vulnerable or stigmatized groups or illnesses and demonstrate an awareness of any relevant health and safety issues.

*This exercise addresses the 2<sup>nd</sup>, 3<sup>rd</sup>, and 4<sup>th</sup> Learning Outcomes for this class.*

2. Annotated Bibliography: This is a comprehensive bibliography of the range of research on a subject that you will explore for your final research paper, with brief descriptive annotations (i.e., summaries) of approximately 8-10 select readings. A researcher who consults an annotated bibliography should be able to define the central research interests and variety of interpretations and theoretical perspectives within a relatively well-defined body of scholarship. A strong bibliography will identify the predominant interpretations on a particular research subject, outline critiques of the dominant perspective, suggest directions for current research, and provide bibliographic citation for subsequent researchers. An annotated bibliography should familiarize researchers with the full range of scholarship on a well-defined topic on health and social inequality. *This exercise addresses the 2<sup>nd</sup> and 4<sup>th</sup> Learning Outcomes for this class.*
3. Progress Report: About halfway through the project, you will complete a written progress report that is designed to help you elicit feedback and generate broader discussions with colleagues. By discussing this in class, it will help us collectively engage with common hurdles encountered during anthropological research and find effective solutions. A well-organized progress report includes the following elements:
  - Summarize the essential elements of the project.
  - Discuss what you have completed and lessons learned so far.
  - Discuss the methods that you are using.
  - Discuss next steps and estimated time for completed any remaining tasks.*This exercise addresses the 2<sup>nd</sup>, 3<sup>rd</sup>, and 4<sup>th</sup> Learning Outcomes for this class.*
4. Peer Review: Peer review helps validate research, establish a method by which it can be evaluated, and increase networking possibilities within research communities. Despite criticisms, peer review is still the only widely accepted method for research validation. A peer review assignment enables you to provide feedback on another colleague's assignment submission. Peer reviews are a tool that allows communication between colleagues and can help you master the concepts of this course and learn from each other. You will do a close reading and offer feedback on two of your colleagues' progress reports. You will also receive feedback from two of your colleagues on your proposal.  
*This exercise addresses the 3<sup>rd</sup> Learning Outcome for this class.*
5. Research Presentation: You will each give a formal presentation on your original research project during the final week of classes. Presentations will be modeled after those given by medical anthropologists often make at professional association meetings. Therefore you will be allotted a 15 minute time limit which will include 10 minutes for your presentation and 5 minutes for questions and discussion from the audience. This feedback from your peers and the instructor will provide another opportunity for further revision of your paper before final submission. A well-crafted presentation will include the following:
  - Outline your research questions and the rationale for them.
  - A brief summary of the background literature.
  - The methods utilized and the rationale for them.
  - Summary of findings with a focus on cultural, historical, political, and social contexts of health and illness.
  - Preliminary assessments of your conclusion.

Assessments will be based on the quality of the argument and ability to explicate the processes and policies that influence inequalities in health and illness experiences, clarity with which the argument is linked to researched literature, and the selection and use of appropriate vocal and visual tools during the presentation. *This exercise addresses the 3<sup>rd</sup> and 4<sup>th</sup> Learning Outcomes for this class.*

6. **Final Research Paper:** Your paper provides you with the opportunity to further explore topics related to the anthropological understandings of health, illness, and social inequality. Throughout the semester, you will work closely with your colleagues and the instructor to develop research questions, the types of sources you will need as relevant background information, and the types of methods you will employ to answer your questions. The research proposal and annotated bibliography will first developed through this iterative process and then approved by the instructor. You will then use these products as the building blocks of this paper. During the progress report and oral presentation, you will receive constant feedback about your findings from your colleagues and the instructor which will help you refine your paper before final submission. Papers will be evaluated on content, organization and writing style (e.g., clarity, cohesiveness, spelling, grammar). A strong, well-organized final paper, therefore, contains the following elements:
- *Introduction:* includes clear articulation of research question(s).
  - *Background research:* summarizes your knowledge of the subject matter prior to undertaking the project using proper citation of relevant sources. Make sure to discuss how your research connects to current issues and debates in global health and medical anthropology and the contributions that it makes to the anthropological study of health and social inequality (e.g., identify gaps in the literature that your research fills).
  - *Project design:* outlines in detail your use of one or more anthropological methods and your data-gathering techniques.
  - *Results:* well-organized and clear presentation of your original data, making use of visual tools (e.g., tables, graphs, etc.) if appropriate.
  - *Findings:* detailed discussion of how your original data contributed to answering your research question(s).
  - *Conclusion:* discussion that summarizes patterns of meaning that were discovered in the data and include suggestions for further research.
  - *References Cited:* provides literature and other sources used in the paper using the American Anthropologist style.

*This exercise addresses the 2nd, 3rd, and 4th Learning Outcomes for this class.*

***Late Assignments: All assignments are due on the date and time designated on the syllabus. Any delay must be prearranged with me before the due date. Late assignments which are not prearranged will not be accepted.***

## **OTHER IMPORTANT INFORMATION**

**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.

**Grading:** I do not discuss grades via e-mail, if you have a question about grades please come see me during my office hours or make an appointment to talk with me. 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.

Grades will be assigned based on the following grading schema:

Discussion Leading: 10%

Exams: 10% each = 20% total

Original Research Project: 70% total

- Research Proposal: 10%
- Annotated Bibliography: 10%
- Progress Report: 10%
- Peer Review: 5% each = 10% total
- Research Presentation: 10%
- Final Paper: 20%

The Grade Scale for this course:

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

94 – 96 = A 84 – 86 = B 74 – 76 = C 65 – 66 = D

90 – 93 = A- 80 – 83 = B- 70 – 73 = C- 0 – 64 = F

**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 of any intended absences for religious observances **within 2 weeks of the start of class**. Prior notification is 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 for a medical reason must make a reasonable effort to contact the instructor 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 (in-class exam, class discussion leading), he or she **must** provide signed documentation of illness from a health care professional, as well as make a reasonable effort notify the instructor 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 (in-class exam, class discussion leading).*

**Needed accommodations 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.

**Writing Center:** The Writing Center works with students, faculty and staff, offering individual consulting on writing as well as workshops on writing, the teaching of writing, and related issues in communication. Services are free to the university community.

**Communicating with me!:** Turn on notifications for the course in Canvas and check your Email regularly, as this will be the main way that I communicate with students regarding updates or course news. You should attend discussion sections regularly. You can also make appointments to come and see me during my office hours. You may also contact me or the TA via email. Keep in mind, however, that after 5pm on weekdays, we are unlikely to respond to your email until the following morning.

**Academic Responsibility:** 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

**DETAILED COURSE SCHEDULE****WEEK 1: Introduction—Medical Anthropology and Global Health**

- Susan Domus, "What Happened to the Girls in Le Roy," *New York Times Sunday Magazine*, March 7, 2012.
- Ruth Benedict. 1934. "Anthropology and the Abnormal," pp. 262-283 of *An Anthropologist at Work; Writings of Ruth Benedict*, edited by M. Mead. New York: Avon Books.
- Sharon Kaufman. 2005. "Appendix A: About the Research" and "Introduction," in ...*And a Time to Die: How American Hospitals Shape the End of Life*. New York: Scribner, pp. 327-332 and 1-20.
- Robert A. Hahn and Marcia C. Inhorn. 2009. "Introduction." In *Anthropology and Public Health: Bridging Differences in Culture and Society* (second edition). New York: Oxford University Press, pp.1-31.
- Pope C and Mays N. (1995). Reaching the part other methods cannot reach: an introduction to qualitative methods in health and health services research. *BMJ* 1995; 311: 42-5.

**WEEK 2: History, Rationality and Belief**

- E. E. Evans-Pritchard, 1937. *Witchcraft, Magic and the Oracles among the Azande*. Oxford: Clarendon Press, pp.21-39, 63-83, 540-544.
- Byron Good. 1994. "Medical Anthropology and the Problem of Belief." *Medicine, Rationality, and Experience*. Cambridge: Cambridge University Press, pp. 1-24.
- John Comaroff and Jean Comaroff. 1992 *Medicine, Colonialism, and the Black Body. Ethnography and the Historical Imagination*. Westview Press. pp. 215-234.
- Allan Young, 1976. "Some Implications of Medical Beliefs and Practice for Anthropology," *American Anthropologist*, 78:5-24.

**Research Proposal DUE on Sunday, February 7<sup>th</sup> by 11:59PM**

**WEEK 3: Understanding Illness: Etiologies, Models and Narratives**

- Arthur Kleinman. 1988. *The Illness Narratives: Suffering, Healing & the Human Condition*. New York: Basic Books, pp. 3-55.
- Nancy Scheper-Hughes. 1992. *Nervoso*. In *Beyond the body proper: Reading the anthropology of material life*. Lock, Margaret M and Judith Farquhar. Eds. Duke University Press, 2007. pp. 459-467
- Charles Rosenberg, 2007. Chapter 2 "The Tyranny of Diagnosis: Specific Entities and Individual Experience" of *Our Present Complaint: American Medicine, Then and Now*. Baltimore: Johns Hopkins University Press, pp. 13-37.

Film: *Latah: A Culture-Specific Elaboration of the Startle Reflex* (Ronald Simons)

**WEEK 4: Therapeutic Trajectories: Medical Pluralism, Hybridity and Movement**

- E. Zhang. (2007). Switching between Traditional Chinese Medicine and Viagra: Cosmopolitanism and Medical Pluralism Today. *Medical Anthropology* 26:1, 53-96.
- Stacey Langwick. (2007). 'Devils, Parasites, and Fierce Needles: Healing and the Politics of Translation in Southern Tanzania', *Science, Technology & Human Values*, 32, 88-117.
- Natasha Dow Schüll, 'Machines, Medication, Modulation: Circuits Of Dependency And Self-Care In Las Vegas', *Culture, Medicine and Psychiatry*, 30 (2006), 223-247.



**Annotated Bibliography DUE on Sunday, Feb 21<sup>st</sup>, 11:59PM****WEEK 5: The Epistemic Cultures of Biomedicine/ Interpreting the Body in Medicine**

- Ludwik Fleck, 1979. "How the Modern Concept of Syphilis Originated." In *Genesis and Development of a Scientific Fact*. Chicago: The University of Chicago Press, pp.1-50.
- Allan Young. 1993. "A description of how ideology shapes knowledge of a mental disorder" in S. Lindenbaum & M. Lock, eds. *Knowledge, power, & practice*, 108-128.
- Byron Good. 1994. "How Does Medicine Construct Its Objects?" In *Medicine, Rationality, and Experience*. Cambridge: Cambridge University Press, pp. 65-87.
- Emily Martin. 1991. "Egg and the Sperm: How Science Has Constructed a Romance Based on Stereotypical Male-Female Roles." *Signs*, Vol. 16, No. 3. (Spring, 1991), pp. 485-501.

**Exam #1 DUE on Sunday, Feb 28<sup>th</sup>, 11:59PM****WEEK 6: Healing, Embodiment and the Placebo Effect**

- Ted Kaptchuk. 2002 *The Placebo Effect in Alternative Medicine: Can the Performance of a Healing Ritual Have Clinical Significance?* *Ann Intern Med* 136: 817-825.
- Blumhagen, D.W. 1979. *The Doctor's White Coat: The Image of the Physician in Modern America*. *Annals of Internal Medicine* 91(1):111-116.
- Thomas Csordas. 1993. *Somatic Modes of Attention*. *Cultural Anthropology* 8 (2): 135-156.
- Coker, EM. 2004. "Traveling Pains": Embodied Metaphors of Suffering Among Southern Sudanese Refugees in Cairo. *Culture, Medicine and Psychiatry* 28(1): 15-39.
- Clarence Gravlee. 2009. How race becomes biology: embodiment of social inequality. *American Journal of Physical Anthropology*, 139(1), 47-57.

**WEEK 7: Institutional Lives**

- Joseph D. Galanek. 2013. *The Cultural Construction of Mental Illness in Prison: A Perfect Storm of Pathology*. *Cult Med Psychiatry* 37(1): 195–225.
- Lorna Rhodes. 1990. "The Game of Hot Shit," in *Emptying Beds: The Work of an Emergency Psychiatric Unit*. Berkeley: University of California Press, pp. 55-80.
- Summerson Carr, "Anticipating and inhabiting institutional identities," *American Ethnologist* 36, no. 2 (2009): 317-336.

**WEEK 8: SPRING BREAK, March 13-20, NO CLASSES****WEEK 9: Structural Violence and Health Care Disparities**

- Paul Farmer, 2010. "On Suffering and Structural Violence." *Paul Farmer Reader*. 328-49.
- Philippe Bourgois and Jeff Schonberg. 2009. "Introduction" and "A Community of Addicted Bodies." *Righteous Dopefiend*. Berkeley: University of California Press, pp. 1-23, 78-115.
- Rouse, Carolyn. 2010. "Patient and Practitioner Noncompliance: Rationing, Resistance, and the Missing Conversation." *Anthropology and Medicine* 17(2): 187-200.

- 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.

Film: Donka: X-Ray of an African Hospital

### **WEEK 10: NO CLASSES (Society for Applied Anthropology Annual Meeting)**

**Progress Report DUE, Sunday, April 3<sup>rd</sup>, 11:59PM**

### **WEEK 11: Governing Bodies and Populations**

- Michel Foucault. 1980. "Body/Power," pp. 55-62; "The Politics of Health in the Eighteenth Century," pp. 166-182 in *Power/Knowledge: Selected Interviews and Other Writings 1972/1977*. Edited by Colin Gordon. New York: Pantheon.
- Sangaramoorthy, Thurka. 2014. "Treating the Numbers: HIV/AIDS Surveillance, Subjectivity, and Risk" in *Treating AIDS*, Rutgers University Press.
- Susan Greenhalgh. 1994 *Controlling Births and Bodies in Village China*. *American Ethnologist* 21(1): 3-30.
- Ian Hacking. 2007. 'Kinds of People: Moving Targets', *Proceedings of the British Academy*, 151: 285-318.
- Adriana Petryna. 2004. "Biological citizenship: The Science and Politics of Chernobyl-Exposed Populations" *Osiris*, Vol. 19, pp. 250-265.

Film: Is it a Boy or a Girl? (Discovery Channel Cable Broadcast, 2000)

### **WEEK 12: Global Health/ New Medical Technologies**

- Joao Biehl. "The Brazilian Response to AIDS and the Pharmaceuticalization of Global Health." In *Anthropology and Public Health: Bridging Differences in Culture and Society* (second edition) edited by Robert A. Hahn and Marcia Inhorn. Oxford, UK: Oxford University Press, 2008, pp.480–511.
- Leslie Sharp, 'Commodified Kin: Death, Mourning, and Competing Claims on the Bodies of Organ Donors in the United States', *American Anthropologist*, 103 (2001), 112-133
- Marcia Inhorn. 2006. "Making Muslim Babies: IVF and Gamete Donation in Sunni versus Shi'a Islam." *Culture, Medicine and Psychiatry* 30:427-450.

**Peer Review DUE, Sunday, April 17<sup>th</sup>, 11:59PM**

**WEEK 13: Progress Discussion**

**WEEK 14: Progress Discussion**

**Exam #2 DUE, Sunday, May 1<sup>st</sup>, 11:59PM**

**WEEK 15: Research Presentations**

**WEEK 16: Research Presentations**

**Final Papers DUE Tuesday, May 17<sup>th</sup>, 1:30PM**