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Critical Illness Studies

Independently Designed Major: Rationale

### **What is Critical Illness Studies?**

Combining a variety of approaches to explore the mechanisms of chronic illness and disability, this Critical Illness Studies major is designed to incorporate social and cultural forces in the growing narration of how illness is constructed and experienced within society. Currently, most individuals tend to imagine illness through the lens of the medical model. This might include the viewpoint that “being sick is a straightforward event” (White), involving an external force that causes a bodily ‘malfunction’ that can be cured by following a piece of medical advice. However, the reality of the illness and disability experience is not so cut-and-dry. Despite what the typical Western medical model might suggest, the disease experience is not a universal occurrence, entirely segregated from time and place, but is heavily influenced by the cultural and social systems surrounding a patient. These systems can influence the ways in which a patient regards themselves and their disease, how doctors conceptualize and treat illnesses, and the ways in which society responds to diseases through social interactions and policy. The biomedical diagnosis is thus accompanied by a deluge of cultural and historical meaning and knowledge, which can have substantial consequences on a patient.

Where a doctor recognizes a biophysiological state of disease with their diagnosis, they also unintentionally create a social state by “assigning the meaning of illness to disease” (Freidson), effectively creating the illness experience. Those managing illnesses often are forced to reevaluate themselves in the context of their disease, simply because it carries so much social weight and resulting individual-level importance. For instance, those diagnosed with breast

cancer often find themselves immersed in the illness-based social movement connected to their diagnosis, where there is a community of those with similar experiences (Klawiter, Ehrenreich, Orenstein). Social circles, self-definition, and the meaning of illness are all reconsidered in the context of a diagnosis, actively shaping the parameters of illness (Conrad and Barker). Thus, it is important to contextualize illness through the melding of both biological and anthropological perspectives to understand and recount the more multifaceted experience of illness to answer one critical question: how does society disable individuals with chronic illness?

The most accurate home for such a study is within the medical anthropology discipline, which Stanford University describes as such: “medical anthropology is the study of how health and illness are shaped, experienced, and understood in light of global, historical, and political forces” (Stanford). Currently, this field is expanding in scope and gaining traction within academic and professional circles as more liberal conceptions of illness become mainstream. Both graduate and undergraduate programs have begun to incorporate a social and cultural model of disability into the educations of many health-oriented students, while also creating a distinct concentration on the crossover between the health and social sciences. Emory University, Washington University, and public institutions across the country (including the University of North Carolina) are phasing in undergraduate majors concentrated on the intersection between anthropological and medical studies (Medicine & Society Program, Medical Anthropology Major, *B.A.*), while larger universities like Harvard and Stanford are expanding their graduate studies programs in this field (Medical Anthropology, *M.A.*). At last, the social and biological mechanisms that embed illness, on both a cellular level and interpersonal level, and the organizations that are responsible for such interactions, such as hospitals and illness-based organizations, are being more critically examined.

## Why Does it Matter?

While the importance of understanding and addressing issues related to the health and wellbeing of the human population need not be justified, a focus on the cultural components of illness is now necessary as rates of disability grow (World Health Organization) and modern understandings of chronic illness evolve. Currently, over one billion people around the globe live with some form of a disability, making them the largest minority group (World Health Organization). However, disabled populations face some of the most significant discrimination barriers in almost all facets of their lives, most notably including employment, education, and physical accessibility (United Nations). And, as medical advances give rise to longer lifespans for the average person, the number of elderly peoples who disproportionately experience disability is growing rapidly (United Nations).

These statistics alone are reason enough to justify the emergence of the field of medical anthropology, but I also have my personal reasons for pursuing a major within the field. Following my diagnosis of [REDACTED] during my senior year of high school, I became involved in an illness-based organization and experienced many of the social and cultural pressures that accompany such a diagnosis firsthand. Following a variety of treatments and surgeries, I was heavily encouraged to join the [REDACTED] Foundation, where I acted as an “honored hero” to encourage patients and families to walk 5Ks, buy t-shirts, and donate to fund research to “find a cure.” My doctors even relied on this organization to provide me with a definition of my disease and symptoms, and their website acted as a database for the drugs and treatment types that were available. Within this space, I found myself surprised by the overly positive outlook of the organization that emphasized those currently in remission and abandoned those who had not “overcome” their disease. [REDACTED] were

effectively painted as positive and transient incidents in a person's life, something that could be overcome with proper medical care and mental fortitude, leaving you stronger than before your diagnosis. The community never left space in which to address and acknowledge the feelings of anger and frustration at limited treatment options, the sadness and isolation brought on by chronic pain, and the struggles of living with the stigmatized representation of a mostly invisible illness within society.

These illness-based organizations, and the social/cultural implications that follow them, would be an interesting topic for potential thesis research. While there seems to be an increasing focus on the patient experience within the biomedical field (van Gennip, et al.), or studies into how illness-based organizations can better organize and train staff (Turner), the literature is significantly lacking in work that challenges the conception of illness-based organizations and the diagnosis process for individuals with chronic illness. Thus, I want to use ethnographic research to interrogate the cultural components of the biomedical experience, specifically concerning group formation and identity construction among those who are chronically ill.

### **Medical Anthropology at Colorado College:**

Here at Colorado College, there does not yet exist a space for those interested in majoring in fields rooted in medical anthropology. While the Sociology department's Health and Society concentration is one avenue with which to explore public health, it is heavily rooted in quantitative research methods and sociological theory. This sociological approach falls short with its lack of qualitative ethnographic research methods, which I believe are necessary to target the questions I am interested in, and my approach thus require an anthropological lens. Additionally, the anthropology department alone does not offer a focus on medical topics. While

biological anthropology is an offered subfield, its evolutionary emphasis does not significantly interrogate modern conceptions of illness and address the topics I am interested in. Within the natural science departments of Organismal Biology and Ecology, Molecular Biology, and Human Biology and Kinesiology, there is also no space for anthropological questions and research.

Thus, I believe that my intended course of study is not available within any existing majors or minors, but can neatly find a home within an amalgamation of the Anthropology and Human Biology and Kinesiology departments. The subject of focus and the methodology of these two departments would contribute to an effective look into the field. The anthropological methodology of ethnography would allow for me to conduct qualitative research with individuals about their personal experiences within the larger cultural context, while the biological investigation techniques of human biology and kinesiology would facilitate the research methods required in the study of the biological embedding of illness. Together, these two disciplines can provide insight into very different aspects of the illness experience and interrogate the existing social/cultural and medical models of disability and illness.

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Critical Illness Studies

Independently Designed Major: Plan of Study

At-A-Glance Table:

Academic Year	Course Number	Course Title	Units			
2020-2021	BE106	Biology of Animals	1			: already completed
2020-2021	CH107	General Chemistry	1			: will be completed this year
2021-2022	MB131	Introduction to Molecular and Cellular Biology	1			: to be completed later
2020-2021	SO246	Sociology of Health and Medicine	1			
2021-2022	AN235	Global Health: Biosocial Perspectives	1			
2021-2022	HK204	Introduction to Human Anatomy	1			
2023-2024	HK321	Human Physiology	1			
2023-2024	HK350	Investigations in Human Biology and Kinesiology	1			
2022-2023	AN206	Doing Ethnography	1			
2022-2023	GS350	Interdisciplinary Research: Process and Theory	1			
2023-2024	GS400/401	General Studies Thesis Course	1			
2022-2023	Study Abroad*	Health, Culture, and Community	1			
2022-2023		Globalization and Health	1			
2022-2023		Public Health: From Biology to Policy	1			
2022-2023		Community Health Research Methods	1			
		Total Units	15			

\*pending acceptance into the SIT Fall 2022 IHP Health and Community: Globalization, Culture & Care program

Course Justifications:

**Course:** BE106 Biology of Animals

**Prerequisites:** None

**Justification:** This class acts as a foundational course, necessary for the understanding of basic human biology that can be built upon in more challenging classes to understand the mechanisms of biological embedding within the biomedical approach to illness.

**Course:** CH107 General Chemistry I

**Prerequisites:** 2yrs HS algebra & 1yr HS chemistry

**Justification:** Similar to BE106, this class acts as a foundational course, necessary for the understanding of basic chemistry that can be built upon in more challenging classes to understand the mechanisms of biological embedding within the biomedical approach to illness.

**Course:** MB131 Introduction to Molecular and Cellular Biology

**Prerequisites:** CH107 General Chemistry I

**Justification:** Building off of the knowledge gained in BE106 and CH107, this class joins basic biology and chemistry to explore the cellular mechanisms of biological embedding that underlie the biomedical approach to illness.



**Course:** SO246 Sociology of Health and Medicine

**Prerequisites:** Any 100-level sociology class or COI

**Justification:** From the course description: “presents a sociological alternative and complement to the bio-medical paradigm and critically examines public health, the healthcare system, and medicine in their larger social, economic, and political milieus.”

**Course:** AN235 Global Health: Biosocial Perspectives

**Prerequisites:** None

**Justification:** From the course description: “The course examines improvements in global health, growing inequalities, the legacy of colonial medicine, and social justice in health from the perspectives of medical anthropology and public health. We draw from cases across the globe... to explore the intersection of biological, social, and cultural factors that determine health and well-being.”

**Course:** HK204 Introduction to Human Anatomy

**Prerequisites:** BE106 Biology of Animals OR MB131 Introduction to Molecular and Cellular Biology

**Justification:** This class acts as an introduction to human biology, where knowledge gained in previous classes (BE106, MB131) can be applied to the human body to understand the fundamental concepts of human anatomy. This is crucial to the understanding of the biomedical approach to illness.

**Course:** HK321 Human Physiology

**Prerequisites:** HK204 Introduction to Human Anatomy

**Justification:** Building upon HK204, this class is designed for health-oriented students to understand normal physiological relationships of major organ systems in the human body from the cellular to the organismal level. This is crucial to the understanding of the biomedical approach to illness.

**Course:** HK350 Investigations in Human Biology and Kinesiology

**Prerequisites:** HK204 Introduction to Human Anatomy and COI

**Justification:** This class acts as my human biology and kinesiology methods course, providing me with the research methods necessary to carry out an independent research project and eventually my thesis project.

**Course:** AN206 Doing Ethnography

**Prerequisites:** None

**Justification:** This class acts as my anthropological methods course, providing me with the research methods necessary to carry out an ethnographic study and eventually my thesis project.

**Course:** GS350 Interdisciplinary Research: Process and Theory

**Prerequisites:** None

**Justification:** Required for any independently designed major.

**Course:** GS400/401 General Studies Thesis Course

**Prerequisites:** None

**Justification:** Required for any independently designed major.

**Course:** Study Abroad Courses

**Prerequisites:** None

**Justification:** While living abroad in Vietnam, South Africa, and Argentina, these four classes will allow me to compare health systems and strategies, community well-being, and multiple factors affecting human health in different contexts, on both local and global scales. This will help to strengthen my ability to understand, interpret, and compare the sociocultural, ecological, economic, political, and biological factors that shape and predict human health.