

The Cultural Construction of Disease

Mon. Sept. 27, 2004

Read:

Favret-Saada: Unbewitching as therapy
Wikan: Managing the heart to brighten face and soul: Emotions in Balinese morality and health care
Davis: The cultural constructions of the premenstrual and menopause syndromes

I. The Cultural Construction of Disease

A We have been looking at how other cultures construct disease

1. And, more broadly, how they understand—"construct"—the body as susceptible to disease
2. The Balinese construction of disease etiologies is radically different from ours

B. Understanding the notion of construction is difficult; but it is crucial for this course

1. Following Hahn, the first writing assignment states that:

The culture of a society *constructs* the way...members think and feel about sickness and healing...members...are taught...about different sicknesses and their names, their characteristic symptoms and courses, their causes and mitigating circumstances, their cosmological and moral significance, and appropriate responses

The metaphor of construction suggests that reality is a structure of ideas built by society through social interaction that may include informal as well as formal education. The reality constructed by society makes sense of the experience of sickness and healing to its members.

C. Discuss

II. Ways in which diseases are constructed

A. We speak about *disease*, not illness. Illness is the experience, subjective, cannot be known by anyone else

1. Although the ways in which diseases are constructed obviously affect illness episodes to a great extent

- a. Discuss: examples?
 2. Disease is a *concept* we have in the West concerned with the underlying, core physical condition
- B. Diseases are constructed with respect to cause (etiology)
1. We see malaria as caused by a microbe
 2. Earlier it was thought to be unhealthy night air
 - a. “Roman fever”
 - b. Discuss: other examples?
 3. Both of these explanations are cultural constructions, even though we see one as untrue, mistaken, and one as correct, true
- C. In what way can something true, real, “out there,” something that is caused by an agent like a microbe, be spoken of as a construction?
1. First, “malaria” is a word, a word we use in the English language
 - a. “Malaria” refers to a disorder that happens in humans that results from a chain of causes, one of which involves a microbe
 - b. What we see under the microscope is an image produced by a cultural artifact, it is not the “thing” itself, nakedly “out there” in the world
 - c. The word points to, refers to, is an approximation to, the “thing” “out there”
 - d. Malarial symptoms point to, indicate, a disease; we don’t see them as the disease itself
 2. We *know* there is a particular biological cause; we know malaria’s etiology, so we say we know
 - a. But our knowledge is an approximation; we cannot ever arrive at “pure” biology without culture
 - b. “Biology” itself is *another word* that we use to refer to a set of ideas we have about the world

3. Another way to think of this is to consider how our knowledge will be thought of and discussed 100 years from now
 - a. Probably very similar to how we look at medicine as it was practiced 100 years ago
 - 1) Perhaps 100 years from now people will be seeing our understanding of malaria to be as outdated as we consider the etiology of bad night air to be
 - b. We now say about medical knowledge in 1903 that parts were true, or at least on the right track, and parts were false
 - 1) And that some of the mistaken ideas reflect the larger context in which the knowledge developed
 - 2) Discuss: examples?
 - c. Example: historian of medicine Evelyn Hammond's work on the diphtheria epidemic in three US cities
 - 1) Because of racial prejudice, they handled the epidemic poorly because they didn't treat important segments of the population who were contagious
 - 2) When the vaccine was being introduced
 - 3) We can say that the epidemic was, to some degree, *socially produced*
 - d. We will see this same culturally produced misunderstanding, this kind of myopia, in the Farmer book
 - 1) When he writes about social class and gender and HIV infection

5. Do you now see why we *have* to say the cause of *any* disease is always culturally constructed?
 - a. This doesn't mean the disease isn't *real*, that the cause isn't also biological
 - b. It means that we can never say a disease's cause is entirely biological

- 1) Because in all societies the culture *constructs* the way members think and feel about sickness and healing. They are taught about different sicknesses, their names, etc.
 - c. It's very important to get this straight
 - d. Construction does **NOT** mean totally imagined, invented, fabricated, incorrect
- D. In addition to etiology, notions about just what *is*, what constitutes a disease are cultural constructions
1. Is "old age" a disease? ("He died of old age")
 - a. No. It won't be put on a death certificate
 - b. But we do see death as pathological
 - c. And we do think of human bodies as dying at some point "in the natural order of things"
 - d. Discuss: the difference in how we see heart failure in a 110-year old man and heart failure in a 30-year-old man
 - e. We'll read an article about changes in the cultural construction of death brought about by the need to harvest organs
 2. Is pregnancy a disease?
 - a. Again, most would say no
 - b. And yet we treat pregnant women very much like ill persons
 - 1) Especially when we compare our approach to that of other cultures
 - 2) When a woman in labor arrives at a hospital, they immediately put her in a wheelchair; she may be perfectly capable of walking
 - c. Discuss: other ways pregnant women are constructed as "sick"?
 3. As Davis illustrates, we treat menopause much more like a disease than happens anywhere else—we *medicalize* it
 - a. We prescribe medication for it

- b. We see it as an unfortunate physical condition, debilitating, producing all kinds of disruptions in function in some women
 - c. Davis notes the differences between our construction of it and Japan's
 - 4. Is a broken leg a disease?
 - a. Discuss
 - b. Is a permanently paralyzed leg a disease?
 - 1) Understanding why one is a disease and one an impairment means one has acquired some understanding of the cultural construction of disease in the US
 - c. Birth defects?
 - 1) How are they like diseases, and how unlike?
- E. Treatment is also part of the cultural construction of a disease
 - 1. How the *Txiv Neeb*s in Fadiman diagnosed and treated Lia shows us how the Hmong culturally constructed her malady
 - a. And their overall understanding of treatment
 - 2. Some diseases in the West are fully constructed with respect to treatment
 - a. Discuss: examples?
 - b. Davis discusses instances in which the treatment—usually a medication—constructs the disease
 - 1) Discuss: examples?
 - 3. Some diseases are fully recognized as such even though we feel we don't know enough about them, haven't discovered the perfect treatments
 - a. Diabetes
 - b. Heart disease
 - c. Cancer

4. But others ailments pose problems in treatment because they haven't been fully constructed into diseases
 - a. Either because we don't know what they are (HIV in the 1980s)
 - b. Or, because they don't (as yet) fall into the "disease" category
 - c. Discuss: examples?
 - 1) Attention deficit hyperactivity disorder
 - 2) Gulf war syndrome
 - 3) Chronic fatigue syndrome
 - 4) Fibromyalgia
 - d. The Dumit piece we'll read later on illustrates how many people and institutions are involved in constructing diseases out of these very contested disorders

F. Lessons from the past can be instructive here

1. Tourette's syndrome
 - a. Earlier it was sometimes seen as demonic possession, needing exorcism
 - b. Seen as the body and mind needing discipline
 - 1) Resulting in horrible treatments
 - c. Because of lack of knowledge about the specific cause (e.g., a biological cause they could make sense of)
2. Discuss: witchcraft as an etiology

G. The moral and even aesthetic aspects of a disease are also part of its cultural construction

1. Pregnancy is an altered physical state, it puts women at risk in many ways, but in the abstract it is considered to be a desired state
 - a. Clearly the medicines and devices to avoid it tell us that each instance of pregnancy, each possibility of it, are not always desired

- b. Some pregnancies are desired by the parents but not society
 - c. So we chastise or temporarily sterilize those who we feel shouldn't be parents
 - d. Politicians say that “welfare queens” shouldn't keep having children
 - 1) One California judge said to a mother with a drug problem accused of child neglect, “Norplant or you go to jail”
 - e. Earlier, poor black women in the rural US South were being sterilized without their knowledge or consent
 - 1) “Mississippi appendectomy”
 - f. The mentally ill and retarded used to be sterilized
 - g. And we will see in a video The Lynchburg Story that thousands of Virginians were sterilized because they were poor and deemed to be feeble-minded
 - 1) A kind of preventive medicine for future generations—eugenics
 - 2) These operations happened in most US states
2. Sexually transmitted diseases
- a. A big part of their cultural construction is the moral opprobrium surrounding them
 - b. We'll see another video about syphilis research in rural Georgia on African Americans that required their remaining untreated—and ignorant about this research requirement
- H. Preventive medicine practices derive from culturally constructed disease notions
- 1. Examples?
 - a. Vaccines
 - 1) Moral loading: “Typhoid Mary”
 - a) Dirty, diseased, contagious

- b. The fight over flouride in the drinking water
- c. Policies to prevent fertile women from working in factories with toxic chemicals
 - 1) That other kinds of workers are exposed is apparently OK

III. We all agree that there are underlying biological conditions for most diseases

A. But in these papers you are being asked to:

1. Look at all the ways in which *disease* is not that underlying biology, but a set of words, concepts, values embedded in a cultural, social, political context
2. When choosing your paper topic, try to see yourself stepping back from your notions of a disease as “natural”
 - a. And take an “outsider” position; become an anthropologist
 - b. For example, you can write about a disease outbreak that happened long ago
 - 1) One student did an excellent paper on how London responded to the bubonic plague
 - 2) This was a paper on social production
 - c. Or you can examine a disease by comparing its present construction with its construction in the recent past—how the construction has changed
 - 1) One student did lung cancer
 - d. Or you can examine constructions in progress
 - 1) Gulf war syndrome
 - 2) Multiple chemical sensitivity