1. Course description

This course introduces students to the field of medical anthropology as it pertains to South Asia. This course will be divided into two parts. First, we will analyze how religious, cultural, political and economic structures impact health and wellbeing. Second, we will look at ethnomedicine, that is, how local systems of healing provide alternative ideas of illness and health, such as medical pluralism and Ayurveda.

Since this is a global seminar, we are in the unique position to combine our in-class learning with field experiences and visits with experts in the field; this will include people who are working in the fields of global health, public health, and/or with alternative medical systems, such as Ayurveda.

2. Course objectives:
   a. Developing a working knowledge of key concepts in the medical anthropology of South Asia and how they impact health and wellbeing including poverty, caste, and everyday violence, etc. and to understand how ongoing public health and global health interventions respond (or do not) to these factors.
   b. Gaining hands-on knowledge and experience with complementary and alternative medicine and their relation to biomedicine in South Asia.
   c. Understanding how healing is conceptualized in cultural terms, as well as understanding how it is a relational practice.

3. Course requirements
   a. Leading discussion (30%)  

Every student will lead one class discussion on a reading of your choice once this quarter (in groups of two or three), lasting about 40 minutes. By noon the day before your presentation, your group should email me a lesson plan on which I will give you suggestions and comments. After you have completed your in-class discussion, you must email me a Collaborative Assessment form (on TED), which will remain confidential. This will help me assess how different members of the group contributed to the preparation.

   b. One research paper, combining a field experience with course material (50%)
c. Course participation (20%)

Your course participation grade includes your willingness and preparedness to class every day, the quality of the questions you ask, your ability to synthesize readings, and offer analyses, and your approach to the classroom as a space of active participation, not passive learning. In addition, participation also includes the ways in which you use our fieldwork trips to facilitate your own learning about medicine in South Asia. How engaged are you during the field visits? Do you take notes and think through what you are seeing outside the classroom with our discussions inside the classroom? How enthusiastically do you participate in all class activities, and does your written and verbal work demonstrate your own intellectual growth?

4. Course schedule

Week 1: Introduction + Social Determinants of Health in South Asia

Veena Das, Affliction: Health, Disease Poverty (selections)

Faye Harrison, Decolonizing Anthropology (selections)

Week 2: Social Determinants of Health (cont.)

Claire Snell-Rood, No One Will Let her Live: Women’s struggle for well-being in a Delhi slum (selections)

Richa Nagar and the Sangtin Collective, Playing with Fire (selections)

Possible field visits (Week 1 and 2):

- Visit to Sanjivini, an NGO that has been providing mental health counseling to individuals and communities in and around New Delhi since 1976 (www.sanjivinisociety.org).
- Visit to/from Global Health Strategies, India. Established in 2010, GHS India specializes in strategic communications, advocacy, research and the implementation of projects on global health issues in India. Their work in India includes enabling access to advanced TB diagnostics and treatment, strengthening our immunization systems and supporting access to vaccines to those most in need. The office also works to implement a comprehensive healthcare program for schools that can work within the framework of the Right to Education Act and the guidelines of the School Health Program. The India office has been working closely with the Government of India and other important stakeholders such as non-governmental organizations, civil society groups and decision makers on what we believe are extremely critical yet neglected health issues.
- Visit to Indian Institute of Public Health (Devaki Nambiar)

Week 3: Medical Pluralism and Healing (in Kerala)

Stefan Ecks, Eating Drugs: Psychopharmaceutical Pluralism in India

Week 4: Medical Pluralism and Healing (cont…)

Murphy Halliburton, Mudpacks and Prozac: Experiencing Ayurvedic, Biomedical and Religious Healing (selections)

Helen Lambert, Medical Pluralism and Medical Marginality: Bone Doctors and the Selective Legitimation of Therapeutic Expertise in India. Social Science & Medicine 74:1029-1036.
Possible field visits (Weeks 3 and 4):

- Visit Amrita University’s free Ayurvedic medical camp
- Visit an Ayurvedic center near the university and receive a treatment (mudpack, massage, etc.)
- Visit a local healing shrine where medical and religious healing is combined (need to identify site)

Week 5: Refugee Health and Tibetan Medicine

“In Dharamsala: Becoming Ready for the Next Life” – The New York Times -  

Sienna Craig, Healing Elements: Efficacy and the Social Ecologies of Tibetan Medicine (selections)


Carole McGranahan, “Narrative Dispossession: Tibet and the Gendered Logics of Historical Possibility”  

Video on Public Anthropology/Monk Immolations:  
https://www.youtube.com/watch?v=Pf2HX0lbGhw&list=PLH1giskVWCFi5h7oy9kTaf-H-xIRbaDpK&index=4

Possible field visits in Dharamsala (Week 5):

- Visit to Men-Tsee-Khang – Tibetan Medicine and Astrological Institute in Dharamsala, India (http://www.men-tsee-khang.org/index2.htm) - from here we can possibly branch out to other field sites/projects.
- Meet with a practitioner of Tibetan medicine