

GH708.0
Ethnographic Methods for Global Health Research
Fall 2018

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Fall Semester, 2018, Fridays 1:00-4:00
Peabody Museum Rm 12

Brief Description and Requirements

The overall goal of this course is to introduce students to the place of ethnographic research and writing in global health research, and to provide class members supervised experience in ethnographic research methods. The course has four specific aims. First, the course aims to provide students a basic understanding of ethnographic research in medical anthropology and the experience of reading ethnographic writing. Second, the course aims to provide students with supervised experience in basic tools of ethnographic research. Particular focus will be placed on ethnographic interviewing and observation. Third, the course will provide members of the class an opportunity to (continue to) review anthropological and ethnographic writing relevant to the setting of their research and the primary substantive topic that is the focus of their work. Fourth, the course will provide the class members the opportunity to think through ways to integrate ethnographic components within the research projects to be carried out as part of this program. The course encourages members to build on what they already know about their research sites and projects, and reflect on how this knowledge can be used to frame the research, to organize analysis of data, and to enhance writing of their theses and future publications.

The course will be organized around three primary interviewing and observational experiences: an initial interview with another member of the class, an observation experience, and an in-depth interview with someone not in the class. In addition, each participant will be expected to develop a basic bibliography of anthropological and ethnographic writing relevant to their project and write a short final paper about how ethnographic research can be incorporated into their research projects. All class members are expected to participate actively in the readings, exercises, and class discussions, and to help lead particular classes. Class members are expected to attend the Friday Morning Seminar, a seminar of the medical anthropology program at Harvard; this will provide an opportunity to meet other students, faculty, and clinicians in the medical anthropology community at Harvard, and hear talks given by some leading medical anthropologists and persons in the area of global mental health.

Books for the Class

We suggest students interested in medical anthropology consider buying *A Reader in Medical Anthropology: Theoretical Trajectories, Emergent Realities*, edited by Byron J Good, Michael M J Fischer, Sarah S Willen, and Mary-Jo DelVecchio Good (Wiley-Blackwell (2010).

We will read four chapters from Byron Good's book, *Medicine, Rationality and Experience: An Anthropological Analysis* (Cambridge University Press 1994). The book is available on Amazon, and is translated into Spanish, French and Chinese (as well as Japanese and Italian), for those who prefer. Students are welcome to borrow these and to read in their chosen language.

We will read significant sections from two ethnographies, both based on research in the United States and Canada.

Angela Garcia. 2010. *The Pastoral Clinic. Addiction and Dispossession along the Rio Grande*. Berkeley: University of California Press.

Lisa Stevenson. 2014. *Life Beside Itself*. Berkeley: University of California Press.

Two books will be drawn on, particularly for suggested readings, and may be useful as over-arching texts for the course.

James Davies and Dimitrina Spencer, eds. 2010. *Emotions in the Field. The Psychology and Anthropology of Fieldwork Experience*. Stanford University Press.

Antonius C G M Robben and Jeffrey A Sluka, eds. 2012. *Ethnographic Fieldwork: An Anthropological Reader* (Second Edition). Malden, MA: Wiley Blackwell.

The final readings of the course will focus on the 'anthropology of medical humanitarianism,' and will be drawn from a new book that students may find useful. Sharon Abramowitz and Catherine Panter-Brick, eds. 2015. *Medical Humanitarianism: Ethnographies of Practice*. Philadelphia: University of Pennsylvania Press.

Readings will be placed in PDF on the course website or drop box file.

Syllabus

Week 1 September 7: Introduction to the Course

Introduction to themes in the class. Discussion of ethnographic field research, interviewing, finding levels of meaning, 'emotions in the field,' place of ethnography in the ethnographer's life course. Initial introduction of faculty and students.

Section I: Making Contact: Life Stories, Life Worlds

The course begins with a focus on understanding individual lives through interviewing, as well as an examination of the place of listening to individuals in efforts to understand particular local worlds or 'cultures,' how key experiences in their lives have influenced who they are and what they most care about, experiences with illness (selves, or persons they are close to) and of care-giving, and psychological experience. Particular attention will be given to the issue of stories or narrative – how to listen for stories, the role of plot and “emplotment,” how stories shape lives and social action, and the nature of illness narratives and clinical narratives as co-constructed by individuals with an illness, as well as physicians and medical specialists, and other care-givers. The opening section examines the relations between life stories and events or cultural performances, and the place of plot and drama in both.

The class will be split between discussing readings for the week and discussing students' experiences with the initial interviewing assignment.

Assignment 1: Life History and Family Interview

Participants in the class will divide into pairs, and undertake life history and family interviews with each other, which will be discussed in class during weeks 3 and 4. Each interview will have two foci. **First, review your partner's life history** – childhood, major life experiences, "turning points," illness experiences (their own or that of significant other people), experiences of care-giving, efforts at "narrative coherence" or attempts to make sense of life and where it is going. You may wish to ask about any particular difficult times your interview partner has faced and how they dealt with this. **Second, family experiences.** Do a kinship chart. Interview your partner about the structure and emotional climate in their family when they were growing up – authority relations, affection and intimacy, conflict, family myths, personal responses to family of origin. Interviews are expected to be around 3 hours. Be prepared to discuss the experience of the interviews in class (starting week 3), and write a short analysis (2-6 pages). The analysis should include reflections on what it was like to be interviewed, and what it was like to do the interview – with some attention to how you determined what to reveal and not to reveal about yourself, what you decided to ask about and what you decided not to ask about. **Assignment due: September 29.** (Send all assignments by email to professors Byron Good, Mary-Jo Good, and Eric Jacobson, and to Andrea Chiovenda.)

Week 2 September 14: Making Contact, Listening to Stories

We begin by focusing on how to listen to what people tell us about their lives, and in particular how to listen for stories. Critical to interviewing is to make empathic contact and to elicit, listen for, and not interrupt stories. The Rosaldo piece suggests the importance of our own experience of how we hear what other tell us.

Readings:

Byron Good and Mary-Jo DelVecchio Good. 2000. "Fiction" and "Historicity" in Doctors' Stories: Social and Narrative Dimensions of Learning Medicine. In Cheryl Mattingly and Linda C. Garro, eds. *Narrative and the Cultural Construction of Illness and Healing*. Berkeley: University of California Press.

Byron Good. 1994. Ch. 6: The Narrative Representation of Illness. In *Medicine Rationality and Experience*. Pp135-165. Cambridge U Press.

Renato Rosaldo. 1983. "Grief and a Headhunter's Rage". In Banner, Edward, ed., *Play, Text and Story*. Pp.178-185. AES Proceedings, Washington, DC.

Suggested:

Leston Havens. 1986. "Empathic Language: Finding the Other." *Making Contact: Uses of Language in Psychotherapy*. Pp 11-25.

Jerome Bruner. 1986. Ch. 2: Two Modes of Thought. In *Actual Minds, Possible Worlds*. Pp. 11-2. Cambridge: Harvard University Press.

J. Powles. "Life history and personal narrative: theoretical and methodological issues relevant to research and evaluation in refugee contexts." *New Issues in Refugee Research*, Working Paper No 106. United Nations High Commission on Refugees. 2004: 1–24.

Robert Coles. 1989. Ch. 1 Stories and Theories. In *The Call of Stories: Teaching and the Moral Imagination*.

Week 3 September 21: Stories in the Clinic: Drama, Events, Possible Futures

This week follows a focus on narrative, but with particular attention to how clinical work is structured like a story – events situated between past and futures, plots and 'emplotment,' and the narrative and dramatic qualities of events. These are then placed in relation to the "medical imaginary" and the "biotechnical embrace."

We suggest students, particularly those interested in contemporary medical anthropology, also read the Introduction to *Postcolonial Disorders*, to place the issues of narrative in a broader relationship to studies of subjectivity, the 'political,' and postcolonialism.

Readings:

Mary-Jo DelVecchio Good. 1995. Ch. 8 Competence and Clinical Narratives in Oncology. In *American Medicine: The Quest for Competence*. Pp 171-196. University of California Press.

Cheryl Mattingly. 1998. Ch. 3: The Checkers Game: Clinical Actions in Quest of a Narrative. In Mattingly, *Healing Dramas and Clinical Plots: The Narrative Structure of Experience*. Pp 48-71. Cambridge: Cambridge Un Press.

Mary-Jo Good. 2010. Ch 21 The Medical Imaginary and the Biotechnical Embrace: Subjective Experiences of Clinical Scientists and Patients. In *A Reader in Medical Anthropology*.

Suggested:

Byron Good, Mary-Jo DelVecchio Good, Sandra Hyde & Sarah Pinto. 2008. "Postcolonial Disorders: on Subjectivity in the Contemporary World." In Mary-Jo DelVecchio Good, Sandra Teresa Hyde, Sarah Pinto, Byron J Good, eds. *Postcolonial Disorders*. Berkeley: University of California Press. Pp. 1-40.

Cheryl Mattingly. 2010. The Concept of Therapeutic Emplotment. In B Good et al, eds. *A Reader in Medical Anthropology*. Pp 121-136.

Week 4 September 28: “Cultural Phenomenology” – Entering the Lifeworld of the Other

This session will focus on what anthropologists call “cultural phenomenology” as an approach to investigating and coming to understand the very different social and cultural worlds in which people live. The focus here will be on reading chapters from Prof Byron Good’s book, *Medicine, Rationality and Experience*, and Irving Hallowell’s classic essay on the “behavioral environment of the self” in his work with the Ojibwa Indians in Canada and the northern United States.

Readings:

Byron Good. 1994. *Medicine, Rationality and Experience: An Anthropological Perspective*. Cambridge UK: Cambridge University Press. (Class members may also read this in translation in French, Spanish, or Chinese – or Italian or Japanese – if they prefer. [No guarantees about quality of translation.]

Chapter 1: Medical Anthropology and the Problem of Belief (1-24)

Chapter 3: How Medicine Constructs its Objects (65-87)

Suggested: Chapter 5: The Body, Illness Experience, and the Lifeworld: A Phenomenological Account of Chronic Pain (135-165)

A. Irving Hallowell. “The Ojibwa self and its behavioral environment.” In *Reader in Medical Anthropology*, 38–46.

Section II: “Doing Fieldwork”: Going to places you don’t belong, learning about the place and its history

This section focuses on ethnographic observation in real settings – more classic “fieldwork” (“going to the field”) – and what one has to know about a place and its history to understand this ‘place’ (culture/society, town or village, neighborhood, community, family or household) and how it is understood by those who belong to this place. Some attention will be given to the relationships between interviewing, observation, and participant observation.

Assignment 2: Naturalistic Observation

Undertake the following exercise, then write a short report and be prepared to discuss the observation in class. **Report due October 26.**

Undertake an observation in a setting 'in which you do not belong'

Select a social setting in which you do not normally participate, where you are in some sense 'out of place,' perhaps uncomfortable to be. (This is the single most common experience of ethnographers – certainly when they are entering their work, but many other times as well.) This might be a church, an alternative healing setting, an ethnic bar, a small group of people interacting – a place in which you are neither a regular participant nor completely anonymous. Observe the social interactions, make effort to understand what is going on; record both the interactions and your experience of these. Learn something about the history of this social setting for those with whom you interact. Write a brief report describing the experience, with some brief analysis built in. Use this as an opportunity to write “ethnographically” – to describe the event or experience richly, culturally, to make sense of it (from your own point of view – i.e. write this as an account in the first person).

Week 5 October 5: History/Place: Coming to understand an insider's view of a place

The focus of this week is on entering the field, making relationships, making observations, recording data. Observe in particular how the writer makes her/his personal experience and point of view critical for allowing the reader to understand a particular world or setting. Note the critical role of understanding history – not just to understanding the political economy, but through memory, to the shaping of culture, experience, and responses to efforts to provide care.

Readings:

Angela Garcia. 2010. *The Pastoral Clinic: Addiction and Dispossession along the Rio Grande*. Berkeley: University of California Press.

Introduction – pp. 1-36

Ch. 1. Graveyard – pp. 37-68

William Foote Whyte, *Street Corner Society* (1955 edn). Read the Appendix: On the Evolution of 'Street Corner Society'

Erving Goffman. “On Fieldwork“ *Journal of Contemporary Ethnography* 18: 123–32.

Suggested:

Clifford Geertz. 1983. “From the Native's Point of View”: On the Nature of Anthropological Understanding. In *Local Knowledge: Further Essays in Interpretive Anthropology*. Pp. 55-70. NY: Basic Books.

Paul Rabinow. 1977. *Reflections on Fieldwork in Morocco*. Chs. 3 and 6.

Marjorie Shostack. 1981. Introduction to *Nisa: The Life and Times of a !Kung Woman*. Pp. 1-43. Harvard University Press.

Robert Desjarlais. 2010. Struggling Along: The Possibilities for Experience Among the Homeless Mentally Ill. In *A Reader in Medical Anthropology*. Ch. 15, pp 160-174.

Week 6 October 12: History/Place: Coming to understand an insider's view of a place

In this session, we continue issues from Week 5 – again, focusing on the role of history and memory in determining how a community responds to any efforts to identify an epidemic or provide interventions and care.

Readings:

Lisa Stevenson. 2014. *Life Beside Itself: Imagining Care in the Canadian Arctic*.

Berkeley: University of California Press

Introduction – pp. 1-20

Ch. 1. Facts and Images – pp. 21-48 (**suggested**)

Ch. 3. Anonymous Care – pp. 49-74

Suggested:

Jessica M. Mulligan. 2014. *Unmanageable Care*. New York: NYU Press. Ch. 3. New Consumer Citizens: Life Histories – pp. 89-122. Appendix: A Methodological Appendix – pp. 213-240.

George E. Marcus and Michael M.J. Fischer. 1986. “Ethnography and Interpretive Anthropology.” Ch. 2 in *Anthropology as Cultural Critique: An Experimental Moment in the Human Sciences*. Chicago: The University of Chicago Press.

ACGM Robben and JA Sluka, eds. “Fieldwork in Cultural Anthropology: An Introduction,” and “Part 1: Beginnings.” In *Ethnographic Fieldwork: An Anthropological Reader*. 1-28 and 29–32.

Hortense Powdermaker. 2012 [1967]. A Woman Going Native. In *Ethnographic Fieldwork: An Anthropological Reader*. Antonius C G M Robben and Jeffrey A Sluka, eds. Pp. 65-75. NY: Wiley-Blackwell. [Originally from Powdermaker, Stranger and Friend: The Way of an Anthropologist. 1967]

Section III: Some Key Domains of Ethnographic Research

In the remainder of the course, we take on several key examples of ethnographic research. These include studies of the ‘inner life of medicine,’ studies of violence, trauma, and cultural trauma, studies of individual and societal experiences of ‘being haunted,’ and humanitarianism. These will be combined with one of the key practical experiences of the course: conducting an in-depth Interview with one individual. What ties these areas of research and the assignment together is our conviction of the importance of understanding issues such as medical practice, responses to public health campaigns, and violence and trauma through in-depth interviews with individuals. We return to the issue raised in the Introduction to *Postcolonial Disorders* that many extremely critical issues cannot be easily discussed – for personal and political reasons – and that what one learns from working with individuals more intensely and over some time is often quite different from what one learns from initial interviews. The remainder of the course focuses on these issues, with the assumption that this aspect of ethnographic work can be built into project in global health delivery, whatever mixed methods are being used.

Assignment 3: An In-Depth Interview with One Individual

The basic assignment is to carry out four interviews (minimum three) with the same person – in order to give class participants the experience of how interviews change over time, as we have a chance to get to know more and more about an individual. It is expected that the interviews will focus on key experiences in the person’s life – that is, in part on psychological aspects of a person’s experience. How to choose the person to be interviewed and how to undertake the interviews will be discussed in class.

The experience of interviewing one person several times will require the students/fellows in the class to think about how to select someone, how to tell the person what this is about, and how to think about what kind of relationship this will be. In some senses, it is like entering an ethnographic field. Conducting multiple interviews gives time for things to emerge in the conversation that cannot emerge in one or two interviews. It will require class members to think about how to listen, how much to talk about themselves, whether there should be limits on what the person tells you, who sets such limits for what reasons, and thus classic issues both in psychotherapy or clinical relationships (transference, countertransference), as well as in field research. At the end of the interview process, even in only four interviews, issues may arise about how to end the interviews, whether the relationship will end or continue, or how one’s relationship with the person interviewed will change the relationship (if this is with someone you knew before). And finally, the exercise will force the interviewer to think about how to record the data – not just the words of the interview, but also the thoughts and feelings of the interviewer during the process – and how to analyze and write up the findings of such an experience.

During the class, each student will be expected to discuss their choice of person to interview and dilemmas that arise in the course of the interviews. Each student will be expected to transcribe a part of one interview and present it in class for discussion – or describe a particular interview in some detail. **A final report on this interview exercise will be due at the end of class (December 15).**

Section IIIA: The Inner Life of Medicine

Week 7 October 19: Clinical Realities, Moral Dilemmas, and the “Inner Life of Medicine”

This week we will explore how physicians and other medical clinicians experience their work and the challenges of disease entities. We will begin with readings that are collaborative efforts by Mary-Jo DelVecchio Good with her physician colleagues, in oncology in the US, and in Internal Medicine and Pediatrics in Kenya and Tanzania. Two papers look at the experience of Kenyan and Tanzanian academic physicians and compare the clinical realities and moral dilemmas experienced by American oncologists. Additional readings explore the inner life of medicine from different perspectives.

Readings:

Mary-Jo DelVecchio Good with Esther Mwaikambo, Erastus Amayo, and James M’Imunya Machoki and Irene Kuter and Rita Lingood. “Clinical Realities and Moral Dilemmas: Contrasting Perspectives from Academic Medicine in Kenya, Tanzania, and America.” *Daedalus* 128(4): 1999, 167–96.

Giuseppe James Raviola and Mary-Jo DelVecchio Good. HIV, Disease Plague, Demoralization and “Burnout”: resident experience of the medical profession in Nairobi Kenya. *Culture, Medicine and Psychiatry: (1)*2002.

Introduction to "The Biotechnical Embrace." In *A Reader in Medical Anthropology*, 265–71.

David Eaton. “Ambivalent Inquiry: Dilemma of AIDS in the Republic of Congo.” Ch. 8 in *Postcolonial Disorders*, Mary-Jo DelVecchio Good et al., eds. 238–259.

Suggested:

Charles L. Bosk. Introduction and Appendix in *Forgive and Remember: Managing Medical Failure*. 2nd edition. University of Chicago Press, 2003.

Mary-Jo DelVecchio Good. “Review of *Forgive and Remember: Managing Medical Failure*.” *Social Forces* 83(1), 2004: 424–426.

Holmes SM, Jenks A, and Stonington S, eds. “Theme Issue: Anthropologies of Contemporary Clinical Training.” *Culture, Medicine and Psychiatry*. 2011; 35(2).

Sjaak van der Geest and Kaja Finkler. “Hospital Ethnographies, an introduction.” *Social Science & Medicine* 59 (2004): 1995–2001.

Marcia C. Inhorn. 2010. Quest for Conception: Gender, Infertility, and Egyptian Medical Tradition. In *A Reader in Medical Anthropology*.

Section IIIB: Violence, Haunting, Humanitarian Responses

Week 8 October 26: Violence, Trauma, Memory – Ethnographic Writings

This week takes on issues of anthropological studies and writing in times of violence and its aftermath. Both individual and cultural or historical trauma – trauma suffered by whole societies or groups within a society – are critical for understanding individual lives and lives of communities. Despite their importance, memories of violence are often hidden, unspoken, and even unspeakable. How then can they be included in ethnographic studies and writing?

Readings:

Byron Good and Mary-Jo DelVecchio Good. 2015 Toward a Cultural Psychology of Trauma and Trauma-Related Disorders. In Julia Cassaniti and Usha Menon, eds. *Universalism without Uniformity: Exploration in Mind and Culture*. Pp. 260-279.

Leslie Dwyer and Degung Santikarma. 2007. Posttraumatic Politics: Violence, Memory, and Biomedical Discourse in Bali. In Laurence J Kirmayer, Robert Lemelson, Mark Barad, eds. *Understanding Trauma: Integrating Biological, Clinical, and Cultural Perspectives*. Pp 403-432. Cambridge University Press.

Mary-Jo DelVecchio Good. 2015. Acehese Women's Narratives of Traumatic Experience, Resilience, and Recovery. In *Genocide and Mass Violence*. Devon E Hinton and Alexander L Hinton, eds. Pp. 58-82. Cambridge University Press.

Janis Hunter Jenkins. 1991. The State Construction of Affect: Political Ethos and Mental Health among Salvadoran Refugee. In *A Reader in Medical Anthropology*.

Suggested:

Erica James. 2010. The Political Economy of 'Trauma' in Haiti in the Democratic Era of Insecurity. In Byron J Good, Michael M J Fischer, Sarah S Willen, and Mary-Jo DelVecchio Good, eds. *A Reader in Medical Anthropology: Theoretical Trajectories, Emergent Realities*. Pp. 481-495. Wiley-Blackwell (2010).

Veena Das. 2000. The Act of Witnessing. Violence, Poisonous Knowledge, and Subjectivity. Pp. 205-225. In Veena Das, Arthur Kleinman, Mamphela Ramphele, and Pamela Reynolds. *Violence and Subjectivity*. Berkeley: Un of Calif Press.

Begona Aretxaga. 2008. Madness and the Politically Real: Reflections on Violence in Post-Dictatorial Spain. In M Good, S Hyde, S Pinto, B Good, eds. *Postcolonial Disorders*. Pp. 43-61.

Week 9 November 2: "Hauntology" – The Ethnography of Haunting Ghosts and Haunting Memories

This week focuses on how to include haunting ghosts and haunting memories in ethnographic research and writing. The term "hauntology" – the science of haunting or being haunted – comes from French philosopher Jacques Derrida. However, the idea that individuals and societies are haunted by memories has been important over the last two decades in literary studies, and is now becoming an important part of anthropological writing. We discuss here ways to include such ideas in global health research.

Readings:

Byron J Good. 2015. Haunted by Aceh: Specters of Violence in Post-Suharto Indonesia. In *Genocide and Mass Violence*. Devon E Hinton and Alexander L Hinton, eds. Pp. 58-82. Cambridge University Press.

Avery Gordon. 1997. Introduction. *Ghostly Matters: Haunting and the Sociological Imagination*. Pp. xv-xx. University of Minnesota Press.

Erica James. 2008. Haunting Ghosts: Madness, Gender, and *Ensikirite* in Haiti in the Democratic Era. In Mary-Jo DelVecchio Good, Sandra Teresa Hyde, Sarah Pinto, Byron J Good, eds. *Postcolonial Disorders*. Pp. 132-156. Berkeley: University of California Press.

Suggested:

Tom Ball and Theresa D. O'Neil. 2016. Square Pegs and Round Holes: Understanding Historical Trauma in Two Native American Communities. In Devon E. Hinton and Byron J. Good. *Culture and PTSD: Trauma in Global and Historical Perspective*. Pp. 334-358. Philadelphia: University of Pennsylvania Press.

Week 10 November 9: In-depth Studies of Individual Lives

The readings and discussion for this week are intended to supplement the interviews being carried out by members of the class. They demonstrate the importance of listening psychologically while working over time with individuals, of being aware of issues that psychoanalysts have called 'transference' and 'countertransference,' and of thinking how to write about those persons the ethnographer comes to know deeply.

Readings:

Angela Garcia. 2010. Ch. 2: The Elegiac Addict. In *The Pastoral Clinic: Addiction and Dispossession along the Rio Grande*. Pp. 69-110. Berkeley: University of California Press.

Byron J Good. 2012. "Phenomenology, Psychoanalysis, and Subjectivity in Java." *Ethos* 40:24-36.

Chioventa, Andrea, forthcoming. "From Metaphor to Interpretation: 'Haunting' as Diagnostic of Dissociative Processes." *Ethos*.

Suggested:

Good, Byron, Henry Herrera, Mary-Jo DelVecchio Good, and James Cooper, 1985. "Reflexivity, Countertransference and Clinical Ethnography: A Case From a Psychiatric Cultural Consultation Clinic". In: Hahn, Robert and Atwood Gaines, eds., *Physicians of Western Medicine*, Reidel Publishing Company.

Vincent Crapanzano. 1980. Part I. *Tuhami: Portrait of a Moroccan*. Pp. 27-72. University of Chicago Press.

John Borneman. 2011. Daydreaming, intimacy, and the intersubjective third in fieldwork encounters in Syria. *American Ethnologist* 38:234-248.

November 16: American Anthropology Assn. annual meetings, Washington DC. No class. Please use this time to work on in-depth interviews.

November 23: University Holiday (American Thanksgiving), no classes

Week 11 November 30: Humanitarianism

Increasingly, medical anthropologists and global health specialists carry out ethnographic research from within international humanitarian organizations. Some research contributes specifically to the work of such organizations, and part of the goal of this course is to examine how to integrate ethnographic work into such research. However, this has also led to an anthropology of humanitarianism – ethnographic and anthropological writing about humanitarianism and humanitarian organizations, examining with a critical eye the benefits and failures of such organizations and their work, and the motives that guide such organizations and individuals working within them. The readings for this week provide a brief introduction to what has become a very large body of work about specific humanitarian organizations (such as Medicine Without Borders, or UN organizations), about humanitarianism, or about specific settings and programs in which medical humanitarian work was conducted.

Readings:

Select at least 2 chapters from this book to read:

Sharon Abramowitz and Catherine Panter-Brick, eds. 2015. *Medical Humanitarianism: Ethnographies of Practice*. Philadelphia: University of Pennsylvania Press.

Sharon Abramowitz and Catherine Panter-Brick. Bringing Life into Relief: Comparative Ethnographies of Humanitarian Practice. Pp. 1-19. (Introduction to the book)

Laura Wagner. Ch. 2. Compassion and Care at the Limits of Privilege: Haitian Doctors amid the Influx of Foreign Humanitarian Volunteers. Pp. 41-57.

Tim Allen. Ch. 5. Life Beyond the Bubbles: Cognitive Dissonance and Humanitarian Impunity in Northern Uganda. Pp. 96-118.

Sharon Abramowitz. Ch. 7. What Happens When MSF Leaves? Humanitarian Departure and Medical Sovereignty in Postconflict Liberia. Pp. 137-154.

Stuart Gordon. Ch. 9. The British Military Medical Services and Contested Humanitarianism. (Afghanistan)

Peter Locke. Ch 10. Anthropology and Medical Humanitarianism in the Age of Global Health Education. (Sierra Leone)

Amy Moran Thomas. Ch 11. The Creation of Emergency and Afterlife of Intervention: Reflections on Guinea Worm Eradication in Ghana. Pp. 209-225.

Suggested:

Mary-Jo DelVecchio Good, Byron J Good, Jesse Grayman. 2010. Complex Engagements: Responding to Violence in Post-Conflict Aceh. In Didier Fassin and Mariella Pandolfi, eds. *Contemporary States of Emergency: The Politics of Military and Humanitarian Interventions*. Pp 241-266. Zone Books, The MIT Press, Cambridge, MA.

Week 12 December 7: Discussion and Reflections

This week will focus on discussion of and reflections on the interviews being conducted by members of the class, as well as more general reflections on conducting ethnographic research as part of global health delivery work.

Final assignment: Brief Paper on How to Integrate an Ethnographic Component into the Research Projects Being Conducted for the MMSc Theses

The final requirement for the course is a short paper (2-6 pages) that reflects on how the ethnographic methods discussed in this class will inform the MMSc thesis projects of each student and how the studies to be carried out can integrate ethnographic components. This is an opportunity to reflect on issues that have been particularly interesting or problematic for members of the class during the course of semester. Please include a page of references of ethnographic writings of special interest for your project.

Final Papers due December 15.

