

WORKSHOP: Medical Anthropology

Chairs: Marja-Liisa Honkasalo and Susanne Ådahl

The workshop on medical anthropology welcomes scholars interested in the looking at health institutions, e.g. hospitals, from an ethnographic perspective. These are seen as sites where deep rooted ideas of what it means to be human intermingle with changing societal realities resulting in complex patterns of everyday practices and interactions. Current developments in health policies in Finland and elsewhere tend to be guided by harsh economic arguments that have an immediate impact on the actual caring and curing practices. The workshop welcomes also papers that deal with these developments and/or the ethical questions that the current situation raises about the role and contribution of ethnographic research.

1.

Anna Leppo

Professional interventions in antenatal substance abus

This paper analyses the work done with pregnant women with alcohol and drug problems done at Finnish maternity clinics. These clinics aim at combining intensified medical antenatal care with psychosocial approaches. The ethnographic data consists of seven months of participant observation at one maternity clinic. The analysis looks at the encounters between the professionals and their clients and provides a nuanced account of how the professionals try to balance between effective but not too harsh interventions. If the mother's substance use continues, the professionals put gradually more pressure on her. To conclude, I will discuss more theoretically the general characteristics of regulating people's lifestyles in today's individualised society.

2.

Riikka Lämsä

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Julkista vai yksityistä: Potilasta koskevan tiedon käsittely sairaalaosastolla

Tämän terveystieteellistä antropologiaa yhdistävän tutkimuksen kohteena on sairaalaosasto. Sairaalaosastolla esiintyvät ilmiöt muotoutuvat moniulotteisiksi prosesseiksi, joissa eri toimijat, käytännöt, määrittelyt, tilanteet ja toimintalogiikat kohtaavat. Moniulotteisuus tulee näkyväksi etenkin kohtaamisissa, jotka eivät suju kivuttomasti, vaan muodostavat monenlaisia jännitteitä, ristiriitoja ja väärinymmärryksiä. Tässä esityksessä tarkastellaan ristiriitaa, joka syntyy potilasta koskevan tiedon ympärille sairaalaosastolla. Tutkimus on osa keskeneräistä väitöskirjaprojektia, jossa sairaalaosaston ilmiöitä erittelemällä etsitään sairaalaosaston toimijuuksia ja potilaiden erilaisia määrittelyjä.

Tutkimusaineisto on kerätty osallistuvan havainnoinnin avulla kolmelta sisätauti-osastolta vuosina 2006 ja 2008. Tutkimusaineisto sisältää tutkijan ylöskirjaamia tapahtumakuvauksia, potilashuonehavainnointia, potilaspalautteita ja – papereita, haastatteluja sekä kirjallista materiaalia.

Suullisessa esityksessä tuon mm. esiin kuinka sairaalaorganisaatio käsittelee kirjallista tietoa yksityisenä, mutta verbaalista julkisena, ja millä tavoin potilaat pyrkivät haastamaan suullisen tiedon julkisuuden.

3.

Daniela Manke

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Cultural values in the field of dementia care

The attempt at making a distinction between "normal" and "pathological" aging is as old and troubled by uncertainty as the foundation of the discipline of Geriatrics by Leo Nascher¹. Considering dementia it takes on a specific shape. The ongoing discussion, if dementia is part of normal aging, if it is a disease, if it varies culturally or is influenced by gender, class, nutrition and environment, or if it is hereditary is a very interesting research field for an anthropologist.

In the everyday practice of caring and nursing these perceptions have a great impact. Here exists cultural, so to say "german" perceptions of what constitutes good care. Both relatives and nurses act according to their, partly unconscious, ideas of what is good for the person who is in need of help or support. "Good care" can embrace e.g. clean clothes, combed hair, body contact like touching arms, and a set of daily activities. These activities could be, helping to cut carrots, going for a walk, watching the news in the TV. The perceptions are often accompanied by an idea of dignity.

In my master theses "The practice of dementia in Germany: Relatives between care for others and selfcare² I investigated how values like "autonomy" and "independence" operate in the background of the interactions between caring³ adult children and parents with dementia and how these values structure the interactions. The investigation is grounded on participant observation in self help groups for relatives, in day care settings for people with dementia and on qualitative interviews with German and Turkish adult children in Berlin and Hamburg.

4.

Juha Soivio

The notion of risk is a major device in framing heart disease. In the paper I will discuss the use of risk in the context of the Finnish welfare state and the current changes taking place in the welfare state. In addition I examine the uses of risk in rehabilitation practice, and the different ways that risk is used to divide responsibility within care and care practices. The way that risk is defined within epidemiology and clinical practice differs from the way it is used in everyday clinical practice – this implies that the universalism of risk as defined in epidemiology and clinical practice becomes individualised as a feature of a unique illness episode experienced on an individual level. Risk is also used in various ways in negotiating accounts of having a heart disease examined in the context of hospital care.

¹ Compare Cohen, Lawrence (1998): *No Aging in India. Alzheimer, The Bad Family, and Other Modern Things*. Berkeley et al. Univ. of California Press.

² "Der Umgang mit Demenz in Deutschland. Angehörige zwischen Fürsorge und Selbstsorge", Free University Berlin, Institut of Cultural and Social Anthropology, 2008.

³ "Caring" in this context also embraces "looking after". For example making regular phone calls and visits, and organizing a daily caring support system.