

Globalization and Health¹

Read: Scheper-Hughes

Sanal

Cohen

I. Introduction

A. Globalization of health sets into motion, circulation

1. Technology

a. Things

b. Medicines, devices, machines

1) Medicines: underuse, overuse, inappropriate use

2. Techniques

a. Procedures

b. Example: reproductive technologies

¹ Information in this lecture is from Craig R. Janes and Kitty K. Corbett, 2009, "Anthropology and Global Health," *Annual Review of Anthropology* 38: 167-183.

a. Contraception

1) Globalization of reproductive and prenatal diagnostic technologies

a) Ultrasound

b) Infertility (we will read)

c) Donor insemination may conflict with cultural or religious beliefs

(1)
Leading to more expensive technologies like in-vitro fertilization

B. Western bioscientific knowledge

1. Bundles of shared understandings and epistemological practices

a. Impact of western bioscience on:

- 1) Conceptions of the body
 - a) Circulation of medicalized objectifications of body
 - b) Organ replacement therapies

(1)
Transform local beliefs and
understandings about the body, life, death

- 2) Ethical issues related to experimentation
 - a) Example of clinical trials
- 3) Commoditization of body parts
- 4) Identity

C. People

1. Brain drain
2. Medical tourism

- a. Procedures more affordable
 - b. Organ transplantation
 - c. Turkey—Israelis
 - d. India—Cohen
 - e. Cosmetic surgery in Brazil
- D. Human tissues, organs, genetic materials
- 1. Sanal, Scheper-Hughes, Cohen
 - 2. Capitalism
 - 3. “Strange markets and „occult“ economies” (Comaroffs)
- E. New social forms
- 1. Knowledge and new communication technologies
 - a. Give rise to new social forms in connection with diseases

b. Social movements

- 1) Dumit's example of activist therapeutic groups
- 2) Not just organized around an objective
- 3) New identities—biologically mediated ones
- 4) A new form of citizenship: evolving politics and ethics

5) In connection with disasters like Bhopal, Chernobyl, tsunami/nuclear disaster

6) Petryna's work on Chernobyl

a) Affected individuals joined by a biologically mediated identity

b) Made claims on the Soviet state

F. Not an active sender/passive recipient process

1. Not homogenizing

a. Things, ideologies, representations are transformed by local beliefs and practices

- b. Are negotiated—just as happens in international development
- c. Localizing global health policies

G. Also circulation of non-Western ideas, materials, practices

1. Asian medicine

- a. Procedures like acupuncture
- b. Materials: Herbal medicine
- c. Ideas

1) Acupuncture: complex systems of diagnosis, explanation, and healing reduced to exchange and consumption of medicinal substances

II. Institutional Actors in Globalized Health

A. States

B. Para-statal: NGOs

- C. Transnational: development banks like IMF, World Bank
 - 1. Larry Summers memo
 - 2. In fact, World Bank is the principal health policymaking institution

- D. Transnational: WHO
 - 1. WHO is trying to reclaim the discourse on health reform
 - 2. More of a rights-based discourse and approaches

- E. Corporations
 - 1. Global pharmaceutical, medical device corporations
 - 2. Politics of biomedical knowledge
 - 3. Participate in medicalization
 - 4. Effects of drug production, international marketing and sales

Classification of disease

Clinical practice—effects

Example of Nestlé baby formula

Policy

How are policies made?

Try to understand how policy-making institutions work

Epistemic communities

Members share common frameworks of knowledge, values, beliefs

Set agendas, frame issues, identify problems, propose solutions

Not just oriented toward technical matters

Networks involve major universities

Especially in disciplines of economics and public health

Their position as members of the global capitalist class—what role does it play?

Critique

Over-focus on education

Farmer example

Too much of a focus on finding “magic bullets”

Overreliance on narrow technical terminology

Role of the market is powerful

Role of neoliberal, structural adjustment ideologies and policies

In some places policies result in inequities increasing

As do contradictions

My example of the Green Revolution: “miracle grains”

Problems with how such model policies are implemented

At the local level, lay practices

Inappropriate prescription and use of pharmaceuticals

Don't have money

Problems with literacy

My example of the Rio de Janeiro pharmacy

Example: the one-child policy in China

A version of Western population science linked to socialist
planning and party-led community mobilization

Coercive family planning continues in many places

Often targeted at poor women

Eastern Europe: Roma communities are targeted

Globalization plays a role in these
policies and coercive implementations

Example of coercive child immunization campaigns

(DOTS approach to multiple-drug-resistant TB)

Paul Farmer's work in Peru, Russian prisons

Disaster management and resettlement

Basic critique: health development programs do not consider poverty and environmental degradation

Root causes of health problems are primary problems

International Health Development

It is clear that the institutional landscape in health development has been transformed

Neoliberal development strategies

Shrink the state, develop civil society institutions

Reduced size, scope, and reach of public health services

Proliferation of nonstate actors

Result: complex mix of groups and organizations at the state and community levels

Problems:

Duplication

Don't coordinate

Compete for funding

Faith-based charities have agendas

As do major private foundations

Erica James' work in Haiti

Continuing issue of interactions between elite, educated technicians from the rich countries and community members living in extreme poverty

My Guatemalan example

New form of colonialism?

Thousands of students abroad from North America: global health practice placements

Scientists travel to sites in the global south to study their disease burdens

To satisfy the needs of science

AIDS industry

Example of clinical trials

Farmer: “global Tuskegee experiment”

Conclusion: Sociology has been defined as the study of unintended consequences

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