

LECTURE NOTES

For Health Science Students

Introduction to Sociocultural Anthropology



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In collaboration with the Ethiopia Public Health Training Initiative, The Carter Center,
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PREFACE

Anthropology is a social science, which studies mankind in its entirety. The term in its literal sense means, “study of mankind”, as it is a combination of two Greek words, namely, *anthropos* and *logos*. Anthropology has gained popularity rapidly within the social/ behavioral sciences circle. Through its various fields of specialization, it offers us great insights into the ways of lives of human societies across time and space.

Although the science of anthropology studies all human societies across time and space, it has conventionally been accepted to associate anthropology with the study of the societies and problems of the traditional, non-western peoples.

Health science students learning this discipline have a great advantage of gaining fresh insights and practical benefits in their personal lives and professional practices. Anthropology along with other sisterly disciplines such as sociology, economics, social psychology, human/ cultural geography, history and political sciences has now become essential component

of the health and medical sciences curricula in universities and other training institutions abroad. Following this example, similar institutions in Ethiopia have also included them in their curricula.

Before going any further, I want to make clear that due to its more relevance to the conditions and contexts of developing societies such as Ethiopia; as well as due to the fact that the new health policy of the country focuses on the social, cultural, behavioral, and related dimensions of health; this teaching material is more of sociocultural anthropology, and hence may appropriately be labeled as *Introduction to Sociocultural Anthropology*.

These lecture notes on introductory sociocultural anthropology are prepared for the health and medical sciences students in institutions of higher learning in Ethiopia. Their purpose is to provide the students with basic ideas and knowledge in the science of anthropology in general and sociocultural anthropology in particular. By learning the materials presented in these lecture notes, it is believed that students will be able to understand and appreciate the basic issues,

principles and approaches of sociocultural anthropology. Students may also gain an indirect benefit of appreciating the social, cultural, and behavioral dimensions of health and disease.

Specifically, the main learning objective of *introduction to sociocultural anthropology* is to familiarize students with the basic ideas, issues, concepts and principles of anthropology. Students will be able to describe the meaning, scopes, methods, history and uses of anthropology, and its relations to other disciplines. The students will be also able to appreciate the relevance of sociocultural anthropology in their personal and future professional practice. The last chapter on medical anthropology will particularly help students understand the applications of anthropology in health/ medical sciences.

The lecture notes are organized seven chapters. Chapter One deals with introductory issues such as the definition, history, branches, subject-matter and importance of anthropology and its relations to other disciplines. Chapter Two deals with major perspectives of sociocultural anthropology and research methods. In Chapter Three, the concept of culture is discussed.

Major themes and concepts in the anthropology of culture are introduced in this section. Chapter Four covers topics in kinship, family and marriage. In Chapter Five, the anthropology of religion is presented. Here, the meaning, forms, functions and medical relevance of religion and its beliefs and practices are discussed. Important other concepts in sociocultural anthropology such as cross-cultural issues of gender, ethnicity and race, and their implications for health are raised and discussed in Chapter Six. The last Chapter deals with selected concepts and topics in medical anthropology.

Each chapter begins with learning objectives, ends with a chapter summary and has review questions. Inside the text, there are illustrative boxes, tables and figures which are meant to aid the students in utilizing the notes more effectively. Throughout the text, key terms and concepts are highlighted in bold and they are put in glossary section for easy reference. Important references used in preparing these lecture notes are also cited in the text and they are put in bibliographical section. However, it is advisable to use the lecture notes as *complementary* materials. Students should refer to

the textbooks and other references for detailed and richer knowledge.

The author wishes an enjoyable and fruitful reading for the students.



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Zerihun D. Doffana, MA, Social Anthropology
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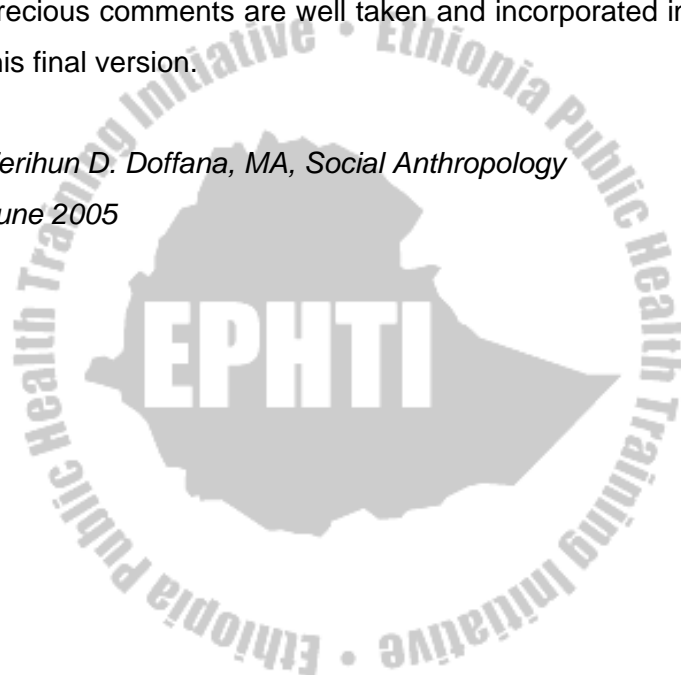


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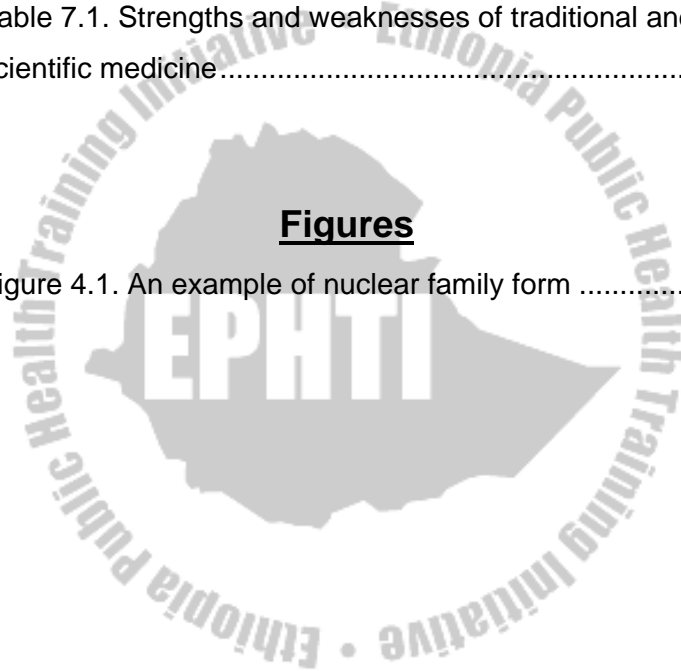
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CHAPTER ONE

INTRODUCTION

Learning Objectives

After completing this Chapter, the students are expected to:

- Define anthropology and describe its basic concerns and subject matter;
- Describe the different sub-fields of anthropology;
- Explain how and why sociocultural anthropology as a science emerged;
- Appreciate the contributions and applications of anthropology in personal and professional lives; and
- Compare and contrast anthropology with other related behavioral or social sciences.

1.1. What is Anthropology?

The term **anthropology** is a combination of two words derived from Greek language: *anthropos* and *logos*. The term *anthropos* is equivalent to the word *mankind* or *human being*, while *logos* means *study or science*. So

putting the two words together, anthropology is the study or science of mankind or humanity. The following are two important, simple, definitions of anthropology:

Box 1.1. A simple definition of anthropology

Anthropology is the study or science of mankind or humanity
--

- Anthropology is the study of humanity.
- Anthropology is a broad scientific discipline dedicated to the comparative study of humans as a group, from its first appearance on earth to its present stage of development.

In a more specific term, anthropology is science which:

- Investigates the strategies for living that are learned and shared by people as members of human social groups;
- Examines the characteristics that human beings share as members of one species (*homo sapiens*) and the diverse ways that people live in different environments; and

- Analyzes the products of social groups: material objects (tools, cloths, houses, etc) and non-material creations (beliefs, values, practices, institutions, etc). (*World Book Encyclopedia*. Vol.1 PP. 545-548)

It should further be stressed that anthropology focuses on (1) the origin of humans, (2) the evolutionary development of humans, (3) human physical, biochemical and cultural variations, and (4) the material possessions and cultural heritages of humans.

Anthropology seeks to explain how and why people are both similar and different through examination of our biological and cultural past and comparative study of contemporary human societies (Howard and Dunaif-Hattis, 1992:3). Howard and Dunaif-Hattis (1992) further note that:

Anthropology's ultimate goal is to develop an integrated picture of humankind—a goal that encompasses an almost infinite number of questions about all aspects of our existence. We ask, for example, what makes us human? Why do some groups of people tend to be tall and

lanky, while others tend to be short and stocky?
Why do some groups of people practice agriculture, while others hunt for a living?
Anthropologists are interested in all things human. (P.3)

Anthropology has a strong affinity with natural sciences as well. In fact, anthropology is well known by that aspect of it which is mainly concerned with the biological/ physical dimensions of mankind as a biological being in group context. Hence, it may be inappropriate to say that anthropology is only a social science. It is also a natural science, not in the sense that it deals with the natural phenomenon or man as an individual entity *per se*, but in the sense that one of its main interests is to study man and man's behavior as a product of the natural processes, and in the context of the animal kingdom (Scupin and DeCorse, 1995).

1.1.1. Misconceptions about Anthropology

There are a number of misconceptions associated with anthropology due to lack of appropriate awareness of its nature. The following are some of the misconceptions

(adapted from lectures by my undergraduate anthropology instructor):

- ❖ One misconception about anthropology is related to the area of its study. It is said that anthropology is limited to the study of "primitive" societies. Indeed, most of the works done by anthropologists during early periods focused on isolated, "primitive", small-scale societies. However, anthropologists nowadays study the advanced, complex societies as well.
- ❖ Another misconception is that anthropologists only study the rural people and rural areas. True, most of the works conducted focused on rural areas. But now, anthropologists are also interested in the study of urban people and urban areas. There is a distinct sub-discipline devoted to the study of urban societies -urban anthropology-which focuses on small-scale society in a complex city.
- ❖ It is claimed that anthropologists are only interested in the study of far away, remote exotic communities living isolated from the influences of modernization. True, most anthropologists go to fieldwork to an

isolated people in a distant corner. But now anthropologists are interested in home anthropology, studying anthropology at home, i.e., in one's own society.

- ❖ It is also said that the purpose of anthropology is to study in order to keep and preserve primitive, defunct cultural practices in museums and anthropologists are advocates of defunct, obsolete culture. True, when anthropologists study "primitive" society, they study the culture of the people, to reconstruct it, to give meaning to the peculiar behaviors of people. However, anthropologists do not defend "primitiveness"; they play a great role in bringing about positive change and development in the lives of people.

Box 1.2. Four misconceptions about anthropology

1. Anthropology is limited to the study of "primitive" societies.
2. Anthropologists only study the rural people and rural areas.
3. Anthropologists are only interested in the study of far away, remote exotic communities living isolated from the influences of modernization.
4. Anthropology wants to keep and preserve primitive, defunct cultural practices in museums and anthropologists are advocates of defunct, obsolete culture.

1.2 Brief Historical Overview of Anthropology

The facts of the incredibly diverse and at the same time essentially similar nature of humans over time and space have intrigued curious-minded people over the century. The history of anthropological thought is replete with many and varied ideas, some of which often were wild extremes resulting from ethnocentric attitudes. Before anthropology attained the status of scientific

discipline curious-minded persons from ancient to medieval times have speculated a lot about the issues and problems that concern anthropologists today (Hodgen, 1964). That is, the present academic anthropology has its roots in the works and ideas of the great ancient and Medieval Greek, Roman, and Hebrew philosophers and social thinkers. These people were interested in the nature, origin and destiny of man, and the morality and ethics of human relationships

While the roots of (socio-cultural) anthropology can be generally traced through the history of western culture as far back as ancient Greek social philosophical thinking, the discipline did not emerge as distinct field of study until the mid-nineteenth century. Anthropology as an academic discipline was born during the 19th century (see *The New Encyclopedia Britannica* (Macropedia). Vol. 27 PP.326-331).

Anthropology as academic discipline was born out of the intellectual atmosphere of that is called the **Enlightenment**, which is the eighteenth century social philosophical movement that emphasized human progress and the power of reason, and based on

Darwinian Theory of Evolution (Scupin and DeCorse, 1995).

According to Howard and Dunaif-Hattis (1992:362):

By the late 1870s, anthropology was beginning to emerge as a profession. A major impetus for its growth was the expansion of western colonial powers and their consequent desire to better understand the peoples living under colonial domination. In the United States, for example, the government sought information on Native American peoples who were being subdued and placed on reservations. As the tribes were subdued, anthropologists were employed to help devise means to administer these people. ... [H]owever, many anthropologists were motivated by the desire to record local customs before they disappeared and were forgotten.... Anthropology became a profession primarily in museums, During the 1870s and 1880s many museums devoted to the study of humankind were founded in Europe, North America and South America.... Anthropology's link with museums influenced its development throughout the late nineteenth and

early twentieth centuries... Professionalization during the latter part of nineteenth and early twentieth centuries made great breakthroughs in the quality and quantity of ethnographic research....

Early anthropologists mainly studied small communities in technologically simple societies. Such societies are often called by various names, such as, *traditional*, *non-industrialized* or *simple societies*. Anthropologists of the early 1900s emphasized the study of social and cultural differences among human groups. Here, many of the indigenous peoples of the non-western world and their social and cultural features were studied in detail and documented. This approach is called **ethnography**. By the mid-1900, however, anthropologists attempted to discover universal human patterns and the common biopsychological traits that bind all human beings. This approach is called **ethnology**. Ethnology aims at the comparative understanding and analysis of different ethnic groups across time and space (Kottak, 2002; Scupin and DeCorse, 1995).

Box 1.3. Difference between ethnography and ethnology

Ethnography: description of the culture of a certain group of people.

Ethnology: Anthropological attempt to discover universal human patterns and the common biopsychological traits that bind all human beings.

1.3. Subject Matter and Scope of Anthropology

The subject matter of anthropology is very vast. The subject covers all aspects of human ways of life and culture, as humans live in a social group relationship. Discovering the meaning, nature, origin, and destiny of humanity is one of the key concerns of anthropology. According to the present stage of scientific knowledge attained in anthropology, the term *humanity* or *mankind* is a very difficult term to define. Anthropologists seem to be unsure whether humanity is absolutely dichotomous with other lower forms of animals. Some may even tend to regard humanity and non-humanity as something that is best understood in the form of continuum. This sense of continuum may be particularly in terms of time scale. Thus, the farther we go in time backwards, the narrower

becomes the difference between humanity and non-humanity.

It has now become a generally accepted fact in anthropology, although no full evidences are forthcoming, that humanity is a product of the evolutionary processes, and that humans have evolved from their closest living primates (Bryan, 1997; Behe, 1996).

Anthropology is interested in some of the following questions and issues about humans:

- Where did human species come from (i.e. what are the origins of mankind)?
- Were human beings created in the image and likeness of God, or were they just the products of millions of years of the natural, evolutionary process?
- In what ways does man differ from other animal species?
- How did mankind arrive at the present stage of biological, intellectual, and cultural development?

Is there a common human nature, and if so, what is it like?

- In what ways do humans who live in various times and places differ?
- How can we explain why cultures vary?

Such and many other related questions are the concerns of anthropology.

Anthropologists try to know and explain about the technological, economic, political and intellectual development of humanity. They attempt to discover the extent to which different human populations vary in their biological and social characteristics and to understand why these differences exist.

Anthropologists are, for example, interested to know and explain why a pregnant woman in Gumuz goes to a bush to give birth during labor, how the Nuer practice birth control methods and why they put horizontal line marks on their forehead, or why the Wolayta put a circular body mark on their cheek while the Tigreans put a cross mark on their foreheads, etc.

Although anthropologists investigate the distinctive features of different **cultures**, they also study the fundamental similarities among people throughout the world (Scupin and De Corse, 1995). They try to find out what factors account for the similarities in certain beliefs, practices and institutions that are found across cultures. They grapple with explaining why **cultural universals** exist. Are these cultural similarities results of **diffusion** (i.e., a certain **material culture** or **non-material culture** created in a certain society diffuses to other societies through contact, war, trade, etc)? Or are they due to independent creation (i.e., certain cultural items created by two or more societies without one copying from the other)? Anthropologists have debated taking different sides while attempting to answer these questions.

1.4. Distinguishing Features of Anthropology

We may identify five distinguishing marks of anthropology:

1. Its Broad Scope

The main distinguishing characteristic of anthropology, the thing that makes it different from the many other fields that also include people as their subject matter is

its broad scope. A good way to emphasize this *broad scope* is to say that anthropologists are interested in all human beings, whether living or dead, "primitive" or "civilized" and that they are interested in many different aspects of humans, including their skin color, family lives, marriages, political systems, tools, personality types, and languages. No place or time is too remote to escape the anthropologist's notice. No dimension of human kind, from genes to art styles, is outside the anthropologist's attention (Kottak, 1994, 2002; Howard and Dunaif-Hattis, 1992)

2. Its Unique Approaches

- I. *Anthropology is Holistic*: Studying one aspect of the ways of life of a group of people by relating it to other complex related aspects of life.
- II. *Anthropology is Relativistic*: Anthropology tries to study and explain a certain belief, practice or institution of a group of people in its own context. It does not make value judgment, i.e., declaring that 'this belief or practice is good' or 'that is bad.'
- III. *Anthropology is Comparative*: Anthropology studies certain aspects of the culture of a group of people by comparing it across societies and different times; i.e.,

the present with the past, the modern with the traditional, etc.

3. **Emphasis on Insiders' View:** Anthropologists focus on how the people themselves understand about their world, how a particular group of people explains about the world, etc. This is what anthropologists call **emic** perspective.
4. **The Micro-focus:** This is another distinguishing mark of anthropology. Anthropology focuses on **small-scale society** or community. The kinds of social groups or communities anthropologists study, whether they are in traditional or modern world, are usually small scaled in their social organization, economic and political structure, and tend to be homogenous in their overall character.
5. **Its Method of Research:** The hallmarks of anthropology are qualitative research methods such as extended fieldwork, **focus- group discussion, participant observation, in-depth and key informant interviews**. Although these methods are now practiced in other behavioral sciences as well,

no other discipline seems to be so associated with and employs such methods as anthropologists.

Box 1.4. Distinguishing features of anthropology

1. Its broad scope
2. Its unique approaches: Holism, relativism and comparativism
3. Emphasis on insider's view
4. The micro-focus
5. Its methods of research: emphasis on extended field work

1.5. Sub-fields of Anthropology

As indicated earlier, the interests and subject-matter of anthropology are wide-ranging. This broad discipline is usually divided in four main sub-fields. These are: **physical anthropology, sociocultural anthropology, linguistic anthropology** and **archaeological anthropology**. Sometimes, **applied anthropology** is added as a fifth sub-field. A brief discussion of the four major sub-fields is as follows.

1.5.1. Physical Anthropology

Physical anthropology is the branch of anthropology most closely related to the natural sciences, particularly biology; that is why it is often called biological anthropology (Scupin and DeCorse, 1995; Howard and Dunaif-Hattis, 1992). It studies the biological dimensions of human beings, including biological evolution, the physical variations between contemporary populations, and the biology and behavior of non-human **primates**. Physical anthropology itself is further divided into three special fields of study: paleoanthropology, primatology and anthropometry.

Paleoanthropology: is a subspecialty in physical anthropology which is interested in the search for **fossil** remains from prehistoric times to trace the development of outstanding human physical, social and cultural characteristics. Paleoanthropology is the study of human evolution through analysis of fossil remains. Paleoanthropologists use a variety of sophisticated techniques to date, clarify and compare fossil bones to determine the links between modern humans and their biological ancestors (*ibid. p3*)

Despite the highly acclaimed Darwinian theory of human origins, that humans are evolved from lower life forms, it may be appropriate to state that many writers in the evolutionary circle argue that there are limits to fossil evidences and paleoanthropology has many problems to tackle (Behe, 1996). As Bryan (1995) suggests, the great theory of Darwinian Evolution rests on so little evidence. Paleoanthropologists are aware of this limitation but textbook accounts of origins of human beings tend to neglect them.

Primatology: The study of the biology and behavior of **primates**, that is, the animals that most closely resemble human beings in terms of physiological and anatomical structure, is an important field in physical anthropology. Primatologists observe primates such as gorillas, chimpanzees, gibbons, and orangutans in their natural habitats to ascertain the similarities and differences between these other primates and humans (*ibid, same page*).

Primatological research helps us understand what human beings share with other animals, what makes

them part of the natural world and their unique characteristics (Howard and Dunaif-Hattis, 1992).

Anthropometry: The study of human variations within and among different populations in time and space, human ecology, population genetics, etc make up the central concerns of this sub-branch of physical anthropology. These physical differences may be in terms of blood types, skin colors, skull shape, facial shape, hair texture, and the like. Anthropometry sheds some light on how differing physical characteristics have helped human groups adapt different geographical environments. **Population genetics**, the study of biological inheritance plays an important role in anthropometry, what is sometimes termed as biological anthropology (Scupin and DeCorse, 1995; Howard and Dunaif-Hattis, 1992).

The investigation of human variations among living populations has led to the application of the knowledge in solving practical problems. The development of a specialty known as **forensic anthropology** is one of the results of these attempts. Forensic anthropology is the identification of human skeletal remains for medical and

legal purposes. Forensic anthropologists work often with other forensic specialists in aiding criminal investigations. Forensic anthropologists attempt to determine the sex, age at death, ancestral background, and stature of the deceased individual. Using this knowledge, forensic anthropologists identify crash victims, war casualties, homicide victims, and skeletal remains in unmarked graves (Howard and Dunaif-Hattis, 1992; Scupin and DeCorse, 1995; Kotttak, 2002).

1.5.2. Sociocultural Anthropology

This is also often called social anthropology or cultural anthropology. It is concerned with the social and cultural dimensions of the living peoples (Pritchard 1995); and with the description and analysis of people's lives and traditions (Podolefsky and Brown, 1997). Socio-cultural anthropology studies the social, symbolic or non-material and material lives of contemporary and historically recent human societies, taking the concept of culture central to its goal (Howard and Dunaif-Hattis, 1992).

Cultural anthropologists conduct studies of living peoples, most often by visiting and living among a

particular people for an extended period of time, usually a year or longer (Keesing 1981). They conduct fieldwork among the people they study and describe the results of their investigations in the form of books and articles called *ethnographies*. Cultural anthropology is also concerned with making generalizations about, and seeking explanations for, similarities and differences among the world's people. Those who conduct comparative studies to achieve these theoretical goals are called *ethnologists*. Thus, two important aspects of social/cultural anthropology are ethnography and ethnology. The former is more of empirical study or description of the culture and ways of lives of a particular group of people, while the latter is more of a theoretical study of the similarities and differences among the human groups of the world, past or present.

There are many other specialized fields of study in social or cultural anthropology. Some of these include: anthropology of art, medical anthropology, urban/rural/economic anthropology, political anthropology, development anthropology, anthropology of religion, legal anthropology, demographic

anthropology, ecological anthropology, psychological anthropology, ethnomusicology, etc.

1.5.3. Archaeological Anthropology

Archaeology studies the ways of lives of past peoples by excavating and analyzing the physical remains they left behind. **Artifacts** are the material remains of human societies (Scupin and DeCorse, 1995). Archeologists also study **ecofacts**, the footprints on the ecology by the past societies. This helps reveal the way human societies interacted with their local ecosystems. Tools, ornaments, pottery, animal bones, human skeletal material, and evidence of how people lived in the distant past are collected, and systematically analyzed.

Archeological anthropology has three major goals: 1) classifying and sequencing material culture; 2) reconstructing ancient ways of life; and 3) explaining and delineating cultural processes (Howard and Dunaif-Hattis, 1992).

Some branches of study in archeology include:

Prehistoric archeology: Prehistoric archeology investigates human prehistory; that is the periods of time in a region before the art of writing developed. Many anthropological archeologists study societies that did not leave behind any written records. Prehistoric archeology uses material remains to reconstruct prehistoric life ways; it also studies contemporary peoples whose styles of life are analogous and or comparable to those of ancient peoples. For example, by studying the ways of life of present hunter and gatherer societies, prehistoric archeologists can gain insights into the ways in which the ancient foraging peoples lived (*Ibid.* P. 11)

Ethnoarcheology: This may be regarded as an aspect of prehistoric archeology. It is an approach to ethnographic analogy in which archeologists make their own observation of the contemporary cultures rather than relying on information provided by cultural anthropologists.

Historical archaeology: uses the evidence provided by excavated remains to enhance our understanding of

historic peoples; that is, peoples who had writing and about whom written records are available. Historical archeologists study sites dating from historic times. Much of the work of historical archeologists has been to help preserve historical sites (*Ibid.* p12).

Classical archeology: Is an aspect of historic archeology; it deals primarily with the ancient civilizations and empires of Europe and the Middle East, including Egypt, Greece, Roman and Persia, Axum, etc.

There are several other specialized areas of study and research in archeology such as industrial archeology, underwater archeology, marine archeology, cognitive archeology, experimental archeology, biblical archeological, cultural resource management, and so on.

1.5.4. Linguistic Anthropology

Linguistics is the scientific study of language. Linguists describe and analyze the sound patterns, combinations of sounds, meanings and structure of sentence in human languages (Kottak, 1994). They also attempt to determine how two or more languages are related. Historically, modern linguists are especially interested in

whether all human languages share any universal common feature. Some recent work suggests that human infants are born with knowledge of a set of generalized rules that allow them to discover the specific rules of language around them and to formulate new sentences by applying these rules.

The terms *linguistic anthropology*, *anthropological linguistics*, and *ethnolinguistics* are often used interchangeably in the linguistic anthropology literature. However, the more preferred term is linguistic anthropology. It is defined as “the study of speech and language within the context of anthropology.... It is the study of language as a cultural resource and speaking as a cultural practice.” (Durnati, 1997:1).

Linguistic anthropology usually focuses on *unwritten languages* (i.e., those languages which have no form of writing, languages used by indigenous peoples of the non-western societies). It is especially concerned with relations between language and other aspects of human behavior and thought. Linguistic anthropologists might describe and analyze a language so far unknown to linguistic science. The branch of linguistic anthropology,

called **sociolinguistics** is interested in how the language is used in various social contexts. For example, what speech style must one use with people of higher social standing? How does a local political leader use language to earn people's allegiance? What can the naming of various parts of the natural and social environment tell us about people's perception of their environments?

A second important branch called **historical linguistics** focuses on the comparison and classifications of different languages to discern the historical links between them. This historical linguistic research is particularly useful in tracing the migration routes of various societies through time (Scupin and De Corse, 1995).

Another branch, called **structural linguistics**, studies the structure of linguistic patterns. Structural linguists compare grammatical patterns and other linguistic elements to find out how contemporary languages are similar to and different from one another.

1.5.5. Applied Anthropology

Applied anthropology, the application of anthropological knowledge, methods and approaches to the solving of human problems, is often now seen as a fifth major branch of anthropology, although it is not well-established as the traditionally known four fields. Applied anthropology involves the use of data gathered in other subfields of anthropology in an endeavor to tackle contemporary societal problems. Anthropologists have increasingly become concerned with practically dealing with human problems (Bodley, 1996; Podolefsky and Brown, 1993). The problems may include: environmental, technological, economic, social, political or cultural. Applied anthropologist now work in quite many areas of relevance such as education, mass medical, medicine, development, business, agriculture, crime and urban poverty, etc (Scupin and DeCorse, 1995; Kottak, 2002).

Box 1.5. Major branches and specializations in anthropology

- **Five major branches of anthropology:** physical anthropology, Sociocultural anthropology, archeological anthropology, linguistic anthropology and applied anthropology
- **Specializations in physical anthropology:** primatology, paleoanthropology, anthropometry, population genetics, forensic anthropology
- **Specializations in sociocultural anthropology:** medical anthropology, urban anthropology, anthropology of religion, ecological anthropology, demographic anthropology, development anthropology, economic anthropology, etc
- **Specializations in archeological anthropology:** historical archeology, prehistoric archeology, Ethnoarcheology, classic archeology, underwater archeology, biblical archeology, cultural resource management, etc
- **Specializations in linguistic anthropology:** sociolinguistics, historical linguistics, structural linguistics, etc

1.6. Contributions of Anthropology

The contributions of anthropology may be categorized in to the following (*World Book Encyclopedia 1994, Vol. 1*, Howard and Dunaif-Hattis 1992; Aoyagi, 1999):

1. Anthropology gives us an insight into different ways and modes of life of a given society, to understand the logic behind and justification for human activities and behavior.
2. Anthropology also helps us understand our own ways of lives. Many aspects of our lives seem to us normal, so we don't know the logic behind. Eating *injera*, for example, is assumed to be normal to those whose staple (main) food item is *injera*. By studying anthropology, we look into ourselves through the others' ways of lives. As we study anthropology, we encounter a different way of lives from ourselves, and hence we get opportunity to appreciate and understand ourselves.
3. Anthropology helps us fight against prejudices and discriminations. It helps us fight against **ethnocentrism**; the attitude that one's own culture and one's own way of life is the center of the world

and the best of all. This arises from ignorance about other ethnic groups and their ways of lives.

4. Anthropology is also used as a tool for development. Applied anthropology, here, is the application of anthropological knowledge and research results in the solution of some social problems or in the implementation of project plans.

In addition to the aforementioned points, we may substantiate the contributions of anthropology as follows:

1. Because of its broad scope, anthropology allows us to understand the biological, technological, and cultural development of humanity over long period of time in human evolution.
2. Because of its *comparative approach* to humanity, anthropology allows us to separate what is unique to our way of life from what is general to all people.
3. Because of its *relativistic approach*, anthropology helps us to be more sensitive and appreciative of cultural diversity and variability. It helps us to avoid some of the misunderstanding that commonly arises

when individuals of different cultural traditions come into contact. Anthropology reduces ethnocentrism by instilling an appreciation of cultural diversity. Anthropology can help us be aware that when we interact with people from other cultural traditions, their actions are not always intended to mean what we take them to mean, and therefore much miscommunication can be avoided. Health workers involved in health care provision in various cultural settings will find it very helpful if they develop this mentality.

4. Anthropologists bring a *holistic approach* to national and international development agencies.
5. Anthropologists use their expertise in particular subjects to formulate practical ways of coping with immediate social problems. Medical anthropologists, for example, investigate the interrelationship between human health, nutrition, and cultural beliefs and practices.

In general, anthropology more than any other sciences, can reveal the alternative ways of living developed by diverse segments of humanity.

Before closing this section, it is important to note why health/ medical sciences students need to take a course in sociocultural anthropology. The following are some of the arguments for the necessity of such a course:

1. Health, disease and illness are as much sociocultural in their nature as they are physical.
2. So far, despite certain steps being taken, the dominant trend in the medical/ health sciences training is to highly focus on the biomedical and ecological dimensions of health and disease. However, given the bio-psycho-social nature of human being and health, this is very partial. This restricted approach to health disease does not provide the students with appropriate and whole picture about the issue. Such highly narrow focus in the training of health professionals and design of health policies and strategies is not appropriate.

3. In the objective realities of developing societies such as Ethiopia human health and wellbeing are deeply linked to sociocultural factors such as the entrenched poverty, the roles of traditional values and institutions in shaping people's worldviews about health and disease.

1.7. The Relationship between Anthropology and Other Disciplines

1.7.1. Similarity between Anthropology and Other Disciplines

Anthropology is similar with other social sciences as to its subject matter. All the social sciences such as sociology, psychology, political sciences, economics, history, etc, study, in one way or another, the human society and its ways of lives. Anthropology greatly overlaps with other disciplines that study human society. For example, anthropological field workers are likely to collect information on a society's agriculture, leadership patterns, and beliefs about the universe (physical world), music and art forms. They might find it useful to be acquainted with the works of economists, geographers,

political scientists, philosophers, mythologists, and artists or art historians. They may read the works of historians, sociologists, novelists, economists, psychologists, and political scientists who also write about the region. Anthropology thus cuts across many disciplines, encompassing many of the subjects that other scholars consider their special province: law, religion, politics, literature, art, and so on (World Book Encyclopedia 1994, Vol. 1).

1.7.2. Differences between Anthropology and Other Disciplines

Anthropology differs from other social sciences and the humanities by its broad scope, approach, unit of analysis and methods used. It studies mankind in its entirety. In its approach, anthropology studies and analyzes human ways of life holistically, comparatively and relativistically. Its unit of analysis is small-scale society. That is, it is interested in a group of people with more or less simple, homogenous ways of life. In its method of research, it is unique in that extended fieldwork among the studied community and developing intimate knowledge of the life worlds of the community with participant observation.

1.8. Chapter Summary

Anthropology is broad scientific discipline, which was born lately in the 19th century, with the major aim of scientific study and documentation of the physical, socio-cultural and other diversities among people, past and present. It specially studies simple, small-scale societies in the non-western world. Its holistic, comparative and relativistic approaches, its unit of analysis and method of study along with its broad scope make it unique. However, it shares many things with the other sciences. The science of anthropology has many theoretical and practical importance and contributions. The four main branches of anthropology are physical anthropology, sociocultural anthropology, linguistic anthropology and archeological anthropology. Applied anthropology is sometimes regarded as a fifth sub-filed. Each of the major branches of anthropology has several specialized areas of study within it. Anthropology as a science has as its major goal the making, accumulation and dissemination of scientific knowledge on society and culture.

Review Questions

1. What is anthropology?
2. Discuss the historical backgrounds of sociocultural anthropology.
3. What is the difference between ethnography and ethnology?
4. What is forensic anthropology? Discuss its applicability in Ethiopia.
5. Why do anthropologists study primate behavior?
6. What common characteristics does anthropology share with the other sciences?
7. Why do anthropologists use *emic* approach in their research?
8. What distinguishes anthropology from other human sciences?
9. What are the personal and professional uses of anthropology to you?
10. Define paleoanthropology. What are its limitations?
11. Distinguish between historical archeology, prehistoric archeology and ethnoarchaeology.

CHAPTER TWO

THEORIES AND RESEARCH METHODS IN SOCIOCULTURAL ANTHROPOLOGY

Learning Objectives

After completing this Chapter, students will be able to:

- Describe the main perspectives or theories in socio-cultural anthropology;
- Understand the forces that shaped the development of anthropological theories; and
- Describe the main characteristics and types of anthropological research methods

2.1. Theories in Sociocultural Anthropology

It may be appropriate here to define what a **theory** is. “A theory is a statement or statements of how and why specific facts are related” (Macionis, 1997: 15) Scupin and DeCorse (1995) define a theory as a set of interconnected hypotheses that offer general explanations for natural or social phenomena.

It should also be noted that the terms “perspectives” and “schools of thought” are often used interchangeably with the term “theory”.

Below is a brief discussion of the emergence and development of major anthropological theories in terms of their basic premises, explanatory power and weaknesses.

2.1.1. Evolutionism

This theory may also be termed as the theory of cultural or sociocultural evolution (Zanden, 1990). Evolutionism dominated anthropological thinking mainly during the latter part of 19th century. In fact, some argue that the growth of anthropology as a science is tied up with the development of the doctrine of evolution; neither could have developed with out the other (Calverton, 1931). The 19th century evolutionary theory in anthropology had especially two prominent proponents, who developed what is termed as **unilineal evolution**. These were Edward B. Tylor and Lewis Henry Morgan. Unilineal evolution is the view that societies evolve in a single direction toward complexity, progress and civilization. It

was interested in explaining why societies are at similar or different stages of evolution and development.

Developments in Darwinian evolution also helped a lot in shaping the evolutionary thinking of the early thinkers such as Herbert Spencer, Henry Morgan, George Frazer, among others, although evolutionary thinking predates Darwinian ideas. A generally accepted view about sociocultural evolution is that “it is the process of change and development in human societies that results cumulative change in their stores of cultural information” (Lenski and Lenski, 1982: 60). The basic idea behind evolutionism is that the history of humanity and its socio-cultural systems have developed following unilineal path, from simple to complex. The evolutionary approach was applied to understand the development of culture over time. The basic premise of this theory is that

Culture does appear to evolve in a way that is similar in its process to that of biological evolution. And over all, the development of human society from most ancient times to the present has been marked by persistent

progression from technological and societal simplicity to complexity (Hammond, 1971: 394).

This theory contended “those societies [that were] able to develop new social and cultural forms that facilitate a more efficient adaptation to changing environmental circumstances had a better chance of competing for survival. Those that did not risked extinction” (*ibid.* p 392).

The 19th century evolutionary theory was criticized as an ethnocentric one, which regarded western societies as the center of civilization and others as inferior. It paved the way for the colonization processes and racist ideologies which latter dominated political thinking. Their views were contradicting, much speculative and their evidences were second hand (Scupin and DeCorse, 1995).

2.1.2. Diffusionism

Diffusionism developed in early part of 20th century; it was also interested in explaining why societies are at similar or different stages of development. This theory

maintained that societal change occurs when societies borrow **cultural traits** from one another. Cultural knowledge regarding technology, economy, religious views, etc, diffuses or spreads from one society to another. This may explain the similarities in cultural features between societies. Some extreme line of thought in this theory, called the British diffusionism, argued that all sorts of civilization originated in Egypt and spread to other societies. The weakness of this theory, like evolutionism, was that it was ethnocentric in its assumptions. The diffusionists believed that non-western societies are inherently inferior, saying that these peoples are not innovative in creating civilizations. However, diffusionism has some validity in that it helps to explain the emergence of classical civilizations such as those in Egypt, Greece, and Rome (Howard and Dunaif-Hattis, 1992; Scupin and DeCorse, 1995).

2.1.3. Historical Particularism

This theory developed in early 20th century mainly in reaction to unilineal evolution. An American anthropologist, named Franz Boas, pioneered it. This theory provided an alternative to the question of why societal differences and similarities exist. Boas greatly

influenced the development of anthropology in the 20th century. He strongly opposed the unilineal evolutionary theory, and advanced the need for empirical field-based ethnographic research to explain and understand each society and culture in its historical contexts. Historical Particularism thus maintains that each society has its own particular historical development. This view led to the development of the idea of **cultural relativism** (*ibid.*)

2.1.4. Functionalism

This perspective is one of the dominant theories both in sociocultural anthropology and sociology. The theory regards culture as an integrated whole (Howard and Dunaif-Hattis, 1992), and tries to explain how the relationships among the parts of society are created and how these parts are functional (meaning having beneficial consequences to the individual and the society) and dysfunctional (meaning having negative consequences). The theory sees society as a complex system whose parts work together to promote solidarity and stability; it states that our social lives are guided by **social structure**, which are relatively stable patterns of social behavior (Macionis, 1997).

All social structures contribute to the operation of society. Two dominant British anthropologists in functionalism were Radcliff Brown and Bronslaw Malinowski, representing two strands in the theory: **structural functionalism**, which stresses the preeminence of society and its structure over the individuals, and how the various elements of the social structure function to maintain social order and equilibrium; and **psychological functionalism**, which stresses individual needs to be met by society.

The weakness of functionalist theory was that it failed to explain why societies different or similar. Functionalist anthropology assumed an orderly world, paying little or no attention to competition and conflict (Howard and Dunaif-Hattis, 1992). The theory was ahistorical, neglecting historical processes. (Scupin and DeCorse, 1995) The theory was also unable to explain social and cultural change, as it viewed society as stable and unchanging. Despite these weaknesses, functionalism influenced a great deal of empirical research in anthropology.

2.1.5. Culture and Personality

This perspective, also called *psychological anthropology* has enjoyed dominance in the history the field, particularly in the first half of 20th century. The proponents of the culture and personality school maintained that the various patterned aspects of culture shape the personality of individuals within a given society, and also personality once developed could in turn affect the further development of culture (Hammond 1971). The theory is an outgrowth of the search for the mechanism of cultural integration (Howard and Dunaif-Hattis, *Op cit*).

The theory was influenced by and **neo-Freudian psychology**, which emphasized the primacy of infantile and early childhood experience in shaping the personality. Following the development of this school, many anthropologists attempted to study the national characters (representative personality types) across cultures. In so doing, anthropologists have employed the psychological concepts such as conditioned stimuli and responses, drives, rewards, punishments, conflicts, dreams, ego systems, id impulses, attitudes, values, cognitive orientations, ideas, etc (Clifton 1968). Early

influential contributors to the culture and personality perspective such as Bronislaw Malinowski and Margaret Mead attempted to show that psychological traits vary widely across cultures; that societies instill different values by training children differently. Adult personalities reflect a culture's child-rearing practices (Kottak, 1994).

2.1.6. Neo-functionalism

This theory is a variety of theories of conflict in anthropology, which developed after the II World War. It developed in response to the weakness in functionalist anthropology in dealing with the issues of conflict, competition and disequilibrium. Proponents of this theory criticized functionalists for disregarding conflict as an inherent part of social organization. Neo-functionalists succeeded in bringing into light the issue of conflicts and change, but they still failed to deal with the issues of fundamental structural changes. Social order was considered a given, rather than something to be explained (Howard and Dunaif-Hattis 1992).

2.1.7. Marxist Anthropology

Marxist anthropological theory derives directly or indirectly from the writings of Karl Marx. Basing some of

his ideas on the 19th century evolutionary thinking, Marx stated that societies pass through different stages of development. This theory is basically materialistic as it assumes that the systems of producing material goods influences and shapes society. Unlike functionalists who stressed order, stability and equilibrium in society, Marxist anthropology argued that society is in constant struggle of social class conflicts among the dominant and minority groups in society. Unlike neo-functionalists, Marxist anthropologists “are concerned specifically with the transformation of social orders and the relationships between conflict and cultural evolution” (*Ibid.* P.372). Current Marxian anthropologists reject the unilineal model of societal development suggested by Marx.

Some of Marx’s predictions regarding the socialist and communist stages of societal development happened to be wrong. Despite these shortcomings, Marxian analytical approach is valid to understanding societal development (Scupin and DeCorse 1995).

2.1.8. Cultural Ecology

The school of cultural ecology, also termed as **neo-evolutionism**, attempts to explain the human condition

in relation to the environment. Broadly defined, cultural ecology refers to “the dynamic interrelationship between man and the material and cultural components of his environment” (Hammond, 1971: 397). An extreme view of this school argued that the environment determines culture. However, anthropologists now reject the idea of geographical determinism. The main idea behind the modern school of cultural ecology is that each culture is seen as a specific instance of patterned adaptation to a specific environment; the dynamic interaction between man and his environment is such that culture modifies the environment and the latter also puts its limits to human culture.

The cultural ecology perspective emphasizes how human use of nature influences and is influenced by social organization and cultural values (Kottak, 2002). The strength of their theory is that it, unlike the 19th century evolutionism, was not ethnocentric and racist; it also did not assume that socio-cultural evolution toward complexity is always equated with progress; some aspects of small-scale societies are better than those of complex societies. The theory, however, is criticized as neglecting historical and political aspects; stressing the

environment; the theory tends to reduce human behavior to simple adaptations to the external environment (Scupin and DeCorse, 1995).

2.1.9. Cultural Materialism

The theory of cultural materialism may be regarded as an outgrowth of neo-evolutionism or cultural ecology. Anthropologist Marvin Harris mainly advanced it. The theory states that the key factors in and determinants of socio-cultural evolution are the infrastructures that include technology, environment and material conditions. As the infrastructure of a society changes, the other aspects of society also change accordingly.

2.1.10. Structuralism

Structuralism is one of a new group of theories in anthropology known as studies of cognitive structure. This schools of thought, including structuralism, **ethnoscience**, and **symbolic anthropology**, give attention to the cognitive or underlying mental structures that provide order to culture. Structuralism, advanced by its famous French structuralist anthropologist, Claude Levi-Strauss, states that “the origin of universal principles that order the ways in which we behave and

think about the world is to be found in the structure of human thought.”(Howard and Dunaif-Hattis, 1992:373). The problem with this theory is that they view societies as static and do not help very much in explaining variation among societies. The theory treats culture as a given order and fails to explain the adaptive dimensions of culture.

2.1.11. Ethnoscience

The search for the underlying structural principles of culture led specially in United States to a variety of studies in cognitive structure known as **ethnoscience**. This is sometimes referred to as **cognitive anthropology** (*Ibid.* p.373). The focus of ethnoscience is to discover and describe the structural principles of specific culture by detailed ethnographic data analysis. Ethnoscience is mainly interested in understanding and describing how a specific people view their world; what are the manner in which a specific people perceive and structure their environment through language; and the nature of the rules and principles that guide their decision making (*Ibid.* p. 374).

2.1.12. Symbolic Anthropology

This theory focuses on the symbolic rather than material aspect of culture. It is the study of culture through the interpretation of the meaning of symbols, values and beliefs in society. The theory disagrees with cultural materialism in that many cultural symbols cannot be reduced to the material conditions and adaptive mechanism of a society (*ibid.* p 263). The cultural symbols are autonomous of from the material forces.

The proponents of this theory regard cultural traditions as texts to be interpreted and described by ethnographers. The criticism leveled against symbolic anthropology is that it focuses exclusively on cultural symbols at the expense of other factors that may shape human behavior and thought. Critics argue that symbolic culture cannot be separately treated from other political, economic, and socio-historical factors.

Table 2.1. Summary of theories in sociocultural anthropology

Ser no.	Name of the theory	What is it? What does it state?	Strengths	Weaknesses
1.	Unilineal evolutionism	Human society and culture develop gradually from simple to complex, primitive to “civilization”	The first systematic attempt to explain why societies are similar and different	1. Ethnocentric 2. Racist 3. Armchair speculation
2.	Diffusionism	Cultures change through the spread of ideas and traits from centers of innovation to other areas	Useful in explain the development of classic cultures	1. Ethnocentric 2. Assumed that non-western societies are inherently inferior

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3.	Historical Particularism	Each culture is a unique entity, it has to be studied and documented in its historical context;	Rejected racism; Promoted the idea of cultural relativism; helped ethnographic, empirical research grow.	Did not take into account broader factors beyond a particular culture.
4	Functionalism	Society and culture are integrated, holistic entities	Promoted empirical ethnographic research highly	Ahistorical; did not deal with change, conflict; too much focus on stability and order.
5	Culture and personality	Main cultural themes shape individuals'	Promoted understanding of	Too much focus on Neo-Freudian

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		character and the vice versa	the personality and culture dynamics	psychology
6.	Neo-functionalism	A modification of functionalist theory, explaining the issue of order in terms of conflict and competition	Filled gaps in functionalist theory; accommodating the issue of conflict and competition	Takes social order as a given fact; failed to deal with issues of fundamental structural changes
7.	Marxist anthropology	Society is in constant struggle of social class conflicts among the dominant and minority groups in society	Valid to understanding societal development	Some of its assumptions and predictions failed to occur; neglecting issues of stability an unity

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8.	Cultural ecology	The dynamic interaction between culture and the ecology	Is not ethnocentric and rejected unilineal evolution; stated some of small-scale cultures are more useful and adaptive	Neglecting historical and political aspects; stressing the environment; the theory tends to reduce human behavior to simple adaptations to the external environment
9.	Cultural materialism	The key factors in and determinants of socio-cultural	Explains well how the material forces help create and	Too much focus on material dimensions of

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		evolution are the infrastructures which include technology, environment and material conditions	change other non-material aspects	society
10.	Structuralism	The origin of universal principles that order the ways in which we behave and think about the world is to be found in the structure of human thought	Promotes the idea that human mind and nature are fundamentally similar, the same underlying universal principles help people create their culture and	Views societies as static and do not help very much in explaining variation among societies; treats culture as a given order and fails to explain the adaptive

			order their lives	dimensions of culture
11.	Ethnoscience	Interested in describing how a specific people view their world; what are the manner in which people perceive and structure their environment through language; and the nature of the rules and principles that guide their decision	Promotes the value of each people's own cognitive understanding of their world	Too much focus on specific cultures; neglecting the material dimensions of culture

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		making		
12.	Symbolic anthropology	The study of culture through the interpretation of the meaning of symbols, values and beliefs in society	Contributed towards the idea that symbolic culture is important in its own right.	Focuses exclusively on cultural symbols at the expense of other factors that may shape human behavior and thought.

2.2. Research Methods in Sociocultural Anthropology

In this section, attempt is made to describe briefly the main issues and components of research methods in anthropology.

2.2.1. The Scientific Method and Inductive vs. Deductive Approaches

Anthropology is a science. As such, it is concerned with systematically observing and classifying facts, and establishing verifiable laws. Anthropology, like any other science employs **scientific method**, which is the source for scientific knowledge. The scientific method is a logical system used to evaluate data derived from systematic observation. The scientific method as a precise way of designing and conducting research consists of the following basic steps: “(1) establishing a hypothesis, a general statement based on observed facts; 2) determining ways to test the hypothesis, incorporating them in research design; 3) testing the hypothesis through research and further observation...” (Howard and Dunaif-Hattis, 1992:7)

Anthropology as a science employs the two very important approaches in research design and in the overall research framework: **inductive methods** and **deductive method**. Inductive method is a method by which the scientist first makes observation and collects data, on the basis of which he or she formulates **hypothesis** and **theories (Scupin and DeCorse, 1995)**. The researcher tries to build theories from particular observations and instances. Induction moves from the particular to the general; where as deduction moves from the general to the particular. In deductive approach, the researcher attempts to derive specific assertions and claims from a general theoretical principle. In short, deductive approach in research goes from general theory to particular claims (Dooley, 1995:65-66).

Box 2.1. Inductive vs. deductive approaches

- Inductive method is a method by which the scientist first makes observation and collects data, on the basis of which he or she formulates hypothesis and theories
- In deductive approach, the researcher attempts to derive specific assertions and claims from a general theoretical principle.

2.2.2. Identification of Research Problem

The first step in doing anthropological research (for that matter, any other research) is to come up with a research problem. Identification of research problem basically involves choosing a research topic. The ways and manners in which researchers identify a research problem and choose a topic vary according to various factors. The research interests of anthropologists are, often, triggered by their own life experiences and observations (Howard and Dunaif-Hattis, 1992). The initial ideas for research thus may occur at any time and place for a researcher. Walking down a street, reading through newspapers, watching television, etc may

suggest a topic of research for an observing and curious person (Mann, 1976).

2.2.3. Literature Review:

Research work normally proceeds by reviewing earlier works on a specific research problem one has identified. The researcher will need to review past works on the question he or she is raising (Dooley, 1995). The traditionally dominant source for literature review has been libraries and documentation centers where books and various references are found in card catalogued manner. Nowadays, most libraries maintain a computerized filing system, whereby references are made available via electronic online methods. Searching literature has become very easy, thus, with the computerization of library sources; one can easily access them if Internet connection is available (Rosnow and Rosenthal, 1996)

Literature review is necessitated by the fact that a researcher is probably not the first person to develop an interest in a particular problem; and hence, he or she need to spend some time in the library reviewing what theories and methods others have used to the topic in

the past and what findings are there (Macionis, 1997). According to Marshal and Rossman (1989: 35), review of literature has the following four purposes:

First, it demonstrates the underlying assumptions behind the general research question.... Second, it demonstrates that the researcher is thoroughly knowledgeable about related research and the intellectual traditions that surround and support the study. Third, it shows that the researcher has identified some gaps in previous research and that the proposed study will fill a demonstrated need. And finally, the review refines and redefines the research questions and related tentative hypotheses by embedding those questions in larger empirical traditions.

2.2.4. Research Design

The research design is that section in the research process which gives the details of the ways and manners of conducting the study (*Ibid.*). It involves the selection of research sites and study subjects, the methods to be employed in collecting data, the

techniques to be employed in data analysis and other related matters.

The anthropologist chooses the research site and the people among whom he or she would conduct the research. Appropriate and relevant data gathering techniques are chosen. The way the researcher designs the overall research process will determine the data quality and the research outcomes.

2.2.5. Data Collection Strategies/ Methods in Anthropology

Ethnography is the anthropologists' distinct strategy in data collection. It is the hallmark of anthropology. Ethnography provides a foundation for generalizations about human behavior and social life. There are various techniques employed by anthropologists when collecting information. The main field techniques in anthropology are discussed below.

Participant Observation

Observation is central to any anthropological research. The researcher has to pay attention to the many and varied details of daily life among the people. Both

individual and collective behaviors and actions should be observed. All relevant events, actions, places, objects, etc must be observed and recorded (*Ibid.* 1989). One of the key procedures in these techniques is called **participant observation**, the active involvement in community life while studying it. The researcher participates in a research setting while observing what is happening in that setting (Henslin and Nelson, 1995). Here anthropologists attempt to take part in many of the activities and processes of the community which they study (Kottak, 1994; Howard and Dunaif-Hattis, 1992).

Ethnographic Conversation, Interviewing and Interview Schedule

As anthropologists maintain rapport with the people, they begin to record information starting by even the simplest conversation with informants. While simply conversing with community members, the anthropologist can identify and obtain important information for his/her research project. However, the researcher also depends on interviewing techniques. Individuals or groups are identified and may be interviewed on issues of relevance for the anthropologist. While doing so, the anthropologist may use **interview schedules**, pre-

planned question items, which the researcher writes down on his/her notebook and uses them as guidelines for the interview process. With the interview schedule, the researcher talks face to face with the informants, asks questions, and writes down the answers (Kottak, *op cit*). The use of highly structured questions, such as **questionnaires**, is not often common in typical anthropological researches, although anthropologists also employ these instruments.

The Genealogical Method

This ethnographic technique was developed by anthropologists to deal with and gather information on principles of kinship, descent, and marriage, which are the social building block of small-scale societies. The genealogical method is important in what anthropologists call “kin-based societies”, where every one is related to every other person; and rules of behavior attached to particular kinship relationships are basic to everyday life. Genealogical information may be found in the form of art, paintings, cemeteries, rituals, etc (*Ibid*).

Well-Informed Informants

These are also called **key informants**, and the method is termed as **key informant interview**. Here, very knowledgeable individuals in the community are identified and the research learns lots of issues about the community life. Every society has well-informed informants, who are natives/ members of the community who can provide the best and rich information about particular areas of life in the community (Kottak, 2002).

Life Histories

Anthropologists also employ life history techniques. In the process of his/her fieldwork the researcher may come across with individual or groups who present him/her with interesting cases. So the researcher conducts in-depth investigation on the life histories of the individuals or groups. "Life histories reveal how specific people perceive, react to and contribute to changes that affect their lives" (Kottak, 1994:26)

Emic and Etic Research Techniques

Anthropologists often employ two contrasting approaches: **emic and etic**. The emic approach focuses on the native's or the community's points of view, trying

to understand the world from the perspectives of the natives; whereas the etic view is observer-oriented approach which tries to bring an objective and comprehensive viewpoint to the study of the community's life. Here, the focus shifts from native views to the views of the researcher. In practice, anthropologists often have to combine the emic and etic approaches in their fieldwork. They make every effort to avoid the biases of their own views as well as those of the people being studied (Howard and Dunaif-Hattis, 1992; Kottak, 2002).

Box 2.2. Emic and etic approaches

Emic approach: Understanding and describing the world from the insider's (people's) view

Etic approach: The researcher's views and interpretation of the subject being studied

Problem-Based Ethnography

Anthropological field research has usually to address specific problems; the researcher may thus enter a community with specific questions in mind. Anthropologists thus just do not wholly depend on what

the informants say and do; they also do many other specific things. They consult documents, archives, measure and record data on various phenomena like the environment, weather, diet, land use, etc.

Longitudinal Research

The anthropologists' research is not limited to a specific locality or time period; often anthropologists conduct longitudinal researches, with a long-term study of a community, region, society, culture or other unit, usually based on repeated visits (Kottak 1994:27). Such kind of research reveals important insights on the dynamic and complex factors that affect the lives of people over longer periods of time.

Survey Research

All of the above research techniques are qualitative in nature; despite anthropologists heavily employ qualitative research techniques, they also use quantitative methods side by side with qualitative ones. One of the dominant quantitative techniques is the **survey method**, which involves sampling, impersonal data collections, and sophisticated statistical analysis. Of all the social sciences research techniques, survey

research probably seems to be the most visible and pervasive form research in the social and behavioral sciences (Jones, 1995).

Traditionally, the survey techniques has been considered the domain of disciplines such as sociology, psychology, political science, and economics, which often work mainly in large, complex and populous societies, unlike anthropologists, which have traditionally worked among small-scale societies. In survey research, people who provide information are termed as **respondents**, (unlike in anthropology, where we call them informants); these respondents are often selected on **random sample** basis, wherein all members of a population have equal chances of being included in the study population.

A brief discussion of the difference between survey research and ethnography may be appropriate here. The following are some points of difference (Kottak, *op cit*, P. 31):

- In survey research, the object of study is usually a sample chosen randomly or otherwise by the

researcher. Ethnographers normally study whole, functioning communities.

- Ethnographers do firsthand fieldwork, establishing direct relationships with the people they study. Survey researchers often have no personal contact with respondents.
- Ethnographers usually get to know their informants are interested in their welfare; often a social survey focuses on a small number of variables, rather than on the totality of peoples' lives.
- Survey researcher normally works in modern nations, where most people are literate; ethnographers are more likely to study people who do not read and write
- The results of survey research must analyzed statistically, as it deals with large and diverse groups; while ethnographers have not often detailed knowledge of statistics, as the societies

they study are less diverse and smaller in number.

In general, survey researchers such as sociologists are often interested in causal relationships between limited number of variables and they mainly study samples to make inferences about a larger population. Ethnographers, on the other hand, do their fieldwork in communities and study the totality of social life and they are more typically concerned with the interconnectedness of all aspects of social life.

Box 2.3. Major qualitative research strategies

- | | |
|------------------------------|-----------------------------|
| • Participant observation | In-depth interviewing |
| • Key informant interview | Problem – based ethnography |
| • Ethnographic conversations | Longitudinal study |
| • Life histories | |
| • Genealogical method | |

2.2.6. Data Analysis

After the data are gathered, the next important step is analyzing the data. Various ways of analyzing data are used both in **qualitative** and **quantitative** methods (Henslin and Nelson, 1996). For quantitative data (which are mainly expressed in terms of numbers, percentages, rates to measure size, magnitude, etc) researchers use sophisticated statistical techniques using computer models. Plans for data analysis are often made as early before the data are collected (Mann, 1976).

Analysis of qualitative data (those which expressed in terms of descriptive statements, about the depth, details and sensitive dimensions of information which are difficult to express in terms of numbers) thus actually begins while the researcher is in the field recording his/her field notes, tape recording and transcribing the interviews. Tape-recording the interview process and transcribing are the essential components of analysis (Jones 1995). In analyzing the data, the anthropologist must distinguish between his own views and the views of the people being studied (Scupin and DeCorse, 1995). There are many possible analytic schemes and

some computer models for analyzing qualitative data are also available.

Box 2.4. Qualitative vs. quantitative data

Qualitative data: Data expressed in terms of statements, focusing on depth, details, sensitivities, underlying beliefs and attitudes; collected via intensive fieldwork

Quantitative data: Data expressed in terms of numbers and statistical figures focusing on size, amount, frequencies and magnitude of information; collected via mainly surveys

2.2.7. Research Report Writing and Dissemination

The research process is not complete until the results are reported in a written document (Rosenow and Rosenthal, 1996). Research report writing in anthropology, as in all other sciences, follows a specified standard ways of writing. The research findings are disseminated through various mechanisms such as seminars, conferences, and symposiums. With minor variations, all social and behavioral sciences research reports have similar components, though it may be with varying titles, in the same order. The report

characteristically has four major sections: introduction, methods employed, and presentation and discussion of results (Dooley, 1995)

2.3. Chapter Summary

Anthropological theories used to explain human culture, why and how culture work, are similar and different etc, have been developed since the early years of the discipline. The first anthropological theories that developed in late 19th and early 20th centuries in Europe and America include: social evolutionism, diffusionism, historical particularism, culture and personality school and functionalism. Evolutionism assumed the unilinear development of cultures and society from simple, primitive stages to complex, “civilized” stages passing thorough different levels. Diffusionism sated that culture change occurs due to the borrowing and spread of cultural traits from centers of invention to other areas. Historical particularism rejected the unilinear evolution and argued that each culture should be empirically studied in its own historical context, while functionalism focused on culture and society as integrated wholes,

where each part in the social structure functioned to maintain order and stability.

The conflict schools of thought such as neo-functionalism and Marxist anthropologist focused on conflict and competition and processes of social transformation. Neo-evolutionism or cultural ecology focused on the interaction between culture and ecology and tried to explain cultures as adaptations to specific environments. Studies of cognitive science such as structuralism, ethnoscience and symbolic anthropology focused on understanding and describing the underlying, non-material mental structures that shape cultures.

Anthropology as a science employs the scientific method that involves systematic collection and analysis of data to test hypotheses. Anthropology also depends on the deductive and inductive approaches in research, where the former focused on testing hypothesis on the basis of general theoretical principles whereas the latter tries to build theories based on particular observations. Anthropologists employ a variety of methods of data collection such as interviews, ethnographic

conversations, key informant interviews, genealogies, case studies and surveys.

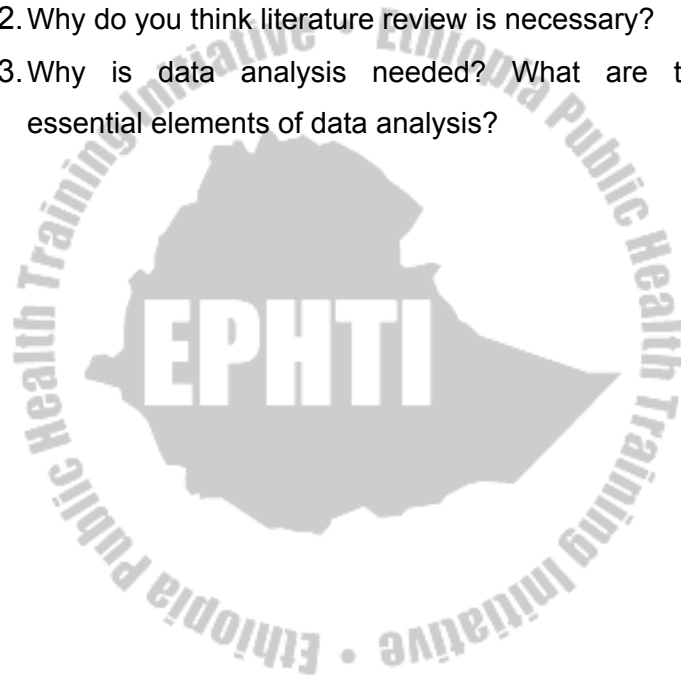
The most vital anthropological method of data collection is extensive fieldwork, in which the researchers live among the societies studied and observe their ways of life intimately. A typical anthropological research method is participant observation, in which the researcher learns about a society living among them and participating in their daily lives.

Anthropological research is comparative and cross-cultural. Anthropology emphasizes an insider's view of a society. This is what anthropologists call the *emic* view; here, the anthropologist gives value to what the people he is studying know, think, believe, and view; how they explain and understand the world around them, and the logic and rationale of their beliefs, actions, practices, behaviors and institutions. However, the anthropologist also, as a scientist, gives equally much value to the *etic* view; this is what the scientist or the researcher as an outsider thinks about the thing being studied.

Review Questions

1. Discuss the differences and similarities between evolutionism, diffusionism, historical particularism and functionalism
2. Discuss the varieties of functionalist and evolutionary theories.
3. How did the culture and personality theory emerge? What important personality character do you think you have from your own cultures shaping?
4. On what points do proponents of conflict school in anthropology such as neo-functionalists and Marxist anthropologists criticize functionalists? What are the strengths and weakness of these theories themselves?
5. What does cultural ecology theory maintain?
6. Distinguish between structuralism, ethnoscience and symbolic anthropology, describing the weaknesses of each theory.
7. Distinguish between the deductive do inductive approaches.
8. Outline the differences between ethnographic research method and survey method.

9. What is the genealogical method? For what do anthropologists use it?
10. Distinguish between the emic and etic approaches.
11. Compare and contrast participant observation with well-informed informant methods.
12. Why do you think literature review is necessary?
13. Why is data analysis needed? What are the essential elements of data analysis?



CHAPTER THREE

THE CONCEPT OF CULTURE

Learning Objectives

At the end of this chapter, students will be able to:

- Define the concept of culture;
- Describe some major characteristics or features of culture;
- Describe some key cultural concepts;
- Understand the relationship that exists between culture, individual behaviors, health and disease.

3.1. The Concept of Culture

The concept of culture is central to anthropology. The capacity for making culture differentiates mankind from nonhumans. The term *culture* is not used with consistent meanings. It is used with various meanings in commonsense. It makes the backbone of sociology and sociocultural anthropology and other related disciplines such as cultural geography and social psychology. As a scientific term, culture refers to all the features of a society's ways of life: e.g. production, modes of dress,

routine living habits, food preferences, the architecture of houses and public building, the layout of fields and farms; and systems of education, government, law, etc.

Here it may be useful to make few points regarding the difference between “culture” and “society”. For beginning students it may be often difficult to differentiate between culture and society. They may wonder how they can distinguish between the two, as the sociocultural anthropological approach to the concept of culture often is very broad and all-inclusive. It is also emphasized that culture includes all things beyond nature and biology. This may imply that culture includes society itself. For this reason, a simple definition of society to differentiate it from society is needed here. **Society** generally refers to the social world with all its structures, institutions, organizations, etc around us, and specifically to a *group of people* who live within some type of bounded territory and who share a common way of life. Whereas, culture is the common way of life shared by a group of people is termed as culture (Stockard, 1997).

Again before going any further, it also may be important to note that common people often misuse the concept of culture. Some misconceptions about the term culture include:

1. Many people in the western world use the term culture in the sense that some people are more "cultured" than others. This basically emanates from the idea associated with the root word of the term culture, "kulture" in German, which refers to "civilization". Thus, when one is said to be "cultured", he or she is said to be civilized. For an anthropologist, as Kottak (2002: 272) argues, "culture includes much more than refinement, taste, sophistication, education and appreciation of the fine arts. Not only college graduates but also all people are 'cultured'".
2. A second commonly used misconception is that which equates "culture" with things which are colorful, customs, cloths, foods, dancing, music, etc. As Kottak (*op. cit* p.525) argues, "... many [people] have come to think of culture in terms of colorful customs, music, dancing and

adornments clothing, jewelry and hairstyles.... Taken to an extreme, such images portray culture as recreational and ultimately unserious rather than something that ordinary people live everyday of their lives not just when they have festivals" (*Ibid.* P. 525).

3. A third misconception about what culture is and what it constitutes is that which may be entertained by many common people here in Ethiopia. This misconception is similar to the second one, but it differs from it in that most people here think culture (as conceptualized in its local language for example, *bahil* in Amharic) is that which pertains to unique traditional material objects or non – material things of the past. According to this view, the cultural may not include things (material or non – material) which are modern, more ordinary, day-to – day, life aspects. Here, the simple, ordinary social, economic and other activities, ideas and affairs are regarded as not cultural or somewhat "less cultural" although not clearly stated.

Coming back to the technical definition of culture, let us look one of the most commonly cited definitions of the term. Edward B. Tylor (1832-1917) a pioneering British anthropologist defined culture as “that complex whole which includes knowledge, belief, art, law, morals, customs, and any other capabilities and habits acquired by man as a member of society” (Howard and Dunaif-Hattis, 1992:361). One of Tylor’s most important contributions is that he was able to establish the differences between biological determined characteristics and those attributes which are socially learned.

The phrase “acquired by man as a member of society” in his definition is very important. It is not any habit or capability of man as a biological being, but man as a member of a social group. The definition focuses on beliefs and behavior that people acquire not through biological heredity but by growing up in a particular society and social group where they are exposed to a specific cultural tradition. It is through the socialization process that a person acquires a cultural knowledge. In anthropology, this process is called **enculturation**. Enculturation is specifically defined as the process by

which an individual learns the rules and values of one's culture (*Ibid.*).

The concept is an all-encompassing term that identifies not only the whole tangible lifestyles of people, but also the prevailing values and beliefs. In short, among the many definitions of culture, anthropologists have emphasized the learning, or acquisition of social habits, capabilities, beliefs, techniques, lifestyles, etc, that exists in a particular society or group. Anthropologists have focused on the symbolic dimensions of culture when defining it.

Box 3.1. An often-cited definition of culture given by E. B. Tylor

Culture is defined as “that complex whole which includes knowledge, belief, art, law, morals, customs, and any other capabilities and habits acquired by man as a member of society.”

3.2. Main Features of Culture

Cultural anthropologists characterize culture as follows (Kottak, 2002; Howard and Dunaif-Hattis, *op cit*; Clifton, 1968; Scupin and DeCorse, 1995):

1. Culture is all- encompassing:

Culture encompasses all aspects, which affect people in their everyday of their lives. Culture comprises countless material and non-material aspects of human lives. Thus, when we talk about a particular people's culture, we are referring to all of its man- made objects, ideas, activities whether those of traditional, old time things of the past or those created lately. Culture is the sum total of human creation: intellectual, technical, artistic, physical, and moral; it is the complex pattern of living that directs human social life, the things each new generation must learn and to which they eventually add.

2. Culture is general and specific

Generally, all human societies of the world have a culture. It distinguishes them from other nonhuman beings. Specifically, there are as specific cultures as there are diverse peoples in the world. Humanity shares

a capacity for culture (general), but people live in particular cultures where they are encultured.

3. *Culture is socially learned*

Culture is a natural outgrowth of the social interactions that constitute human groups whether in societies or organizations. Whenever and wherever people come to gather over time, culture develops. The essence of culture is that it is learned, shared, interrelated, and adaptive. Culture is learned through social interaction. And the learned behavior is communicated in the group through forms of socialization such as observation, instruction, reward, punishment and experience.

Three different ways of learning should be noted here:

- Individual situation learning: this means an individual animal or person learns something by himself as specific situations lead him.
- Social situational learning: this involves learning from other members of a group, through imitation. Even animals can learn this way.
- Cultural learning: this is uniquely human. It is possible only through the utilization of intelligence and the ability to communicate through attaching

meanings to words, objects or things. This is called symbolic communication. People learn culture directly and through observation and social interaction.

4. *Culture is symbolic*

Symbolic thought is unique and crucial to humans and to culture. Symbolic thought is the human ability to give a thing or event an arbitrary meaning and grasp and appreciate that meaning. Symbols are the central components of culture. Symbols refer to anything to which people attach meaning and which they use to communicate with others. More specifically, symbols are words, objects, gestures, sounds or images that represent something else rather than themselves. Symbolic thought is unique and crucial to humans and to culture. It is the human ability to give a thing or event an arbitrary meaning and grasp and appreciate that meaning. There is no obvious natural or necessary connection between a symbol and what it symbolizes.

Culture thus works in the symbolic domain emphasizing meaning, rather than the technical/practical rational side of human behavior. All actions have symbolic content as

well as being action in and of themselves. Things, actions, behaviors, etc, always stand for something else than merely, the thing itself.

5. *Culture seizes nature*

Culture imposes itself on nature. It suppresses the natural, biological instincts in us and expresses it in particular ways. For example, we as biological beings feel the desire for food; but what type of food to eat, how many times per day to eat, with whom to eat, how much to eat, how fast or slow to eat, etc, are all determined by the cultural values and norms of a particular group of people. Or, we feel the desire to urinate, but one cannot do that any time and anywhere, unless one is an animal, an immature child or a mentally sick person.

The nature- nurture debate is, however, a very heated one in the social sciences, and we need to underscore the fact of the dialectical relationship between the two. Nature in terms of the natural environment, the evolutionary growth and development in biological dimensions, genetic make-up of people, etc, is said to have its own important effect in determining the creation, expression and continuity of human culture.

6. Culture is shared

It is a possession of individuals as members of a social group; observing, listening, talking and interacting with other people learn it. Culturally distinct ways of thinking, behaving, feeling, and responding become habitual very early in life through sharing. Behavior and ways of thinking or interacting must be shared within a group of people in order to be considered part of culture. Some cultural patterns are shared by nearly all people in some culture; and shared culture gives people common experiences. However, we should note that not all things shared among a group of people are cultural. There are many biological and psychological characteristics are shared among a group of people.

7. Culture is patterned

Cultures are not haphazard collection of customs and beliefs, but are integrated, patterned systems. The parts are interrelated. Culture is an integrated whole, that is the parts of culture are interrelated to one another. No one single cultural trait has its meaning outside of its integrated context.

8. People use culture creatively

There is difference between ideal culture and real culture. What culture-rules say and what people do may be different; cultural rules tell us what to do and how to do it, but we don't always do what the rules dictate. We use culture creatively.

9. Culture is adaptive and maladaptive

People adapt themselves to the environment using culture. The ability to adapt themselves to practically any ecological condition, unlike other animals, makes humans unique. This ability is attributed to human's capacity for creating and using culture. Culture has also maladaptive dimensions. That is, the very cultural creations and achievements of peoples may turn out to threaten their survival. When we see the contemporary problems of the environments, the side effects of rapid growth and in science and technology, etc, we see that culture is also maladaptive.

10. Culture is stable and yet it changes

Culture is stable and yet changing: Culture is stable when we consider what people hold valuable and are handing over to the next generation in order to maintain

their norms and values. However, when culture comes into contact with other cultures, it can change. That is, cultural diffusion, the spread of cultural traits from one are to the other, may cause cultural change. However, culture changes not only because of direct or indirect contact between cultures, but also through innovation and adaptation to new circumstances. That is, the forces of culture change are not only external, but they are also internal.

Box 3.2. Ten important features of culture

1. Culture is all encompassing	6. Culture is shared
2. Culture is general and specific	7. Culture is patterned
3. Culture is socially learned	8. People creatively use culture
4. Culture is symbolic	9. Culture is adaptive and maladaptive
5. Culture is superior to nature	10. Culture is stable and yet changing

3.3. Ethnocentrism and Cultural Relativism

The concepts of ethnocentrism and cultural relativism occupy key position in socio-cultural anthropology. They are the most sensitive and controversial issues in sociology and sociocultural anthropology.

3.3.1. Ethnocentrism

All of us often tend to judge the behavior of other people in other groups by the standards of our own culture. Because of ethnocentrism, we often operate on the premise that our own society's ways are the correct, normal, better ways, for acting, thinking, feeling and behaving. Our own group is the center or axis of everything, and we scale and rate all others with reference to it. Ethnocentrism leads us to minimize our indebtedness to other people (Zanden, 1990:74).

Anthropologists endeavor as far as possible to avoid ethnocentrism. It is not logically possible and proper to underestimate or overestimate or judge other cultures on the basis of one's cultural standard. Ethnocentrism, in general, is an attitude of taking one's own culture and ways of life as the best and the center of all and on the other hand, regarding other ethnic groups and cultures

as inferior, bad, full of errors, etc. It is the tendency to apply one's own cultural values in judging the behavior and beliefs of people raised in other cultures. It is a cultural universal. People everywhere think that familiar explanations, opinion, and customs as true, right, proper and moral. They regard different behavior as strange or savage.

3.3.2. Cultural Relativism

We cannot grasp the behavior of other people if we interpret what they say and do in the light of our values, beliefs, and motives. Instead we need to examine their behavior as insiders, seeing it within the framework of their values, beliefs and motives. This approach is called cultural relativism. It suspends judgment and views the behavior of people from the perspective of their own culture (*Ibid.* p: 76)

Every society has its own culture, which is more or less unique. Every culture contains its own unique pattern of behavior which may seem alien to people from other cultural backgrounds. We cannot understand the practices and beliefs separately from the wider culture of which they are part. A culture has to be studied in terms

of its own meanings and values. Cultural relativism describes a situation where there is an attitude of respect for cultural differences rather than condemning other people's culture as uncivilized or backward.

Respect for cultural differences involves:

- Appreciating cultural diversity;
- Accepting and respecting other cultures;
- Trying to understand every culture and its elements in terms of its own context and logic;
- Accepting that each body of custom has inherent dignity and meaning as the way of life of one group which has worked out to its environment, to the biological needs of its members, and to the group relationships;
- Knowing that a person's own culture is only one among many; and
- Recognizing that what is immoral, ethical, acceptable, etc, in one culture may not be so in another culture.

Cultural relativism may be regarded as the opposite of ethnocentrism. However, there is some problem with the argument that behavior in a particular culture should not

be judged by the standards of another. This is because in its extremeness, it argues that there is no superior, international or universal morality. The anthropologists' main aim is to present accurate accounts of cultural phenomena. They do not have to approve customs such as infanticide, cannibalism or torture. Anthropologists respect human diversity. Although they are sensitive to objectivity, sensitivity and a cross-cultural perspective, they respect international standards of justice and morality (Scupin and DeCorse, 1995; Kottak, 2002).

To sum up the issues of ethnocentrism and cultural relativism, the concepts involve difficult choices, dilemmas and contradictions regarding cultural exchanges and relationships between and within societies. The dilemmas and contradictions become clear when we see that the traditional anthropological position maintains that every cultural beliefs and practice, including for example the ones which are termed as "harmful traditional practices" in Ethiopia, are part and parcel of the general cultural system of a society and therefore they should not be judged and undermined by any outsider. On the other hand, the dilemma is taken to the extreme cultural relativism

appears to entail a fallacy, in that it implies that there are no universal cultural or moral standard by which actions and beliefs have to be judged. Yet still, even cultural anthropologists accept the idea that there are some cultural standards which are universally found everywhere, expressed for example in the world's major religions.

In any case there may be no ready made solutions to this dilemma; however, what we can at present maintain is that cultural diversity has to be respected and yet international standards of justice and human rights have to be taken into account.

3.4. Components of Culture

For the sake of anthropological analysis, culture may be broken down into three main component parts. These components are: culture trait, culture complex and culture pattern. A culture is more than the sum of its parts. A mere listing of customs and norms and the material objects associated with them would by no means give a true picture of the culture.

- **Culture Traits (elements):** are the smallest (simplest) units of a certain culture. They are the building blocks of culture. It can be material or non-material culture. For example, pen, car, computer, plow, pot etc. (material); greeting, the custom of eating *injera*, respect for the elderly, treating patients, the practice of smoking using fork, knife, playing foot ball, etc. (non material)
- **Culture Complex:** when a number of culture traits or elements are fitted or combined together, they give a meaningful whole called culture complex. Culture complex is any integrated and patterned system of culture traits that function as a unit in a society. It is sometimes referred to as culture trait complex.
- **Culture pattern** is the organization of culture complexes constituting the entire cultural configuration of a society. E.g. the culture of sport in Ethiopia, the culture of medicine, the traditional medical beliefs, practices and institutions of Ethiopia.

The concepts of culture trait, complex and pattern need further elaboration. Culture traits are not necessarily confined to a single culture. More than one culture system may exhibit a particular culture trait, but each will consist of a discrete combination of traits. Such a combination is referred to as a culture complex. For example, in many cultures, the herding of cattle is a trait. However, cattle are regarded and used in different ways by different cultures. The Massai of East Africa could be good examples for this. Although the Massai culture complex is only one of the many cattle keeping complexes, no other culture complex exhibits exactly the same combination of traits as that of Massai.

Culture complexes have traits in common, and so it is possible to group within complexes together as culture systems. Ethnicity, language, religion, medical beliefs and practices, marriage and family system, political organization and economic activity, etc, all make up the culture system of a given society or country, like Ethiopia, Kenya, China, etc.

3.5. Some Important Concepts Related to Culture

3.5.1. Culture Region

Sociocultural anthropologists talk about **culture region** which is the geographical territory in which a particular culture prevails. It is marked by all the characteristics of a culture, including modes of dress, building styles, farms and field and other material manifestation.

3.5.2. Culture and Its Different Levels

Subcultures: We use the concept of **subculture** to denote the variability of culture within a certain society. It is system of perceptions, values; beliefs and assumption that are differed from those of dominate culture. Sub culture is a distinctive culture that is shared by a group within a society. We call it sub culture, because groups (with their sub cultures) exist within and as a smaller part of the main, dominant culture. Examples of subculture could be the distinctive culture of university students, street children and prostitutes in Addis Ababa, the culture of medical professionals, etc.

National culture: refers to experience, ideologies and beliefs learned and values shared by citizens of the same nation. The term “national culture” may seem misleading; a more appropriate term may thus be the “mainstream” or “dominant” culture, which is more or less subscribed to by multiplicity of groups in a given country.

International culture: refers to cultural traditions that extend beyond national boundaries through borrowing or diffusion. Again here, the term “international culture” may seem misleading. So a more “academic” term may be “global culture”. One of the main aspects of globalization is that a relatively uniform world culture is taking shape today in the world. The global culture may entail all speaking the same language, share the same values and norms, and sustain common understanding of knowledge as of residents of the same community (Kottak 2002). Global culture may also be associated with **cultural imperialism**, the unequal cultural exchange in the global system whereby western material and non-material cultures have come to occupy a dominating and imposing role over the indigenous cultures of the Third World peoples (Kottak 2002).

The global culture is often promoted by:

- The global spread of capitalism
- Consumerism and the consumer culture
- The growth of transnational media, particularly electronic mass media such as BBC, CNN, etc.

The transnational media have often promoted the aggressive promotion that its value system is superior and preferable to those of other non-western cultures

3.5.3. Cultural Universals

Anthropology assumes that all human beings are fundamentally alike and they share the same basic biological, psychological, social and other characteristics. All people all over the world have certain common obligations one to another. All people are members of a single community; they all have the same root and destiny. This belief is either explicit or implicit in most of the great world religions (Hammond, 1971). The perceptive famous statement of the American anthropologist Clyde Kluckhohn suggests this truth: “every human is like all other humans, some other humans, and no other humans” (cited in Scupin and DeCorse, 1995:195).

Certain biological, psychological, social and cultural features of human beings are universal; others are merely generalities, common to several but not to all human groups. Still other cultural features are particularities unique to certain cultural traditions.

- *Biological universals*: long period of infant dependency; year round sexuality; a complex brain that enables to use symbols, languages, tools, etc. Whether “modern” or “primitive” all people share these universal biological features.
- *Psychological universals*: arise from human biology and from experiences common to human development in all cases: growth in the womb, birth, interaction with parents, etc
- *Social universals*: life in groups, family, food sharing, exogamy, incest taboo, etc. For example, all people prohibit sexual contact or marriage between individuals with close blood relations. It is regarded as a taboo that is something unmentionable or forbidden to touch or talk about.

• **Table 3.1. A list of some cultural universals**

age grading	faith healing	joking	pregnancy usages
athletics	family	kin groups	property rites
bodily adornments	feasting	kin terminology	puberty customs
calendar	fire making	language	religious rituals
community organization	folklore	magic	residence rules
cooking	food taboos	marriage	sexual restrictions
cooperative labor	funeral rites	mealtimes	soul concepts
cosmology	games	medicine	status differentiation
courtship	gestures	modesty	trade
dancing	gift giving	mourning	tool making
decorative labor	greetings	music	visiting
division of labor	hair styles	mythology	weaning

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dream interpretation	hospitality	numerals	weather control
education	housing	obstetrics	
ethics	hygiene	personal names	
ethnobotany	incest taboos	population policy	
etiquette	inheritance rules	postnatal care	

Source: Scupin, Raymond and Christopher R. DeCorse (1995). *Anthropology, a Global Perspective*. Englewood Cliffs, New Jersey: Prentice-Hall.

3.5.4. Generalized Cultures

Cultural generality refers to regularities that occur in different times and places but not in all cultures (Kottak, 2002). Cultural generalities may be explained by diffusion of cultures from one place to another. It could be through contacts, trades, wars, etc; or by independent invention; this means two or more societies may invent or create similar cultural belief or practice independently, not by copying or imitation. Examples for this include: nuclear family, monogamy, strict control over women's virginity, etc.

3.5.5. Localized Cultures

These are cultural traditions which are unique to only few societies. They occur rarely. For example, homosexuality or lesbianism as a way of life, polyandrous marriage practice, eating of raw meat, etc. In Ethiopia, there are varieties of cultures which may be termed as localized cultures. For example, the practice of attaching a circular piece of pottery material by incising the lower edges of lip among Mursi women, the practice of going naked among some peoples in southwest Ethiopia, etc. could be localized cultures.

3.5.6. Culture Shock

Culture shock is the psychological and social maladjustment at micro or macro level that is experienced for the first time when people encounter new cultural elements such as new things, new ideas, new concepts, seemingly strange beliefs and practices. No person is protected from culture shock. However, individuals vary in their capacity to adapt and overcome the influence of culture shock. Highly ethnocentric people are exposed widely to culture shock. On the other hand, cultural relativists may find it easy to adapt to new situations and overcome culture shock (*Ibid*, Angeloni, 1998; Howrad and Dunaif-Hattis, 1992).

3.6. Language and Culture

Some important concepts and issues relating to language and culture are briefly discussed in Chapter One, in the section dealing with “Linguistic Anthropology”. Here it will suffice to mention few important points. Language is one of the corner stones of national identity, of cultural unity, and of community cohesion. Old languages with historic roots and languages spoken by threatened minorities are nurtured

and fostered by their speakers. But language can also be a weapon in cultural conflict and in political strife.

Language, defined as a system of verbal and in many cases written symbols with rules about how those symbols can be strung together to convey more complex meanings (Henslin and Nelson 1995), is the distinctive capacity and possession of humans; it is a key element of culture. Culture encompasses language, and through language, culture is communicated and transmitted. Without language it would be impossible to develop, elaborate and transmit culture to the future generation (Broom and Lsezenki, . 1973).

3.7. Culture and Its Influence on People's Behavior

Culture is both public and individual, both in the world and in people's minds. Anthropologists are interested in not only in public and collective behavior but also in how individuals think, feel and act. The individual and culture are linked because human social life is a process in which individuals internalize the meanings of public (i.e. cultural) message. Individuals influence culture (either

alone or in groups) by converting their private understandings into public expressions.

The issues of culture and the individual are studied in psychological anthropology. This field is interested in the ethnographic and cross-cultural study of differences and similarities in human psychology (Kottak, 1994). Individual personality, lifestyles, basic attitudes and characters are all reflections of the cultural background of the individuals. The processes of enculturation and socialization work a powerful influence in the behavioral pattern and character development of individuals.

Health behavior is just an aspect of the overall social behavior of individuals and the individual's behaviors are reflections of their societal and cultural backgrounds. In other words, cultures plays influential roles in shaping and determining the way people act, live, think, and view the world. Obesity, as a health problem, for example, is associated with peoples' nutritional behavior (Howard and Dunaif-Hattis, 1992). Other social behaviors such as smoking, alcoholism, *chat* chewing, etc, reflect peoples' social and cultural backgrounds.

In short, the cultural values, norms, beliefs and practices of a group of people or any social group are related to the specific behavioral and character aspects of the individual person who is part of that culture. The person's living styles, life philosophy and attitudes are all very important in determining his or her health behavior and condition. That is, certain disease types are observed to be prevalent among a certain group of people or sections of society. This shows the social and cultural origins of some crucial health problems, and if these origins are addressed many of the health problems may be solved.

3.8. Chapter Summary

The commonsense meaning of culture, as we use it in our ordinary conversations, is often too much limited in scope; it does not capture the complex aspects of culture. However, culture is defined as being equivalent to the entire learned and shared behaviors, beliefs, practices, institutions, of a society or a group of people; all the material and non-material objects created and used by the group is culture. Anything apart from the naturally or biologically occurring thing is cultural. However, this all-encompassing view culture should be

viewed cautiously, because it may mislead beginners to assume that society itself is cultural.

The concept of culture has been defined in quite several ways; there are as many definitions as there are writers in the fields of anthropology or sociology. One of the most often cited definitions of culture was the one formulated by the British anthropologist by the name of Tylor. His definition basically equates culture with all the habits and capabilities that a person acquires as a member of a group.

The important features of culture are that culture is all-encompassing; it is socially learned; it seizes nature; it is adaptive and maladaptive; is stable yet changes; is shared; is symbolic; is specific and general; is shared; patterned and people use it creatively.

All human beings are cultured; there is no cultural superiority or inferiority among societies. However, all people to some extent tend to regard their own cultural values and norms as better and somewhat normal or natural; this tendency is called ethnocentrism; on the other hand we need to realize that every cultural trait

need to be understood in its own context; this necessitate cultural relativism. Cultural relativism taken to its extreme however, pauses danger and controversies.

Some cultural beliefs and practices are universal, meaning they are found among all human groups; others are generalized, meaning they are practiced by most peoples in the world; while others are particular, meaning they are limited to few human groups. Culture has components within it; culture traits represent the simple strands or elements in people's culture, like the use of knife or fork when eating food; culture traits combined together are culture complexes, and culture complexes combined together give us the culture pattern of people.

Culture and the behaviors of individual persons in group or society are intimately tied together. Individuals usually behave, act, think, and view things according to the general cultural values, norms, beliefs of the group to which they belong. Peoples' character and personality types are mainly the reflections of their culture.

Review Questions

1. What is culture?
2. Mention and discuss the key characteristics of culture.
3. Distinguish between ethnocentrism and cultural relativism.
4. How should you as a health science student being trained in a highly rationalized science respond to the traditional values, beliefs and practices (including for example the so-called harmful traditional practices), as these may appear to be contradicting with your field of training?
5. Why and how does culture shock occur? Have you ever experienced culture shock? Did it have any adverse impact on your life? Discuss.
6. What is the relationship between culture and language?
7. Identify at least five cultural beliefs and practices which you think are universally practiced among all Ethiopian peoples.
8. Identify at least three cultural beliefs and practices which you think to be generally found in most parts of Ethiopia
9. Give examples of cultural particularities in Ethiopia.

10. Mention at least three diseases that you think are associated with the social behavior, life styles and cultural practices of people. Explain why you think so.



CHAPTER FOUR

KINSHIP, MARRIAGE AND THE FAMILY

Learning Objectives

After completing this chapter, the students will be able to:

- Define the concepts of kinship, marriage and the family;
- Describe the relationship that exists between marriage, the family and health;
- Appreciate the diversities in marriage and family practices across societies in general and in Ethiopia in particular;
- Understand the changes in and current problems of marriage and family systems in Ethiopia; and
- Understand and appreciate the psychosocial functions of marriage and the family.

4.1. The Concept of Kinship

Kinship is considered the lifeblood or the social building blocks of the people anthropologists study. In non-

industrialized, non-literate cultures, kinship, marriage and the family form the bases of social life, economic activity and political organization. The behavior and activities of people in such societies are usually kinship-oriented (Keesing, 1981).

Thus, one of the main concerns of anthropologists in studying the ways of life in small-scale, non-industrial societies is to understand the principles of kinship, marriage and the family. In contemporary, modern societies, most people's contacts outside the home are with non-relatives. However, people in non-industrial cultures spend their lives almost exclusively with relatives and associates. Everyone is related to, and spends most of his/her time with, everyone else, and rules of behavior attached to particular kin relationship are basic to every day life (Kottak, 2002; Keesing, *op cit*).

Kinship is defined as the network in which people are related to one another through blood, marriage and other ties. Kinship is a kind of social relationship that ties people. Kinship is universally found in all societies. Kinship can be created through three ways:

1) *Through blood*: this is the principle of consanguinity. A consanguine is a person who is related to another person through blood. Consanguines include kin, not friends. Examples of consanguines are the following: a parent's (father/mother/grand-parent) relation to a child; relation between siblings (brothers and sisters); an individual's relation to his/ her uncle, aunt, niece or nephew; etc.

(2) *Through marriage*: this is the principle of affinity. E.g. kinship ties between husband and wife; husband and his wife's group; wife and her husband's group, etc

(3) *Through adoption, fostering, god-parenthood, etc.* This is called the principle of fictitious kinship. Fictitious kinship is, in other words, a kind of relationship in which two individuals create a kind of parent-child relationship without any blood or marriage ties.

4.2. Defining Marriage

Marriage is defined as basically a sexual union between a man and a woman such that children born to the woman are considered the legitimate offspring of both parents. The main purpose of marriage is to create new

social relationships, rights and obligations between the spouses and their kin, and to establish the rights and status of children when they are born. In traditional, simple societies, marriage is often more of a relationship between groups than one between individuals. In industrial societies, it is more of individual matter. The idea of romantic love is less common in traditional (non-industrial) societies. Marriage, thus, is a group concern in such societies. Marriage in industrial societies joins individuals and relationship between individuals can be severed (broken) more easily than those between groups (Olson and De Frain, 1999).

4.3. Types of Marriage

Generally, marriage is classified into **monogamy** and **polygamy**. Monogamy is marriage which involves usually a man and a woman; it is a one to one marriage. Monogamous marriage is very common in most societies of the world. Polygamy (also called plural marriage) is permitted in many cultures. The two kinds of polygamy are **polygyny** and **polyandry**. The former involves multiple wives (a man marrying more than one woman at a time) and the latter involves multiple husbands (i.e. one woman married to more than one

man at a time). Polygyny and polyandry are found in various social and cultural contexts and occur for many reasons; polygyny is much more common than polyandry. The most common form of polyandrous marriage is termed as **fraternal polyandry**, which involve two or more brothers taking a single woman as their wife. Polyandrous marriage is very rare and it occurs mainly in South Asian societies such as Tibet, Burma, Nepal, India, and so on (Angeloni, 1998; Howard and Dunaif-Hattis, 1992). There are demographic, economic, ecological and other reasons for plural marriages. In Ethiopia, plural marriages, particularly a man marrying more than one woman is common in most southern and southwestern parts and Muslim societies.

There are also some other forms of marriage arrangement identified by sociocultural anthropologists. One of these is called **levirate marriage**, which is a form of marriage whereby a man is entitled to inherit the wife of his deceased brother or close relative. This practice may also be called *wife inheritance*. This form of marriage is common in some parts of Ethiopia and elsewhere in traditional societies, despite it may be

declining these days. The converse of levirate marriage is termed as **sororate marriage**, which entitles a man to take as wife a sister or close relative of his deceased wife.

A more common form of marriage, which is classified among the so-called harmful traditional practices in Ethiopia, is called **child marriage**. This form of marriage takes place in manner where by concerned parties agree to arrange the marriage of a young girl (as young as below ten years of age in some parts of Ethiopia) to usually an older person. However, child marriage may not always involve a young girl being married to an older man. The focus is on the physical, psychological immaturity of the girl and how these conditions may result in serious social, physical, psychological and other consequences for the young girl.

Box 4.1. Forms of marriage

Monogamy: one-to-one marriage, usually male to female

Polygamy: one-to-many marriage

Polyandry: one woman married to more than one male at a time

Fraternal polyandry: two or more brothers taking one woman as their wife

Polygyny: One male marrying more than one wife at a time

Wife inheritance/ levirate marriage: A man entitled to marry his deceased brothers or close relative's wife

Sororate marriage: a man entitled to marry the sister or close relative of his deceased wife

Child marriage/ arranged marriage: A physically/ mentally immature, young girl given in marriage usually to an older man

4.4. Rules of Marriage

There are two types of rules of marriage: These are **endogamy** and **exogamy**. Endogamy is a marriage rule, which requires that people marry within their own social group (e.g. their own tribe, nationality, religion,

race, community, social class, etc). On the other hand, exogamy requires that people marry outside a group to which they belong. It bars marriage within smaller inner circle, i.e. one's own close relatives. One of the main concerns of exogamous marriage rule is prohibition of incest, i.e., marrying or sexual contact between blood relatives.

4.5. Marriage Payments

Marriage is regarded as a contractual agreement between different parties (groups), examining rights and values transferred and the various economic and political rights and interests. The terms of marriage may thus include **bride service**, which is the labor service provided for the parents of the bride (or the would-be wife) by the bridegroom (or the would-be husband); **bride price**, which is marriage payment made to the bride and/or her group, in terms of money and material gifts by the bride groom; and **dowry**, which refers to marriage gifts made to the bridegroom usually by the bride and her family (Howard and Dunaif-Hattis, 1992; Scupin and DeCorse, 1995).

4.6. Definition and Types of the family

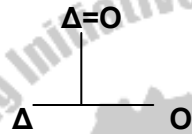
One of the functions of marriage is that it leads to the creation of **families**, although families may come into being independently of marriage. However, marriage provides the family its legal and social validity. The family may be conventionally defined as “an intimate kin-based group that consists of at least a parent-child nucleus”; it is a minimal social unit that cooperated economically and assumes responsibilities for rearing children (Olson and DeFrain, 1999; Howard and Dunaif-Hattis, *op cit p.*: 462).

A dominant form of family in today's modern society consists of a husband, wife and their dependent child or children. This is called **nuclear family**. However, this form of family is not the ideal one in societies where polygamous marriage form is dominant; it is rare among small-scale, agriculturalist societies in the Third World.

Thus, a more general definition of family considers the family as any social group of people who are united together by ties of marriage, ancestry or adoption, having the responsibility for rearing children. A family in much small- scale, traditional societies may constitute a

husband, his wife/wives, his wife's/ wives' children and/or the wives and children of his sons. This form of family is called **extended family**. Extended families may emerge out of polygamous and marriage forms.

Figure 4.1. An example of nuclear family form



Where Δ stands for husband or male or father

O stands for wife, mother of female

= for marriage

Vertical line the other triangle and circle joined by a horizontal line signify children descending (resulting) from the marriage.

4.7. Functions of the Family

The family is the most basic unit of all social institutions; it is the building block of any society. It is so important to individuals and society because it responds to some of the fundamental human needs, both individual and collective. These needs include the needs for love and emotional security, the need to regulate sexual behavior, the need to reproduce generations, the need

to protect the young and the disabled (the sick), and the need to socialize children.

The most important psychosocial function of the family is *socialization*. It is the process by which newborn children are trained in the society's values, norms, standards of behaviors action, etc. Socialization is essential to the personality, emotional, social and intellectual development of children. Without proper socialization, children would end up being mere biological beings, or they would develop anti-societal attitudes and behaviors.

The other important psychosocial function of the family, particularly in traditional societies is providing social support, psychological comfort and physical care and protection for the young, the sick, the disabled and the aged. Such families exert powerful authority on the behaviors of children; this is particularly true regarding children's sexual behavior. One of the reasons for the widespread nature of sexually transmitted diseases, including HIV/AIDS could be the weakening of the traditional authority systems of the family.

The family also plays the role of providing primary health needs and maintaining health and well being for its members. The family is the essential unit, particularly in the contexts of developing societies, in the kin-based communal networks, where para-medical services are freely made available to the kinfolk. The kinsfolk take notice of illness, take care of and comfort the sick person, and make him or her feel that he or she has the support in his/ her suffering (Read, 1966).

4.8. Trends in and Problems of Contemporary Marriage and the Family

Due to various factors such as the powerful influence of modernization, changes are taking place in the marriage and family systems. The types and volume of problems prevailing in our contemporary society are enormous. However, not all of the changes are negative; some may be beneficial (Olson and DeFrain, 1999)

A simple comparison of the traditional (past) and modern (contemporary) marriage and family systems will show that many things have changed. One of the changing aspects is the issue of divorce. Divorce is the

breakdown of marriage. Official statistics show that even in Ethiopia, the divorce rate is increasing at an alarming rate. Today it is easier for a couple to get divorced than it was in the past. Even minor reasons may be regarded as a cause for divorce today. Divorce has many social, psychological and related consequences (*Ibid.*).

One other important contemporary phenomenon is the increasing trends in female headed households and the associated problems, as may be observed in both rural and urban areas. `What has come to be known as “the feminization of poverty” is also part of this ongoing trend. This means that, among other things, women become more and more affected by the outcomes of marital breakdowns. Drought, famine war and conflict, etc are also other associated factors which contribute to the burden of poverty on women.

4.9. Chapter Summary

Kinship relationship is basic to a traditional society. Understanding the principles of kinship, marriage, and the family; the diverse forms of family and marriage practices; the values and norms that are associated with them; etc, are is very important. Marriage and the family

form the foundation of all societies; without sound and proper family and marriage systems, society will collapse. Many of the contemporary social and health problems in our society may be due to the ills of family and marriage system. Although some of the changing trends in family and marriage systems are positive and beneficial especially to women, many are negative and dangerous. One example is divorce, the breaking down of marriage; divorce results in family disorganization and many other psychosocial problems. The street children problem and the ever-increasing number of older and disabled persons taking to the streets (i.e., going to streets for begging) may be due to the breakdown of traditional marriage and family systems.

Review Questions

1. Define the term kinship?
2. How is kinship different from other forms of social relationships?
3. Distinguish between the principles of consanguinity and affinity.
4. What forms of marriage are practiced in your area?
5. Describe the advantages and disadvantages of nuclear and extended family forms.
6. If men marry in your areas more than one woman, explain the reasons behind. Is such a practice declining or increasing? Why?
7. Discuss the psychosocial and effects of marriage breakdown and/ or divorce.
8. Discuss the aspects of family and marriage systems that have changed in your area. Which ones are positive and which ones are negative?
9. How does levirate marriage or wife inheritance affect the health of women?
10. Explain the psychosocial and physical effects of early/ arranged marriage on the young woman.

CHAPTER FIVE

GENDER, ETHNICITY AND RACE

Learning Objectives

After completing this chapter students will be able to:

- Define gender;
- Describe gender socialization and understand in what ways it adversely affect the lives of women;
- Define the concept of ethnicity;
- Explain the influences of gender stereotypes on health;
- Differentiate between biological and socio-cultural aspects of gender; and
- Identify and explain the prejudices, stereotypes and discriminations based on gender, ethnicity, and race, as well as the possible solutions to such problems in a society.

5.1. The Concept of Gender

It is appropriate to state that **gender** system is socially constructed. According to Distch (1996:19)

Religious, political, educational, communications and occupational institutions, along with the family, create and enforce expectations for how women and men should behave in all known societies. Although the gender rules vary from one cultural setting to the other, all have such rules and most of these rules are rooted in patriarchy, the control of or dominance of women by men...

In other words, gender differences derive from social and cultural processes (Bilton, *et al.*, 1996).

Anthropological studies of gender across cultures indicate that in most societies women are made to occupy lower social statuses in a highly patriarchal society. **Patriarchy** refers to the institutionalized systems of male dominance in a given society, whereby the “father” figures that is the males are entitled to privileged positions, powers and status in society.

There is a difference between sex and gender. Sex differences between men and women are biological or natural. Men and women differ both in primary sexual

characteristics, such as genitalia and reproductive organs, and in secondary sexual characteristics, such as breasts, voice, hair distribution over the body, etc. They also differ in average weight, height and physical strength.

The term *gender* includes all the traits or characteristics that a culture assigns to males and females. It refers to the social and cultural construction of male and female personalities (Kottak, 2002; Distch, *op cit*).

5.2. Gender Role Socialization

Many of the behavioral differences between males and females are the results of gender role socialization. Every society has its own beliefs, values and norms regarding what a female or a male should look like or how they should behave or act. Gender roles are the tasks and activities that a culture assigns to the male and female sexes. Gender roles vary with environment, type of economic activities, peoples' adaptive strategy, and level of social complexity (Lorber, 1999; Kottak 2002; Distch, *op cit*).

The gender role socializations entail gender division of labor. It appears that in almost all societies division of labor is made on gendered basis. There are institutionalized rules which specify how and in what spheres the labor of females and males are to be utilized.

5.3. Gender Stereotypes and Stratification

5.3.1. Gender Stereotypes

Gender stereotypes are over-simplified but strongly held ideas about the characteristics of males and females. A stereotype is a very strong preconceived idea or attitude in the minds of people about something. It is often very difficult to get rid of this stereotype. Gender stereotypes are negative in most cases. For example, there are more negative gender stereotypes against females or women than there are against males. Most societies usually hold undermining stereotypes about women. This is especially very common in traditional, rural societies (Keesing, 1981; Kottak, *op cit*).

5.3.2. Gender Stratification

Gender stratification describes an unequal distribution of rewards (socially valued resources, power, prestige and personal freedom) between men and women, reflecting

their different positions in a social hierarchy. Gender stereotypes open the way for gender stratification (Kottak, *op cit*). This means that men and women or males and females do not have equal access to society's resources. Beginning from childhood, boys and girls are socialized or trained in what the society regards as acceptable and normal way of behavior or life for the sexes. Girls are taught to be submissive to boys; boys are trained to be aggressive, more outgoing, strong, talkative, etc. Males are provided with more power, prestige, privilege and respect than the female sexes.

Gender stratification has placed more men in positions of influential economic, social and political importance. There are a few female sexes in high-ranking social, economic and political positions. Males have more decision making power than females. This is the case in most societies. This is not due to the low intelligence and performance level of females, although it is often thought as such. It is the result of the gender role socialization process, gender ideologies and stratification.

5.4. Implications of Gender Role Socialization for Health

Gender role socialization, among other things, creates unfair burden on women. Starting from childhood, girls are often, especially in rural areas, burdened with higher workload than boys in the household division of labor. This may have an adverse effect on the health of women (Lorber, 1999). On the other hand, boys are often taught to be tough, involve in aggressive behaviors, adventures and risk taking actions. This may partly explain why there are often more cases of morbidity among females than males. On average, females tend to be more morbid than males, and males tend to enjoy better health than females. However, mortality rates tend to be higher for males than for females. This may be explained partly by social and cultural reasons and partly by biological reasons.

Some research findings show that, on average, women live longer than men for both biological and socio-cultural factors. Risky social and health behaviors such as smoking, *chat* chewing, drug addiction, fighting, involvement in criminal activities, alcoholism,

adventures, etc, are mainly the causes for shorter life expectancy for males than for females.

Some gender based traditional obstetric and gynecologic practices also put women in a more disadvantaged position than men. Food avoidance practices during pregnancy, for example, may affect women adversely.

Furthermore, the dual reproductive and productive roles of women often result in great burden and health risks on women; this is particularly true in rural areas of developing societies such as Ethiopia. The women's reproductive roles such as pregnancy, childbirth, breastfeeding and the burden of childcare are all possible domains of health risks for women. The productive roles of women which are all too common in rural areas such as the time consuming and labor intensive chores such as collecting firewood and fetching water traveling long distances and girding grains, etc are also other crucial domains of health risks. Women are also more exposed to health risks due to such factors as the burden of participation in various livelihood activities in agriculture animal husbandry

another off-farm activities; lack of labor saving services and lack of access to basic social services such as health care facilities; and as stated earlier, the general preponderance of poverty among women which often involves widespread malnutrition (*Personal communication, Dr. Teketel Abebe, Addis Ababa University, Department of Sociology and Social Administration.*)

5.5. Ethnicity and Race

Ethnic and race relations are exciting, challenging and dynamic fields of study in sociocultural anthropology. The issues touch all of us, directly or indirectly, in many ways and it does so on personal regional, national and even global levels (Parrilo, 2002).

Ethnicity refers to identification with, and feeling part of an ethnic group, and exclusion from certain other groups because of this affiliation. In other words, ethnicity is “selected perceived cultural or physical differences used to class people into groups or categories considered to be significantly distinct, whereby individually identify themselves socially and culturally (Howard and Dunaif-Hattis, 1992). It is based on cultural similarities and

difference in a society or nation. The similarities are with members of the same group; the differences are between that group and others.

Members of an ethnic group share certain beliefs, values, habits customs and norms. They define themselves as different and special because of cultural features. This distinction may arise from language, religion, common historical experience, geographic isolation, kinship or race. Markers of ethnic groups may include a collective name, belief in common descent, a sense of solidarity, and an association with a specific territory which the group may or may not hold (Kottak, 2002; Scupin and DeCorse, 1995).

Members of an ethnic group may define themselves and /or be defined by others as different and special because of their language, religion, geography, history, ancestry, or physical traits. When an ethnic group is assumed to have a biological base (absolute "blood" or genetic material) it is called a **race**. However, race is both a cultural construct and a discredited biological term. It has been the most abused term and is obsolete (Howard and Dunaif-Hattis, *op cit*; Kottak, 2002; Parillo,

op cit). When anthropologists say that race is a cultural or social construct, they mean it is created socially by people, not naturally or biologically existing. Race, like ethnicity in general is a cultural category (construction, or product) rather than a biological reality.

Out of this abuse emerged **racism**, which is the social and political abuse of the biological concept of race for the explicit or implicit purpose of favoring one group of people over the other. Racism involves the use of perceived and imagined biological differences to determine people's position in relation to one another. The different ethnic and racial groups are usually results of peoples' perceptions of how different they are from others. The different racial classifications that exist in Ethiopia today and elsewhere are often not based on scientific criteria and common good. It is usually meant to favor one group of people over the other.

Thus, it is difficult to define races biologically, even though the average citizen conceptualizes (or understands) it in biological terms. The belief that races exist and are important is much more common among the general public than it is among scientists. That is, it

is the ordinary people who talk about races in biological terms, not the scientists. As far as anthropology is concerned, all people are fundamentally alike in basic biopsychic make-up, despite the outward physical variations.

This being the real fact, people since the old times have believed that there are superior and inferior races, and this belief is still rampant even in the so-called modern societies. It is the source of exploitation and domination of the minority groups by the majority.

In general, clearly, races are culturally constructed categories that may have little to do with actual biological differences. Furthermore, the validity of race as a biological term has been discredited. That is, it is no longer accepted as a scientific fact.

Box 5.1. Ethnicity, race and racism

- **Ethnicity** is “selected perceived cultural or physical differences used to class people into groups or categories considered to be significantly distinct, whereby individually identify themselves socially and culturally
- When an ethnic group is assumed to have a biological base (absolute "blood" or genetic material) it is called a **race**.
- **Racism** is the social and political abuse of the biological concept of race for the explicit or implicit purpose of favoring one group of people over the other.

5.6. Ethnic and Racial Stereotypes

/Discriminations Affecting Access to Health Care

Ethnicity and race relations can be expressed in peaceful multiculturalism or in discrimination or violent inter-ethnic confrontation and conflicts. Ethnic and racial conflicts often arise in reaction to prejudice (negative attitudes and judgments) or discrimination (action). Prejudice means devaluing (looking down upon) a group because of its assumed behavior, values, capabilities or

attributes. Negative discrimination refers to policies and practices that harm a group and its members. Discrimination may be *de facto* (that is, practiced, but not legally sanctioned) or *de jure* (that is, part of law). The most extreme form of ethnic and racial discrimination is called *genocide*. Genocide is the deliberate elimination of a group of people through mass murder. Institutional discrimination refers to programs, policies, and arrangements that deny equal rights and opportunities to particular groups of people. There are also positive discriminations, which are nowadays common. Such discriminations involve programs and arrangements that are meant to boost the morale and promote socioeconomic standing of individuals and groups which are discriminated and marginalized (Kottak, 2002).

Dominant groups may try to destroy the cultures of ethnic groups; this is called *ethnocide*. Ethnocide in other words is the purposeful destruction of the cultural beliefs, practices and institutions of a minority group of people by the dominant group. This may be done through forced assimilation of the minority group into the ways of life of the dominant group.

Ethnic and racial stereotypes are the sources for the ethnic and racial discrimination in a given society. They are the strongly held (often negative) assumptions, beliefs and attitudes people have towards a member or members of a certain ethnic group. Such wrong ideologies lead to ethnic and racial stratification and discrimination.

Access to different opportunities like quality of life, better health care, educational opportunities, etc, vary among the various ethnic and racial groups. This justifies the anthropological claim that diseases and illnesses are socially and culturally produced, and so are the issues of who gets sick and who enjoys better health (Conrad and Kern, 1994). People belonging to a dominant group may enjoy better quality of life, better health care, higher life expectancy, low morbidity and mortality, better educational opportunities, etc. On the other hand, people belonging to the minority, ethnic and racial groups may suffer from poor living conditions, poor health care services, low quality of life measured by high rate of infant and maternal morbidity and mortality, low life expectancy, limited or no access to better educational opportunities, etc (Krieger, 2000). The best

example of such kind of ethnic and racial discrimination may be that of the former Republic of South Africa, during its Apartheid, racist government. The system legally promoted ethnic and racial discrimination, (*de jure*). The few European white settlers enjoyed all of the good indicators of life, while the black majority of African population suffered from all of the aforementioned problems.

Although in the current world system there may be no *de jure* ethnic and racial discrimination, various forms of discrimination still exist in many parts of the world in different subtle (that is easily unrecognizable) ways. Minority groups may still be suffering from such discriminations. They may be denied of equal access to various opportunities. Our world is now facing huge problems of refugees. Refugees are those people who were made leave their original places of residence and countries due to various reasons, including discrimination. Among other things, they face the problems of poor health care, high rates of morbidity and mortality, limited access to social and economic opportunities, although the concerned agencies make efforts to address their problems.

5.7. Chapter Summary

The concepts of gender, ethnicity and race are very important in anthropology. Studies of gender, ethnic and race focus on the social and cultural dimensions of these issues. Anthropology assumes that there is no inferiority or superiority between males and females, as well as between the different groups of people in the world. All people, male or female, white or black, Chinese or Sudanese, Semitic or Cushitic are fundamentally alike, and share similar basic biological and psycho-social characteristics, despite outward natural or physical differences. However, people from the very beginning have used sex and physical differences as the justification for the inferiority of one group or superiority of another. Due to various historical incidents, some groups become dominant and others become minority.

Gender, ethnic and racial stereotypes and ideologies that exist in a given society are the sources of stratification and discrimination. These lead to the unequal distribution of economic, social and political power and resources between males and females as well as between one ethnic group and the other.

Throughout the history of human beings, such forms of discriminations have been openly and explicitly practiced. This is called *de jure* discrimination. But nowadays, due to the advancement in social sciences and wide acceptance of the universal equality of all human beings, such kinds of discriminations have been legally abandoned. However, they still exist in subtle manners.

Wide gaps still exist in the quality of life, educational and economic opportunities, health conditions, etc, between males and females as well as between the various groups of people. Minority groups in different parts of the world are still enduring many social, economic, health problems. People are still being forcefully expelled from their homes and countries, and are exposed to many problems.

Review Questions

1. What is the difference between sex and gender?
2. Why are females found in lower social, political and economic positions than males in Ethiopia?
3. Mention at least ten gender stereotypes that may be negative or positive which undermine women and favor men.
4. What are the trends in the status of women in your community? Are there positive changes? If yes, what are the reasons?
5. What health problems do women face in your community due to gender stratifications and discriminations?
6. What is the difference between ethnicity and race?
7. Are there cases of ethnic and racial prejudices, stereotypes and discriminations in Ethiopia, and in your community? Mention and discuss some of them.
8. Are there cases of inequalities in access to opportunities such as better health care services among the different ethnic groups in Ethiopia and in your area? If yes, give examples.

CHAPTER SIX

THE ANTHROPOLOGY OF RELIGION

Learning Objectives

After completing this topic, students will be able to

- Define religion;
- Describe the religious diversities that exist in the world;
- Appreciate the role and functions of religion in society; and
- Appreciate the relation between religion and health.

6.1. What is the Anthropology of Religion?

The **anthropology of religion** is a specialized field of study within social/ cultural anthropology. From the very beginning, one of the main subject areas for anthropology has been religious beliefs, practices, and institution of the non-western world. Like kinship, religion is a very dominant organizing principle of human society; and it is inextricably linked to, and affects,

economy, politics, kinship, family, marriage, language, medicine, etc.

Anthropology of religion may be defined as a specialized field of study, which is concerned with the relation between the sacred and society. The term *sacred* means *that which is set apart or regarded with great respect, fear and reverent attitude*. The main focus of the anthropology of religion is understanding, analyzing and explaining the relation between man and the supernatural and the associated beliefs, practices and institutions (Bunnet, 1996). What interests anthropologist of religion is thus not the issue of the ultimate truth of a religion and its assertion, but the question of why a certain group of people adhere to religious beliefs; the relationship between religious beliefs and socio-cultural processes and the historical and ecological factors (Howard and Dunaif-Hattis, 1992).

The anthropologists of religion are interested in the scientific and systematic ethnographic and ethnological analysis of religious beliefs, practices, institutions and other associated aspects like magic, witchcraft,

religiosity, faith-based healings, spirit possession, cults, a state of altered consciousness, etc. In general, the anthropologists studying religion investigate, among others,

- The social origins of religion;
- The role of religion in the development of mankind and society;
- The function of religion in the every-day lives of individuals and communities;
- The relationship between religion and other aspects of society and culture such as economy, politics, medicine, magic, and other aspects of culture and social life;
- The contents of religious beliefs and practices, and
- Inter-religious (inter-faith) issues.

6.2. Definition of Religion

Anthropologists and sociologists have attempted to define religion in various ways. Generally, religion is defined as *that aspect of culture which relates man with the sacral and the supernatural*. Religion also concerns itself with man's relation with the profane or the secular, identifying the sacred from the profane, defining how and why a particular object becomes sacred or profane

and setting traditions or conventions as to how humans should behave in dealing with the sacred (Bunnet, 1996). More specifically, religion may be defined as a *system of beliefs, practices and philosophical values concerned with the definition of the sacred, the comprehension of life and salvation from the problem of human existence*. Religion is a system of beliefs involving supernatural forces or beings that provide shape and meaning to the universe (*ibid*; Okopu, 1978).

According to Howard and Dunaif-Hattis (*op cit* p. 545), religion “seeks to provide an all-encompassing view about how the universe works and why. It addresses the ultimate questions of our existence: where did we come from? Why are as we are? Why must we die?...” Religion, like language, lies at the very foundation of culture. In non- industrialized societies, it is a virtual binding force and the dominant rule of daily life.

6.3. Types and Functions of Religion

Anthropologists generally classify religion into two categories. These are the "world" or global religions and the religions of pre-literate or traditional societies

(Kottak, 1994). The classification is based on, among other things,

- Number of adherents;
- Presence or absence of “holy”, sacred texts;
- Organized structure and finer teaching of theology;
- Attempt in spreading faith to others, either in the form of proselytizing or other mechanisms; and
- The positive and negative impact the religions have had in the history, economy, politics, art, science, and technology, including medicine; in short, the religion's global impacts.

Thus, world religions are those concerned with the interpretation of sacred texts and the spreading of faith to others. These include: Christianity, Islam, Buddhism, Hinduism, Judaism, Confucianism, and Shintoism, among others. The religions of traditional societies are mainly concerned with the pragmatic (practical) benefits to be gained from the correct performance of rituals or observance of the correct taboos. They are less concerned with the finer points of theology or personal salvation (Okopu, *op cit*, Kottak, 1994).

Religion plays a great role in the every day lives of individuals and communities. It is related to other aspects of culture and social life. Some of the main functions of religion include the following:

- *Religion provides explanation about our world and the universe:* Religious beliefs help to explain some puzzling questions and events in human life and the natural world. A society's system of religious beliefs seeks to provide an all-encompassing explanation of how the cosmos came to be, how and why it works the way it works. Religion tries to squarely face the ultimate questions that matter to everybody: where did humans come from? What are humans doing here? What is the essential nature of humans and other non-humans? What is death and why must people die? Etc.
- *Religion serves as an expression of collective life:* Religious beliefs and practices unite people into a single moral community. Religion helps boost the spirit of brotherhood and sisterhood among adherents of the same religious faith.

Sharing various religious rituals such as collective worship, prayer, feasting, etc often create the sense of unit, belongingness and oneness among the practitioners. Religious beliefs and practices are thus very important organizing principles for community life.

- *Religion serves as a means of validating society and its norms:* Religious beliefs and practices can help to produce commitment to society's values and norms among its members. It helps maintain and perpetuate social systems and culture. It helps people abide by the norms and values of society by helping them to be committed to social/ moral values. However, it also supports social oppression by maintaining the *status quo*. In its validating role, it serves as instrument of exploitation and discrimination
- *Religion serves as a force for protest and socio-cultural change:* Religion can be a force for mobilizing people in the search for change or protest against the prevailing exploitative and oppressive socio-political and economic order.

Religion may play an important role in revolutionary movements.

The global or organized religions have had both powerful positive and negative impacts on society. As to their positive contributions, the organized religion, particularly the Judeo-Christian tradition, has been a major force, among other things,

- In the improvement of social ills;
- Sustenance and protection of the poor;
- The furtherance of the arts, such as music, painting, literature and architecture;
- The education of the deprived; and
- The popularization and promotion of scientific medicine.

On the other hand, the organized religion, among other things,

- Frustrated scientific work;
- Encouraged oppression of the dissidents and non-conformists;
- Supported colonialism, slavery and exploitation;

- Condemned women and children to inferior status in society;
- Bitterly divided people.

Box. 6.1. The four roles of religion

- *Religion provides explanation about our world and the universe*
- *Religion serves as an expression of collective life*
- *Religion serves as a means of validating society and its norms*
- *Religion serves as a force for protest and socio-cultural change*

6.4. Religion and Medicine

The significance of religion to medicine is obvious, particularly when we look at developing, traditional societies. A religious ideology underlying health practices not only codifies the way people should behave, but also gives an additional sense of security to those who adhere to the precepts of the religion. Peoples' understanding about life and death, health, illness, and all other misfortunes are associated with their complex religious system (Read, 1966).

The psychosocial functions of religion are having important curative effects. Religious commitment and adherence to the religious rules and teachings are associated with health status of individuals, families and communities. Some research findings indicate that those persons who have strong religious affiliation and commitment are found to be relatively in better mental and physical health than those with low or no religious commitment. The degree of suicide rates is also considered to be higher among individuals with less religious commitment.

Religious beliefs, practices and institutions have been important parts of the health care sector throughout the centuries. As part of traditional, alternative medicine, religion continues to play a very important role in health care provision. Faith-based curing and healing of some serious health problems such as mental illness and various other visible bodily and psychosomatic diseases are witnessed among many organized religious denominations. In fact, in areas and for people where access to modern, scientific medication is limited, religion and traditional medical beliefs, practices and centers are the best alternatives. Even in areas where

there are no problems of access to modern medicine, many people may prefer traditional treatments for various ailments (Howard and Dunaif-Hattis, 1992)

In short, in almost all societies, religious beliefs and practices are important parts of health and health care. In traditional societies, religion and traditional medicine are highly interconnected. In such societies, traditional religious medical beliefs and practices play significant roles in the explanation of causes of illnesses, in the care for patients, in the treatment of diseases-both physical and psychological-and other misfortunes (bad happenings). Religious rituals and prayers accompany all the preparation of traditional drugs and their administration on patients.

Religious specialists as healers and curers are in the forefront of dealing with the problem of health and disease in almost all societies, and particularly in traditional societies (Scupin and DeCorse, 1995).

Dietary habits and beliefs vary across cultures. People in all cultures besides showing the preference for certain kinds of food and certain ways of preparing them; show traditional prejudices against other foods (Read, 1966).

“In every society, people designate certain items as “food” from a range of edible plant and animal matter” (Howard and Dunaif-Hattis, *op cit* P: 577). Although the reasons for such conditions may be lost in some cases in the past, one of the key factors in such variation is the form of religious beliefs and practices across societies. A group of people adhering to a specific form of religion thus may avoid certain types of foods and prefer others. This is considered as having crucial implications for health. It may have both positive and negative impacts on the health and well being of individuals, groups and communities. Food taboos based on religious proscriptions may also affect health.

In Ethiopia, for example, among the Ethiopian Orthodox Church followers, there is religiously prescribed intensive periods of fasting; people were often are “physically debilitated by their strict observance of periods of fast and abstinence, which in many cases were followed by excessive feasting.”(Pankhurst, 1990: 6) Pregnant and lactating/ breastfeeding women who are observing religiously sanctioned food avoidance through fasting may seriously endanger both their and their children’s health, due to lack of adequate nutrition.

The health care seeking behavior of people is to a very greater extent determined by the proscriptive and prescribes roles of the religion to which they belong. Those individuals with a strong sense of religiosity may thus, for example, avoid using certain medical treatments or health care. Family planning and contraceptive usage are thus, for example, dependent on such factors among the followers of some religions. Religious values thus highly determine fertility trends all over the world (Greenhalgh, 1995). Some religious sects even proscribe its members not to use modern medical treatments, urging them to rely solely on religious mechanisms such as faith healing.

Religion may also play a very important role in shaping the nature and content of the ethics of medical professionals. Medical professionals adhering to different forms of religion may subscribe to varying ethical standards regarding the way patients should be handled, interaction between physician and nurses, etc (Galanti, 1997).

Box 6.2. Issues in religion and medicine

- Religious ideology underlies health belief and behavior
- The psychosocial functions of religion have curative effects
- Faith-based curing and healing of some serious health problems such as mental illness
- In traditional societies, religion and traditional medicine are highly interconnected
- Religious specialists as healers and curers
- Dietary beliefs and practices, highly influenced by religious ideology are considered having crucial implications for health
- Health care seeking behavior of people is to a very greater extent determined by the proscriptive and prescribes roles of the religion to which they belong
- Religion may also play a very important role in shaping the nature and content of the ethics of medical professionals

6.5. Chapter Summary

The anthropology of religion is one of the specialized fields of study within sociocultural anthropology. It

studies the interaction between humans and the sacred and the supernatural. Anthropologists studying religion investigate the social roots of religious beliefs and practices, how and why religion originated and the religious diversities in the world in terms of time and space. They also study psychosocial functions of religion in the lives of individuals, families, groups and communities as well as the role of organized religion in the socio-political and economic lives of countries.

Generally, religion may be defined as that part of people's culture which connects humans to their supernatural beings. More specifically, religion is defined as a system of beliefs, practices, institutions and philosophical values which deal with the definition of the sacred and the secular, the explanation of the origins and meanings of life, the place of humans in the cosmos, the ways of salvaging humans from the problems of life. The two categories of religion are the world or global religions and the traditional religions. The world religions are mainly concerned with the interpretation of sacred texts and propagation of faiths, whereas the traditional religions are mainly concerned

with the pragmatic benefits to be gained from the correct performance of rituals.

Religion has important psychosocial functions in the lives of individuals, families, groups and communities. Its functions can be generally categorized into four: the explanatory function, validating social norms and status quo, unifying people, and catalyzing social and cultural change.

Religious beliefs and practices make up important components of traditional medicine. Faith based curative and diagnostic practices have been vital parts in the healthcare sector of societies from the very beginning. People still in many parts of the world, have religion as their major source of support for health care needs. Integrating religion, traditional medicine and the modern, scientific medicine is, thus, very important to address the huge health problems of people especially in developing countries.

Review Questions

1. What is religion?
2. What does the anthropology of religion study?
3. Why do anthropologists study religion?
4. How does being strong in religious commitment may help one to be mentally and physically health?
5. Describe the four general social functions of religion.
6. What kind of relationship exists among religion, traditional and scientific medicine?
7. Discuss the contribution of faith-based diagnostic and curative functions as practiced in various religious denominations in Ethiopia.
8. How does religion affect the health care seeking behavior of individuals?

CHAPTER SEVEN

ANTHROPOLOGY AND HEALTH

Learning Objectives

After completing this chapter, students will be able to:

- Define medical anthropology;
- Distinguish between the anthropology *of* health and the anthropology *in* health;
- Appreciate the roles, applications and contributions of medical anthropology;
- Explain the social and cultural bases of health and disease;
- Understand the characterizes of traditional medicine;
- Describe the features of biomedical medicine;
- Explain the relationship between traditional and biomedical medicine; and
- Describe the merits and demerits of traditional and modern medical systems;

7.1. Medical Anthropology: Definition, History and Concerns

Medical anthropology is a specialized branch of anthropology whose main concern is with the relationship between cultural factors, perceptions, and beliefs on the one hand and health and health disorders on the other. Medical anthropology is considered a branch of applied anthropology, which studies diseases, health care system and theories of disease and curing in pluralistic, socio-cultural perspectives (Scupin and De Corse, 1995).

Medical anthropology, in general, grew very rapidly as specialized field of study in anthropology, particularly since the 1950's and 1960's. The growth of this field is mainly due to: (1) the increasing interest of social scientists in general and anthropologists in particular in health and illness, and (2) the increasing awareness of medical professionals and health policy makers about social sciences' role in health issue (Foster and Anderson, 1978).

It may be stated that when anthropology arose in 19th century, investigating health and disease issues seemed to be not from among the overriding concerns of cultural anthropologists. However, social scientists in general and anthropologists in particular, began to develop both an academic and practical interests in studying health and diseases in sociocultural contexts. At the root of the emergence and development of medical anthropology also lie the need for studying the world of health and disease from evolutionary and ecological perspectives (Scupin and DeCorse, *op cit*).

Medical anthropologists attempt to address such fundamental questions as:

- What is the evolutionary basis of the difference in how various populations contend with disease?
- What are the essential factors influencing the growth and development of children?
- What effect does modernization have on local populations? (Howard and Dunaif-Hattis 1992).

Medical anthropologists also are interested in:

- Investigation of the interrelationship between human health, nutrition and cultural beliefs and practices; and how people's eating behavior and sexual habits affect the spread of pathogenic organisms;
- Cross-cultural aspects of nursing cares;
- The social and cultural contexts of an illness; and health-related behavior of people, the social and cultural correlates of that behavior; and
- The social, behavioral, demographic and biological characteristics of persons who develop a disease.

7.2. Some Major Theories of Health, Culture and Society

A brief overview of the major theoretical perspectives in the anthropology of health and disease may be appropriate at this juncture. Medicine as an institution and the issue of health and disease have been explained taking various perspectives. The following are crucial theories:

7.2.1. The Functionalist Perspective: This perspective views medicine and the systems of health care as important social institutions; and it focuses on the functions and roles played by the institution in maintaining order and stability in society. The medical institutions whether scientific or traditional and the various practitioners exist to meet the needs of individuals and society (Henslin and Nelson, 1995).

7.2.2. The Medical Ecological Perspective: This perspective focuses on the human biological and behavioral adaptations to diseases in different ecological and environmental contexts. Hence, diseases evolve in line with specific ecological niches, and people's responses to health problems have also evolved in the context of their specific local ecosystems (McElroy and Townsend, 1989).

7.2.3. The Cultural Interpretationist Perspective: This is also called "the symbolic interactionist" approach. This approach focuses on the social and cultural constructions of health, illness and disease. According to this theory, illnesses and health are not just things that exist "out there"; they are productions of the

complex social interactions; and health and illness are highly shaped by the manner in which people as actors give meanings to them and how the actors respond to them in socio-culturally sanctioned ways.

7.2.4. The Critical Perspective: This theory is also called the “radical political economy”. It is an approach which stresses on the socio-economic inequality in power and wealth which in turn significantly affects the health status and access to health care facilities. Individuals, groups, communities and even nations thus tend to have unbalanced share of health resources; and these often leads to the unequal distribution of morbidity and mortality patterns among a given society; those in power and dominance enjoy better health and the marginalized groups suffer from the burden of diseases (Turner, 1987).

7.3. Roles of Anthropologists and Contributions of Anthropology to Health

Applied medical anthropology is strongly interdisciplinary in its nature and approach. Medical anthropologists often work with academics in the field of sociology, medicine, psychology, and demography.

Applied medical anthropology brings with it the anthropology's comparative framework which helps medically trained people avoid a limited one culture perspective, to see how social and environmental factors affect health, and to be aware of alternative ways of understanding and treating disease (Kottak, 2002; Scupin and DeCorse, 1995; Howard and Dunaif-Hattis, 1992; Podolesky and Brown, 1993).

In general, medical anthropologists play the following two important roles:

- 1) They work in collaboration with health and other professionals and researchers, as consultants, advisers and researchers; and
- 2) They work in the field of health and illness being involved in independent research of their own, for the advancement of anthropological knowledge (Kottak, 1994; Scupin and DeCorse 1995; Hahn 1999).

Some of the specific applications or contributions of medical anthropology in the field of health and illness include:

- They help hospitals and health agencies to deliver health care more effectively to the people.
- They help the national and international health organizations by providing anthropological data on the cultures of peoples of the world.
- They work with epidemiologists in identifying the effects of cultural practices and beliefs on the transmission of disease.
- They help health professionals in the area of disease prevention and control.
- They are involved in the areas of international health, mental health promotion in various cultures.
- They help in the fields of general health education efforts relating to family planning maternal and child health, improving community sanitation and nutritional counseling.
- They help in enhancing community participation in disease prevention.
- They help people understand psychological and social factors affecting prevention, participation in case identification and treatment.
- They help health workers in overcoming the constraints in mass drug administration or

vaccination as well as in overcoming and dealing with cultural constraints on programs of health education.

- Anthropologists work with epidemiologists and psychiatrists in the problem areas of cardio-vascular diseases and psychiatric disorders.

7.4. Disease, Society and Economic Activity

Understanding that social and cultural behaviors are important factors in the causation, prevalence and distribution of many diseases is crucial. Anthropologists argue that how people live, the way they behave, what and how they eat, what they believe and practice, what they value and what technology they own, etc, are significant determinants of their individual and collective health (Read, 1966). Different societies have various conceptions of health, disease and illness. The standards people sets for health vary from culture to culture. Behaviors and lifestyles which are considered healthy vary from society to society, and from time to time. People's understanding of health and the perceptions of the nature of diseases also vary from culture to culture. Anthropologists argue that, on the

basis of cross-cultural research (i.e., research done comparatively in various cultures) perceptions of good and ill- health, along with health threats and problems are culturally constructed. The production and distribution of health and disease are thus highly affected by socio-cultural and politico-economic factors (Steven and Janzen, 1992; Lorber, 1999). Different ethnic groups and cultures recognize different illnesses, symptoms, and causes and have developed different health care systems and treatment strategies.

Anthropologists also argue that diseases vary among cultures and types of economic activity. Systems of economic activity prevailing in a given society highly affect the morbidity and mortality characteristics (Turen 1987). For example, certain infectious diseases such as malaria, typhoid and cholera etc, are more common in sedentary societies (peasants and urban communities). Diseases such as schistosomiasis are related to certain economic activities; they are highly prevalent in societies which practice irrigation systems. Other infectious diseases, particularly sexually transmitted ones, including the HIV/AIDS pandemic, are more common in urban than rural cultures, and along highways. Towns

being the main centers of such diseases in most societies of the world, rural people also get infected via various means of contact with towns (Hahn 1999).

There are also what anthropologists call **diseases of development** which are those health problems which arise in a given community following the introduction of development projects, or when indigenous people are incorporated into the global politico-economic systems, certain types of diseases may be introduced to the people. Such diseases may include bacterial or parasitic disease which occur in an area due to changes in the environment following development –related activities (Howard and Dunaif-Hattis, 1992) Another categories of diseases of development may include “diseases that result from poverty, undernourishment and poor sanitation, reflecting a failure of development programs to integrate people into large-scale societies in a satisfactory manner” (*Ibid* P.577).

7.5. Theories of Disease Causation

The bio-medical theory of illness causation is just one from among the various theories of illness people hold. The manners in which people attempt to cure a

perceived illness are based on their beliefs about what caused the illness (*Ibid*). Peoples of different cultures have developed for themselves various ways of explanations of how illnesses and misfortunes (bad lucks or disasters) are caused. Such theories for centuries appeared to have worked for them quite efficiently. In fact, peoples of the world have depended on such kinds of explanations (and not few societies still continue to do so) until the modern, scientific theory of medicine emerged few centuries ago.

Anthropologists have classified the various illness causation theories found among the different cultures of the world into: 1) **Personalistic disease theories**, 2) **Naturalistic disease theories**, and 3) **Emotionalistic disease theories** (Kottak, 2002).

Personalistic disease causation theory attributes illness to causative agents which are considered to be intelligent beings. This theory is particularly common among most non-western societies. Even if a person may know that mosquito bite causes malaria, he or she often thinks and believes the cause of the illness is due to the power and evil work of such agents as evil spirits,

sorcerers, witches, ancestor ghosts, curses made by elders, wrath of supernatural beings, etc.

Naturalistic disease causation theory is also commonly referred to as the western or scientific medicine. This attributes diseases to such impersonal, scientifically proved agents like viruses, bacteria, fungi, parasites, etc., and toxic substances. This theory explains the causes of diseases on naturalistic terms; i.e., diseases are natural occurrences, not supernatural things. Non-western cultures also use naturalistic disease theories. Some people for example believe that eating or drinking hot or cold substances may create a health problem. For example, a menstruating woman in some cultures is not supposed to eat a pineapple; because they believe that the pineapple is a “cold” thing and menstruating is a “hot” thing, the two will clash and cause disease.

Emotionalistic disease causation theory states that illnesses occur due to some intense negative emotional experiences. A number of ethnographic studies have found out that there are for example mental illnesses that are unique to certain cultural settings (Pilgrims, 2000; Scupin and DeCorse, 1995). Such emotionalistic

diseases that result from particular environments and cultural traditions may be termed as **culture-bound syndromes** (Howard and Dunaif-Hattis, 1992). In some cultures, emotional experiences such as anxiety and fright may cause an illness called *susto*, or what is also called 'soul loss' in anthropological literature. A person who is believed to be caught with this psychological illness may develop symptoms such as lethargy (tiredness or weariness), inactivity, vagueness, distraction (or thought disturbance), etc.

In Ethiopia, which is predominantly a traditional society, traditional, non-scientific explanations of diseases are very important in diagnosis, treatment and management of diseases. Belief in the power of various intelligent agents such as *ginnies*, *mitch*, *seitan*, *ganel*, *budda*, etc to cause different psychological and physical ailments is very common in most cultures in the country (Zerihun, 2001). People in some culture do not go to a modern health care center to seek help for certain types of diseases (Read 1996).

Treatment for diseases is also closely associated with the kind of disease causation view people hold. For

psychosomatic diseases such as *susto* and other culture specific diseases people would prefer to go for treatment to a traditional medical specialist, rather than to a modern health facility (Kottak 2002; Scupin and DeCorse, 1995). The views of disease causation people hold thus are very important in determining the people's health care seeking behavior and type of diagnosis and treatment; that is why it is crucial for health care professionals to be culturally sensitive and to have some basic understanding of sociocultural anthropological knowledge when dealing with the care of patients from different cultural and religious backgrounds (Hellmann, 1984; Galanti, 1997).

Box 7.1. Theories of disease causation

- **Personalistic disease causation theory:** Diseases are caused by intelligent agents
- **Naturalistic disease causation theory:** Diseases are caused by scientifically verifiable, naturally occurring agents such as virus, bacteria, fungi, etc
- **Emotionalistic disease causation theory:** Certain psychosomatic disease phenomena are caused by intense emotional experiences.

7.6. Health Care Systems

Systems of health vary across time and space. People since time immemorial have developed different health-care systems. Modern system of health care and its provision as it is practiced in contemporary modern world is a recent phenomenon. People have treated patients and developed means of caring for the sick and the disabled in various traditional ways, and such means of health care provision still prevail in almost all non-western societies (Airhihenbuwa, 1995)

In short, all societies have some form of health care system. Health care system can be defined as beliefs, customs, specialists, and techniques aimed at promoting health and preventing, diagnosing and curing illness. Traditional societies have their own medical practices and specialists who often depend on what specific illness causation theory suggests. Traditional healers or curers play important roles in treating patients complaining of various health problems. They often use magical rituals and prayers in producing medicines and administer them on patients. They are highly respected in the society. Patients believe in their knowledge and

skills (often much more than they believe in the expertise of modern medical doctors) and consult them.

7.6.1. Traditional Medicine

Traditional medicine may be referred to as the system of medicine with a set of disease causation views, diagnostic and treatment mechanisms and roles of specialists, wherein the dominant model of disease and health significantly differs from the scientific medicine. It may be commonly viewed as the medical beliefs and practices which have been in use for time immemorial by human societies before the advent of modern medicine, and still being used by most non-western societies. Traditional medicine embodies medical care system which is based on ideas about the etiology of diseases and treatment of diseases which have evolved over longer period of time from the people's own experience in terms of their ecology, their pattern of beliefs about human, environmental and supernatural relationships (Read 1966). A broader term such as alternative medicine may also be used to describe this kind of medicine. In this sense, all medical views and practices outside of the conventional scientific medicine,

such as acupuncture, faith healing, healing through prayer, etc falls in this category.

Traditional medical practitioners acquire and employ a wide variety of medical knowledge involving astrology, faith-healing, massage, folk psychotherapy and psychiatry, exorcism, herbal medicine, and various magical charms and amulets to treat patients (Hellmann, 1984; Scupin and DeCorse, 1995).

Traditional systems of care in sickness represent empirical attempts on the part of indigenous people to fight against disease and associated misfortunes and preserve health and wellbeing in a given environment. Such systems express deep-rooted attitudes to health and illness, concepts of folk medicines the activities of indigenous healers, the role of kin groups in sustaining health, and so on (Read, 1966).

7.6.2. Biomedical Medicine

This medicine is interchangeably referred to as the “scientific”, “western”, “modern” medicine. It is based on the model of disease and health as understandable, explainable and subject to naturalistic assumptions.

Biomedicine aims to link illness to scientifically demonstrated agents that bear no personal malice toward their victims, as is viewed by people who hold personalistic disease causation theory.

7.6.3. A Comparison and Contrast of Scientific and Traditional Medicine

It may be appropriate to state that medicine has always been recognized as a biosocial science. When we look at the history of medicine, prominent thinkers from Hippocrates and Pricelists to Sigmund Freud have tended to view human health as heavily influenced by the social, cultural, ecological and other non-biological factors (Hellman, 1984). Health and disease have been understood as intimately tied to the way humans live and their socio-cultural environment. However, the contributions of the social and cultural factors in the etiology of diseases and their roles in the healing processes have largely been undermined until recently. They were not accorded a systematic analysis (Ahrinbuwwa, 1999).

However, starting from the 1950s, social sciences and medicine began showing increasing interest in

collaboration. The place of traditional medicine in the health care sector, which has so far been neglected, is now being appreciated. There seems to be now an increasing acceptance of the contributions of traditional medicine by the modern medicine and health planners.

Now, comparison and contrast of the two systems of medicine might yield some important facts. Scientific medicine is considered to have nothing in common with traditional medicine. The modern health care professionals have dismissed traditional or alternative medical systems as useless until recently. But now this attitude is being changed. Anthropologists argue that the two systems can complement each other. In many African societies, the modern health care professionals are recognizing traditional medical practitioners and collaborative efforts are being made in research and practice into such areas as HIV/AIDS, and in identifying the various plants of medicinal value.

Traditional medical practitioners may be more effective in treating illnesses having psychological grounds, such as mental problems (Pilgrims, 2000). People most often consult them and they get cure that might not be

possible by modern psychiatrists. Patients often get more psychological/emotional comfort and social support when treated by traditional healers.

But in modern medicine, the context of treatment is often one of isolation and alienation (separation), being separated from the group. Western medicine may learn much from the traditional medicine in which "curer-patient-community relationship" is important. In such cases, the patient is not alienated and he/she has the needed emotional and social support. Unlike western medicine, traditional medicine sees the patient as not merely a biological person, and pays attention to the social and spiritual aspects as well. Traditional medical practitioners treat patients effectively as whole beings, using any combination of methods that prove beneficial. This is usually not the case in modern medicine.

Western medicine no doubt is better than traditional medicine in many respects, as many of its achievements are based on scientific facts. As such, traditional medicine has much to learn from it. True, traditional medicine may not be as effective against bacteria as antibiotics are. And advances in scientific medicine have

made it possible to fight against many of the perennial (persistent, recurrent) health problems. Innumerable drugs have been made and are effective in treating various diseases.

However, anthropologists still draw our attention to some of the problems in western medicine. They argue that growth in the medical sciences and techniques of diagnosis and treatment have occurred at an alarming rate. But many of the procedures and practices of the modern medicine lack convincing justification and logic. They mention cases of partiality and impersonality in patient-physician relationship and physician-nurse interactions.

Despite the dominance of, and in some obvious cases the superiority in quality and utility of, modern scientific medicine, the two systems of medicine have better to be considered as complementing each other, rather than competing and undermining one the other (Hellmann, 1984). The reality on the ground is that even in industrialized societies people very often consult both modern and traditional systems of medicine. Medical pluralism continues to be an ever-present phenomenon.

Medical anthropological researches indicate that even in urban places where western scientific medical facilities exist, people often consult traditional medical practitioners. Both supernatural and scientific cosmological views regarding health and disease still play important roles in influencing people's health seeking behavior. Many countries now devise policies whereby their national system of health care incorporate both the scientific and traditional medical care systems (Scupin and DeCorse, 1995; Read, 1966; Ahrinbuwa, 1999; Hahn, 1999). The Federal Ministry of Health in Ethiopia also currently has a department in its office which deals with traditional medical system, encouraging the incorporation of the good elements of traditional medicine.

Before closing this section, it is appropriate to briefly describe the social and cultural implications of medical pluralism especially in the context of developing countries such as Ethiopia. One such developing trend is that the health care system in developing countries is highly dominated by and biased towards the biomedical model, despite plural in nature. This is usually manifested in the fact that the biomedically dominated

medical care system is accorded higher prestige and the traditional medical system is often not recognized as a viable alternative, despite some steps are being taken in this regard (*Personal communication, Dr Teketel Abebe, Addis Ababa University, Department of Sociology and Social Anthropology, May 2005*).

Other associate issues in this medical pluralism also include the following (*Ibid*):

- Despite it is accorded higher prestige, the western medical system on the other hand, being criticized for its biases towards curative rather than preventive and promotive medicine. Its heavy dependence on the western countries for its institutional, professional and technical supports is also another point of criticism.
- Most importantly the hierarchical medical pluralism in the Third World represents the underlying social stratification. The few privilege elites often benefit the most from the dominant scientific medicine, whereas the majority of the populace make use of the folk medical services.

- Another prevailing fact worth mentioning is that often dual use of medical cares exist; the elite primarily depend on the biomedical system and may turn to the folk medicinal help as a last resort; on the other hand, the masses by and large depend on the folk medical system and may also make use of the biomedical sector at its lower end.



Table 7.1. Strengths and weaknesses of traditional and scientific medicine

Ser. No.	Name of Medical System	Strengths	Weaknesses
1.	Traditional medicine	<ul style="list-style-type: none"> • Effective in treating diseases of psychosocial origin • Easy access • Patients and curers share similar values • Cheap • Treatment of holistic persons • Treatment done under the context of personal, 	<ul style="list-style-type: none"> • Lack of scientific standards • Hygiene problem • Lack of proper dosage • Inability to effectively deal with bacterial and viral diseases • Problem of risks of contracting other infections and adverse outcomes including

		<p>informal relationships</p> <ul style="list-style-type: none"> • Serves large proportion of people in most developing societies • Is a source in many instances for the modern medicine 	<p>death high</p>
2.	Scientific medicine	<ul style="list-style-type: none"> • Able to overcome many perennial health problems • Effective against bacterial, viral and others diseases • Scientific 	<ul style="list-style-type: none"> • Fails to deal with holistic person • Patient and practitioner do not have similar worldviews about health and disease

		<p>verifiability</p> <ul style="list-style-type: none">• Less risk of unnecessary outcomes including death related to dosage, hygiene, etc• High achievements in promoting health, wellbeing, longevity, etc	<ul style="list-style-type: none">• Unequal authority relations• Highly impersonal and possibility of alienation and dehumanization• Not easily accessible• Relatively costlier.
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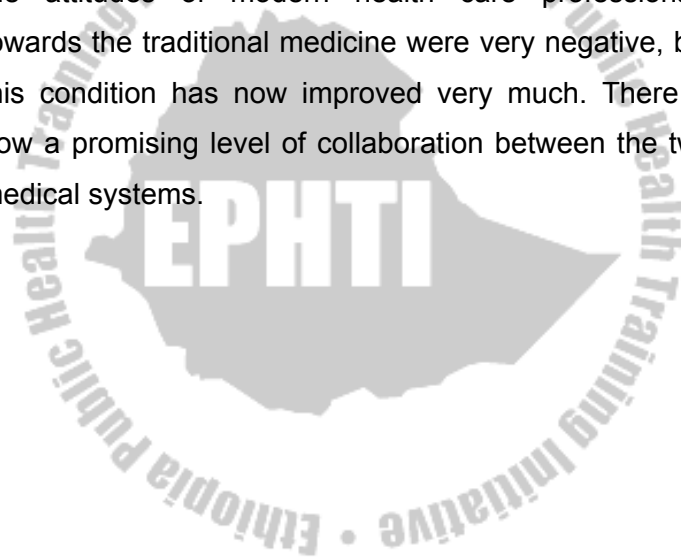
7.7. Chapter Summary

Anthropology and medicine have developed a strong collaboration and interdependence over the years. Medical anthropology studies, among other things, the interaction between human social behavior, culture, social and economic organization, ecology, climate, etc, on the one hand and health and the occurrence, distributions and prevalence of diseases on the other.

Medical anthropology may be regarded as the application of anthropological knowledge, techniques and approaches to the addressing of health problems. On the other hand, it may also be regarded as the anthropological study of the world of medicine, disease and health. Anthropology has many roles and applications in the areas of health and disease.

The standards of healthy behaviors and lifestyles and the perceptions of the causes, transmission and treatment of diseases vary from society to society. The types and distribution of diseases also vary according to the type of social and economic organizations of societies. Human societies since the very beginning have held different ways of explaining the causes of

diseases and other misfortunes. The mechanisms of addressing health problems also have depended on the type of disease causation theories people hold. There are generally two types of health care systems: traditional, non-scientific and modern, scientific medical/health care systems. Each medical/health care system has its own advantages and disadvantages. In the past, the attitudes of modern health care professionals towards the traditional medicine were very negative, but this condition has now improved very much. There is now a promising level of collaboration between the two medical systems.



Review Questions

1. Define the term medical anthropology.
2. In what manner do you think you would respond or react to the traditional explanations of the causes of diseases given that you are being trained in a highly biomedical model of medicine/ health and disease?
3. Mention the application of medical anthropology in health and medicine.
4. What types of theories of disease causation are held in your area? Mention and explain them.
5. Are there categories or types of diseases in your area that are not taken as a problem to a modern medical system? List at least 10 such diseases and explain why the people prefer to see a traditional health.
6. Discuss the advantages and disadvantages of traditional medicine.
7. Discuss the advantages and disadvantages of modern medicine.
8. Identify the different types of traditional medical practitioners in your area and discuss the trend in the influence and role of these doctors in the health care sector in your area. What particular roles do women play in this regard? Comparing the past with

the present, what change do you observe in the role and influence of these practitioners?

9. Why do you think has the biomedical model of health and disease has come to enjoy a privileged position in Ethiopia?



GLOSSARY

Anthropology: The holistic, comparative and relativistic study of humanity in its entirety.

Anthropology of religion: a specialized field of study which is concerned with the relation between the sacred and society.

Anthropometry: The study of human variations within and among different populations in time and space, human ecology, population genetics, etc

Applied anthropology: Is the fifth major field of anthropology which is concerned with the application of anthropological knowledge, methods and approaches to the solving of human problems.

Archeological anthropology: A branch of anthropology which studies the ways of lives of people who lived in the remote and recent past.

Artifacts: the material remains of human societies used in studying human cultural past

Bride price: is marriage payment made to the bride and/or her group, in terms of money and material gifts by the bridegroom.

Bride service: A form of terms of marriage in which the labor service is provided for the parents of the bride (or the would-be wife) by the bridegroom.

Child marriage: A form of marriage which takes place in manner where by concerned parties agree to arrange the marriage of a young girl (as young as below ten years of age in some parts of Ethiopia) to usually an older person.

Classical archeology: Is an aspect of historic archeology; it deals primarily with the ancient civilizations and empires of Europe and the Middle East, including Egypt, Greece, Roman and Persia.

Cognitive anthropology: (See "*ethnoscience*")

Cultural diffusion: The spread of a certain **material culture** or **non-material culture trait** created in a certain society diffuses to other societies through contact, war, trade, etc.

Cultural ecology: The theory, also termed as **neo-evolutionism**, which sees culture as a specific instance of patterned adaptation to a specie environment; the dynamic interaction between man and his environment is such that culture modifies the environment and the latter also puts its limits to human culture.

Cultural imperialism: the unequal cultural exchange in the global system whereby western material and non-material culture have come to occupy a dominating and imposing roles over the indigenous cultures of the Third World peoples.

Cultural materialism: The theory which states that the key factors in and determinants of socio-cultural evolution are the infrastructures which include technology, environment and material conditions.

Cultural relativism: The view that each society's culture should be understood in its won context; one's cultural lens should not be applied in judging other cultural values.

Cultural universals: those culture traits, norms, values, rules etc which are shared by more or less all people in a given group or which are found universally among all societies.

Culture: A complex whole which includes knowledge, belief, art, law, morals, customs, and any other capabilities and habits acquired by man as a member of society

Culture and personality school: The theory which maintains that the various patterned aspects of culture shape the personality of individuals within a given

society, and also personality once developed can in turn affects the further development of culture.

Culture-bound syndromes: Certain emotinalistic diseases that result from particular environments and cultural traditions.

Culture complex: A group of interrelated culture traits.

Culture pattern: is the organization of culture complexes constituting the entire cultural configuration of a society.

Culture region: is the geographical territory in which a particular culture prevails.

Culture shock: is the psychological and social maladjustment at micro or macro level that is experienced for the first time when people encounter new cultural elements such as new things, new ideas, new concepts, seemingly strange beliefs and practices

Culture trait: also called *culture elements* are the smallest (simplest) units of a certain culture. They are the building blocks of culture.

Darwinian theory of evolution: The theory that states that all livings develop through long, gradual processes in the natural world without any supernatural intervention

Deductive approach: An approach in which the researcher attempts to derive specific assertions and claims from a general theoretical principle; an approach which goes from general theory to particular claims

Diffusionism: The theory which states that societal change occurs when societies borrow cultural traits from one another, that cultural innovations occur in certain areas and spread to other parts of the world.

Diseases of development: those diseases which arise in a given community following the introduction of development projects.

Dowry: refers to marriage gifts made to the bridegroom usually by the bride and her family.

Ecofacts: the footprints on the ecology by the past societies

Emic perspective: Anthropological approach which focuses on the native's or the community's points of view, trying to understand the world from the perspectives of the natives.

Emotionalistic disease causation theory: The theory which states that illnesses occur due to some intense negative emotional experiences.

Enculturation: is the process by which an individual learns the rules and values of one's culture.

Endogamy: is a marriage rule which requires that people marry within their own social group (e.g. their own tribe, nationality, religion, race, community, social class, etc)

Enlightenment: is the eighteenth century social philosophical movement that emphasized human progress and the power of reason, and based on Darwinian theory of evolution.

Ethnoarcheology: An approach to ethnographic analogy in which archeologists make their own observation of the contemporary cultures rather than relying on information provided by cultural anthropologists.

Ethnocentrism: the attitude that one's own culture and one's own way of life is the center of the world and the best of all. This arises from ignorance about other ethnic groups and their ways of lives.

Ethnicity: is the process of identification with, and feeling part of an ethnic group, and exclusion from certain other groups because of this affiliation

Ethnography: The description, analysis, and documentation of the culture of a certain community or ethnic group.

Ethnology: A branch of social, cultural anthropology which aims at the comparative understanding and analysis of different ethnic groups across time and space

Ethnoscience: a variety of studies in cognitive structure particularly developed in United States (sometimes also referred to as **cognitive anthropology**) focusing on discovering and describing the structural principles of specific culture by detailed ethnographic data analysis.

Etic perspective: is observer-oriented approach which tries to bring an objective and comprehensive viewpoint to the study of the community's life. It is the researcher's or the scientist's view of the people and their world.

Exogamy: A marriage rule which requires that people marry outside a group to which they belong.

Extended family: A form of family in much small- scale, traditional societies which often constitutes a husband, his wife/wives, his wife's/ wives' children and/or the wives and children of his sons.

Evolution: The gradual development of life forms from simple to the complex through very long period of time.

Family: is a minimal social unit that cooperated economically and assumes responsibilities for rearing children.

Focus group discussion: a form of qualitative data collection method in which intends to make use of the explicit interaction dynamic among group members which may yield important information on certain topic.

Forensic anthropology: a specialty in physical anthropology, which is concerned with the identification of human skeletal, remains for medical and legal purposes

Fossil: remains of animals or plants dug out by archeologists studying ways of lives in the past.

Fraternal polyandry: A form of polyandrous marriage which involve two or more brothers taking a single woman as their wife.

Functionalism: The theory which regards culture as an integrated whole and tries to explain how the relationships among the parts of society are created and how these parts are functional and dysfunctional

Gender: refers to all the traits or characteristics that a culture assigns to males and females. It is the social and cultural construction of male and female personalities

Gender stereotypes: are over-simplified but strongly held ideas about the characteristics of males and females.

Gender stratification: is an unequal distribution of rewards (socially valued resources, power, prestige and personal freedom) between men and women, reflecting their different positions in a social hierarchy.

Genealogical Method: An ethnographic technique which was developed by anthropologists to deal with and gather information on principles of kinship, descent, and marriage, which are the social building block of small-scale societies.

Genocide: is the deliberate elimination of a group of people through mass murder.

Historical archeology: a branch of anthropological archeology which uses the evidence provided by excavated remains to enhance our understanding of historic peoples; that is, peoples who had writing and about whom written records are available.

Historical linguistics: a branch of linguistic anthropology which focuses on the comparison and classifications of different languages to discern the historical links between them.

Historical Particularism: The theory, which maintains that each society has its own particular historical development and this has to be empirically described, understood and documented in ethnographic details.

Hypothesis: A tentative statement waiting to be tested or proved by empirical data

In-depth interview: A method of qualitative data collection in which the researcher asks informants on certain issues taking long time and going deeply into the issue.

Inductive method: is a method by which the scientist first makes observation and collects data, on the basis of which he or she formulates **hypothesis** and **theories**

Institutional discrimination: refers to programs, policies, and arrangements that deny equal rights and opportunities to particular groups of people.

Interview schedules: pre-planned question items, which the researcher writes down on his/her notebook and uses them as guidelines for the interview process

Key informant interview: An anthropological method in which very knowledgeable individuals in the community are identified and the researcher learns lots of issues about the community life.

Kinship: is the network in which people are related to one another through blood, marriage and other ties.

Levirate marriage: A form of marriage in which a man is entitled to inherit the wife of his deceased brother or close relative.

Linguistic anthropology: A branch of anthropology which is concerned with the study of the relation between language, culture and society.

Linguistics: is the scientific study of language

Marriage: is a sexual union between a man and a woman such that children born to the woman are considered the legitimate offspring of both parents.

Marxist anthropology: A theory which is concerned with the transformation of social orders and the relationships between conflict and cultural evolution

Material culture: The tangible things created by people, such as tools, technological products, etc

Medical anthropology: is a specialized branch of anthropology whose main concern is with the relationship between cultural factors, perceptions, and beliefs on the one hand and health and health disorders on the other.

Monogamy: is marriage which involves a one to one marriage, usually a man and a woman.

National culture: refers to experience, ideologies and beliefs learned and values shared by citizens of the same nation.

Naturalistic disease causation theory: The theory also commonly referred to as the western or scientific

medicine, which attributes diseases to natural causes, such as virus, bacteria, fungi, etc.

Neo-evolutionism (See *cultural ecology*)

Neo-Freudian psychology: The view which emphasizes the primacy of infantile and early childhood experience in shaping the personality.

Neo-functionalism: The theory which developed in response to the weakness in functionalist anthropology in dealing with the issues of conflict, competition and disequilibrium, focusing on conflict as an inherent part of social organization.

Non-material culture: The non-tangible, ideational phenomena such as values, language, beliefs, norms, ways of acting and doing things, etc

Nuclear family: A dominant form of family in today's modern society consists of a husband, wife and their dependent child or children.

Paleoanthropology: is a subspecialty in physical anthropology which is interested in the search for **fossil** remains from prehistoric times to trace the development of outstanding human physical, social and cultural characteristics

Participant observation: the active involvement in community life while studying it. The researcher

participates in a research setting while observing what is happening in that setting

Patriarchy: the institutionalized systems of male dominance in a given society, whereby the “father” figures, that is, the males are entitled to privileged positions, powers and status in society

Personalistic disease causation theory: The theory which attributes illness to causative agents which are considered to be intelligent beings

Physical anthropology: A branch of anthropology also called *biological anthropology* which studied the physical dimensions of humanity.

Polyandry: A form of polygamous marriage which involves multiple husbands (i.e. one woman married to more than one man at a time).

Polygamy: (also called plural marriage) is a form of marriage in which a person marries more than one person at a time

Polygyny: A polygamous marriage which involves multiple wives (a man marrying more than one woman at a time).

Population genetics: a branch of anthropometry or biological anthropology which studies biological inheritance

Prehistoric archeology: A branch of archeological anthropology which investigates human prehistory; that is the periods of time in a region before the art of writing developed

Primates: the animals that most closely resemble human beings in terms of physiological and anatomical structure, such as gorillas, chimpanzees, gibbons, and orangutans.

Primatology: The study of the biology and behavior of primates

Psychological functionalism: A strand of functionalist theory which stresses individual needs to be met by society.

Qualitative data: those which are expressed in terms of descriptive statements, about the depth, details and sensitive dimensions of information which are difficult to express in terms of numbers.

Quantitative data: those which are mainly expressed in terms of numbers, percentages, rates to measure size, magnitude, etc.

Questionnaires: highly structured questions, used in collecting usually quantitative information.

Race: A scientifically discredited concept which refers to a group of people who are different because of assumed biological base (absolute "blood" or genetic material).

Racism: is the social and political abuse of the biological concept of race for the explicit or implicit purpose of favoring one group of people over the other.

Random sample: A technique wherein all members of a population have equal chances of being included in the study population.

Religion: is a system of beliefs involving supernatural forces or beings that provide shape and meaning to the universe.

Respondents: people who provide information in survey research.

Scientific method: is a logical system used to evaluate data derived from systematic observation.

Small-scale society: a group of people with more or less simple, homogenous ways of life.

Social structure: are relatively stable patterns of social behavior

Society: This term generally refers to the social world with all its structures, institutions, organizations, etc around us, and specifically to *a group of people* who live

within some type of bounded territory and who share a common way of life.

Sociocultural anthropology: A branch of anthropology concerned with the social and cultural dimensions of the living peoples and with the description and analysis of people's lives and traditions

Sociolinguistics: The branch of linguistic anthropology which is interested in how the language is used in various social contexts.

Sororate marriage: a form of marriage, which entitles a man to take as wife a sister or close relative of his deceased wife.

Structural functionalism: The theory which stresses the preeminence of society and its structure over the individuals, and how the various elements of the social structure function to maintain social order and equilibrium.

Structural linguistics: A branch of linguistic anthropology which studies the structure of linguistic patterns

Structuralism: is one of a new group of theories in anthropology known as studies of cognitive structure, which argues that the origin of universal principles that

order the ways in which we behave and think about the world is to be found in the structure of human thought.

Subculture: denotes the variability of culture within a certain society; it is a distinctive culture that is shared by a group within a society

Survey method: a quantitative method of research which involves sampling, impersonal data collections, and sophisticated statistical analysis.

Symbolic anthropology: A theory which focuses on the symbolic rather than material aspect of culture. It is the study of culture through the interpretation of the meaning of symbols, values and beliefs in society.

Theory: is a statement or statements of how and why specific facts are related

Unilineal evolutionism: is the view that societies evolve in a single direction toward complexity, progress and civilization.

REFERENCES

- Airhihenbuwa, C.O. 1995.** *Health and Culture: Beyond the Western Paradigm*. London: Sage Publications.
- Angelloni, Elvio. 1998.** *Anthropology. Annual Editions*. Slvice Dock: Dushkin/ McGraw-Hill.
- Aoyugi, Kiyotaka. 1999.** "Cultural Anthropology and Development Issues." In *The Development Anthropologist*. Vol. 17, No. 1-2. New York: Institute for Development Anthropology.
- Behe, Michael. 1996.** *Darwin's Black Box. The Biochemical Challenge to Evolution*. New York: The Free Press.
- Bilton, Tony, et al. 1996.** *Introductory Sociology*. Third Edition London: McMillan.
- Bodley, John H. 1996.** *Anthropology and Contemporary Human Problems*. Mountain View, CA: Mayfield Publishing Company.
- Bryan, Richard. 1995.** *The Thinking Ape. Evolutionary Origins of Intelligence*. Oxford: Oxford University Press.
- Clifton, James A. 1968.** *Introduction to Cultural Anthropology. Essays in the Scope and Methods of the Science of Man*. Boston: Houghton Mifflin Co.

Clinton, Bunnet. 1996. *In Search of the Sacred: Anthropology and the Study of Religions* London: Cassell.

Conrad, Peter and Rochele Kern. 1994. *The Sociology of Health and Illness. Critical Perspectives.* New York: St Mary's Press.

Disch, Estelle. 1996. *Reconstructing Gender. A Multicultural Anthology.* Mountain view, California: Mayfield Publishing Company.

Dooley, David. 1995. *Social Science Research Methods. Third Edition.* Englewood Cliff, New Jersey: Prentice-Hall.

Duranti, Alesandro. 1997. *Linguistic Anthropology.* Cambridge: Cambridge University Press.

Foster, George M. and Barbara G. Anderson. 1978. *Medical Anthropology.* New York: John Wiley.

Galanti, Geri-Ann. 1997. *Caring for Patients from Different Cultures. Case Studies from American Hospitals. 2nd Edition.* Philadelphia: the University of Pennsylvania Press.

Graham, M. & Rosemary G. 1995. *Society and Health: An Introduction to Social Sciences for Health Professions.* London: Rutledge.

Greenhalgh, Susan. 1995. *Situating Fertility. Anthropology and Demographic Inquiry.* Cambridge: Cambridge University Press.

Hahn, R. A., ed. 1999. *Anthropology in Public Health.* Oxford: Oxford University Press.

Hammond, Peter. 1971. *An Introduction to Cultural and Social Anthropology.* New York: The McMillan Company

Hellmann, Cecil. 1984. *Culture, Health and Illness: An Introduction for Health Professionals.* Bristol: BRIGHT.

Henslin, James M. Adie Nelson. 1995. *Sociology: A Down to Earth Approach* Canadian Edition. Scarborough, Ontario: Allyn and Bacon Canada

Hodgen Margaret T. 1964. *Early Anthropology in the sixteenth and seventeenth centuries.* Philadelphia, University of Pennsylvania Press

Howard, Michael C and Janet D.H. 1992. *Anthropology. Understanding Human Adaptation.* New York: Harper Collins

Jones, Russell, A. 1995. *Research Methods in the Social and Behavioral Sciences. Second Edition.* Sunderland, Massachusetts, Sinauer Associates, Inc.

Keesing, Roger M. 1981. *Cultural Anthropology.* New York: Holt, Rinehart and Winston.

Kotttak, Conrad P. 1994. *Anthropology, the Exploration of Human Diversity*. New York: McGraw- Hill.

_____. 2002. *Anthropology. The Exploration of Human Diversity*. 9th ed. Boston: McGraw-Hill.

Krieger, Nancy. 2000. "Discrimination and Health." In *Social Epidemiology*. Lisa F. Berkman and Ichiro Kawachi, Eds. Oxford: Oxford University Press.

Lenski, Gerhard and Jean Lenski, 1982. *Human Societies. An Introduction to Macro-sociology*. New York: McGraw-Hill Book Company.

Lorber, Judith. 1997. *Gender and the Social Construction of Illness*. London: Sage Publications.

Macionis, John J. 1997. *Sociology*. Sixth Edition. Upper Saddle River, New Jersey: Prentice Hall.

Mann, Peter, 1976. *Methods of Sociological Inquiry*. Oxford: Basil Blackwell

Marshal, Catherine and Gretchen B. Rossman. 1989. *Designing Qualitative Research*. London: Sage Publications.

McElroy, Ann and Patricia Townsend. 1989. *Medical anthropology in Ecological Perspective*. West View Press.

Olson, David H. and John De Frain. 1999. *Marriage and the Family: Diversity and Strengths*. Mountain view, California: Mayfield.

Opoku, Kofi Asare. 1978. *West African Traditional Religion*. Accra: FEP International Limited.

Pankhurst, Richard. 1990. *An Introduction to the Medical History of Ethiopia*. Trenton, New Jersey: The Red Sea Press, Inc.

Parrilo, Vincet, 2002. *Understanding Ethnic Relations*. Boston: Allyn and Bacon.

Pilgrims, David. 2000. *A Sociology of Mental Illness*. 3rd Ed. Buckingham: Open University Press.

Podolefsky, Aaron and Peter J. Brown, Eds. 1997. *Applying Cultural Anthropology: An Introductory Reader*. Third Edition. Mountain View, CA: Mayfield Publishing Co.

Read, Margaret. 1966. *Culture, Health and Disease* London, Tavistock Publications

Rosnow, Ralf L. and Robert Rosenthal. 1996. *Beginning Behavioral Research. A Conceptual Primer*. Englewood Cliffs, New Jersey: Prentice-Hall

Scupin, Raymond and Christopher R. DeCorse. 1995. *Anthropology, a Global Perspective*. Englewood Cliffs, New Jersey: Prentice-Hall.

Steven, Feierman & John M. Janzen. 1992. *The Social Basis of Health and Healing in Africa*. Berkeley: Univ. of California Press.

Stockard, Jean, 1997. *Sociology. Discovering Society*. Belmont, CA: Wadsworth Publishing Company.

***The New Encyclopedia Britannica (Macropedia)*. Vol. 27 PP.326-331.**

Turner, Bryan. 1987. *Medical Power and Social Knowledge*. London: Sage Publications.

***World Book Encyclopedia*. Vol.1 PP. 545-548.**

Zanden- Vander, James W. 1990. *The Social Experience: An introduction to Sociology*. 2nd Ed. New York: Mc Grew Hill publishing.

Zerihun Doda, 2001. "Culture, Belief and Mental Illness among the Zay of Lake Zeway Islands, South-central Ethiopia." An Unpublished MA Thesis in Social Anthropology. Addis Ababa University, Department of Sociology and Social Anthropology.