Cultural Construction of Disease

Read:

Levi-Strauss: The Effectiveness of Symbols
Favret-Saada: Unbewitching as Therapy
Wikan: Managing the heart to brighten face and soul: Emotions in Balinese morality and health care

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

B. 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 societal members think and feel about sickness and healing. That is to say, the members of a society are taught by others 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.

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 we can see how such constructions obviously affect illness episodes to a great extent

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”

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, is be spoken of as a construction?
   1. Because “malaria” is a word, a word we use in the English language. “Malaria” is the name of the microbe, not the microbe itself
      a. What we see under the microscope is an image produced by a cultural artifact, it is not the “thing” “out there” in the world.

2. We believe in a certain biological cause; we can say we know there is a certain biological cause
   a. But our knowledge is an approximation; we cannot ever arrive at “pure” biology without culture
   b. Biology 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 how our knowledge will be thought of, discussed, in 100 years
   a. Very similar to how we see medicine 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. About that medical knowledge we say that parts were true, or on the right track, parts were false, and some of the mistaken ideas reflect the larger context in which the knowledge developed
   c. Historian of medicine Evelynn 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

d. We will see this same culturally produced misunderstanding, myopia in the Farmer book

1) When he writes about how this country first responded to the AIDS epidemic

4. 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 biological

b. It’s very important to get this straight

c. Construction does not mean imagined, invented, fabricated

D. In addition to etiology, notions about just what is a disease are constructions

1. Is “old age” a disease? (“He died of old age”)

a. No. 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. So that heart failure in a 110-year old man will be seen as pathological in a very different way from heart failure in a 30-year-old man

2. Is pregnancy a disease?

a. Again, most would say no

b. And yet we treat pregnant women very much like ill persons
c. Compared to other cultures

3. 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. We’ll read an article comparing our construction of it to Japan’s

4. Arriving at a conception of a specific disease involves bringing into play notions about etiology and the vaguer notions about what constitutes a disease

a. Is a broken leg a disease?
   1) Using our definition, yes
b. Is a permanently paralyzed leg a disease?
   1) No
   2) Understanding why one is a disease and one an impairment is to acquire 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 Neebs* 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. Strep throat, and some other bacterial infections
3. Some are problematic, because we feel we don’t know enough, haven’t discovered the perfect treatments
   a. Diabetes
   b. Heart disease
   c. Cancer

4. But others pose problems in treatment because they haven’t been fully constructed
   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
      1) Attention deficit hyperactivity disorder
      2) Gulf war syndrome
      3) Chronic fatigue syndrome
      4) Fibromyalgia

F. Lessons from the past can be instructive here

1. Tourette’s syndrome
   a. Seen as possession needing exorcism
   b. Seen as the body and mind needing discipline
      1) Horrible treatments
   c. Because of lack of knowledge about the specific cause (e.g., a biological cause they could make sense of)
      1) And changes in other areas of our belief system (we no longer believe in witchcraft)

G. The moral and ethical 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. And some pregnancies are desired by the parents but not society
   c. So we chastise or 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. Poor black women in rural Mississippi have been 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. 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

F. Notions about preventive medicine derives from culturally constructed diseases
1. Examples?

a. Vaccines
   1) Moral: “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 here you’re 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, multiple chemical sensitivity, etc.