

## The Cultural Construction of Disease

Read:

- Favret-Saada: Unbewitching as therapy<sup>1</sup>
- 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:

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1 St. Thérèse of Lisieux is mentioned in Favret-Saada’s article. **Lisieux** is a

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.<sup>2</sup>

[text is found in your reading assignment for March 1]

## II. Ways in which diseases are constructed

### A. We are speaking about *disease*, not illness

1. Disease is a *concept* we have in the West that is concerned with underlying core physical pathology

- 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 of malaria are cultural constructions, even though we see one as untrue, mistaken, and the other as correct, true
- C. In what way can something we know to be true, real, and “out there,”—something that is caused by an agent like a microbe—be spoken of as a *construction*?
1. First, “malaria” is not a disease; it is a word, a word we use when speaking English and certain other languages
    - a. “Malaria” refers to a disorder that happens in humans that results from a chain of causes, and one link involves a microbe
    - b. What we see under the microscope is an image produced by a cultural artifact

- 1) It is not the “thing” itself, nakedly “out there” in the world
  - c. The word points to, refers to, signals the “thing” that is “out there”
  - d. Malarial symptoms also point to, indicate, a disease, but 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 not total, and knowledge is in our heads; knowledge is cultural
    - 1) The way we learned about it, the way we talk about it, study it, treat it involve culture, even the way we experience it when we’re sick with malaria affect our knowledge
    - 2) We cannot ever experience “pure” biology without culture mediating it
  - 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 approach is to consider how the knowledge we have in 2010 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 see medical knowledge in 1908 as being in part true, or at least on the right track, and in part false

1) And we know that some of the mistaken ideas aren't simply due to lack of knowledge

a) The mistakes systematically reflect the larger context in which the knowledge developed

c. Example: historian of medicine Evelyn Hammonds' work on the diphtheria epidemic in three US cities<sup>3</sup>

1) Because of racial prejudice, they handled the epidemic poorly because they didn't treat important segments of the population who were contagious

a) When the vaccine was being introduced

2) We can say that the epidemic was, to some degree, *socially produced*

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 also biological

b. It means that coming to understand things like disease causes is a culturally mediated process

1) Because in all societies the culture *constructs* the way members understand what causes sickness and healing

2) They are taught about different sicknesses, their names, etc.

c. It's very important to get this straight

d. Construction does **NOT** mean imagined, invented, fabricated, incorrect, not acting in the actual world

D. In addition to etiology, notions about 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. The last book we will read, by Leslie Sharp

- 1) Is about changes in the cultural construction of death brought about by new technologies allowing organs to be harvested

2. Is pregnancy a disease?

- a. Again, most would say no

- b. And yet we treat pregnant women very much like ill persons: pregnancy has been medicalized

- 1) Especially when we compare our approach to that of other cultures

- 2) When a woman in labor arrives at a hospital, she is immediately put in a wheelchair even though 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
  - a. Hormone Replacement Therapy was prescribed for tens of thousands of women until a large study revealed problems
  
  - b. We see menopause as an unfortunate physical condition, something debilitating that produces 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?
  
- 5. Birth defects?
  - a. **DISCUSS:** 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 about their overall understanding of treatment
2. Some diseases in the West appear when a treatment is found
    - a. Davis discusses instances in which the treatment—usually a medication—constructs the disease
    - b. **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. AIDS in the late 1980s
    - b. Diabetes
    - c. Heart disease
    - d. Cancer
4. But other ailments pose problems in treatment because they haven't been fully constructed into diseases
    - a. Either because we don't know what they are

b. Or, because they don't (as yet) completely fall into the "disease" category

c. **DISCUSS:** examples?

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. Earlier it was sometimes seen as demonic possession, needing exorcism

b. Seen to indicate that the body and mind needed 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, is 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. One California judge said to a mother with a drug problem accused of child neglect, "Norplant or you go to jail"
    - 1) Norplant is a contraceptive inserted under the skin on the upper arm; it works for 5 years
  
  - 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

3) I've posted a couple of newspaper articles about these policies

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 Alabama 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 fluoride 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 diseases have underlying biological conditions

- A. But in these papers, if you choose cultural construction (as opposed to social production) you are being asked to:
  - 1. Look at all the ways in which *disease* is not only that underlying biology, but also 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 biological, physical, “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

B. Go to the “Supplementary Reading” section on the class website for other examples

1. March 1 we’ll discuss your topics

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