BOOK REVIEW

Culture, Health and Illness

by Helman CG, 2nd Edition. London: Wright. Price R96.80

This second edition of Cecil Helman's text book on applied medical anthropology has come at an important time in the evolution of Western medical practice. The medical profession's romance with technology, the emergence of new health professionals, the commercial packaging of health care and the growing emphasis on consumer choice and patients' rights, call for a radical revision of Western Style medical care. It also requires a more serious consideration of the many alternative approaches used especially in multi-cultural settings.

The behavioural sciences of psychology, sociology and anthropology have had to cope with explaining not only the diversities, but also with the similarities, of reactions to health stress in different cultures and societies throughout the world. We, in the medical profession are beginning to wake up to this! The contributions of medical anthropologists like Helman have done much to speed this up in the past decade.

In this edition, the author, a British general practitioner-anthropologist, has maintained the basic structure of the first edition. In his introduction, he orientates his readers to the newly emerging discipline of medical anthropology, which aims to sensitize practitioners of medicine to the sociocultural constructs of health and illness. In patient care, we practitioners need to understand, the cultural "lens" that we ourselves use to see and understand our own world, as well as to recognize the "lens" that patients use to understand their own distress and illness. How else can appropriate care be given?

Since the emphasis is on applied medical anthropology, the author uses many case studies including South African to explore the important areas of clinical practice – hospital, general and primary care – from the socio-cultural angle. These are backed up by information from many fields of research.

The chapters cover the cultural definitions of anatomy and physiology, diet and nutrition, caring and curing, doctor-patient interactions, pain and culture, culture and pharmacology, ritual and management of misfortune, crosscultural psychiatry, cultural aspects of stress, and cultural factors in epidemiology. Helman has added a chapter on 'gender and reproduction', which may reflect either the influence of feminism or the growing recognition of the need for a better informed understanding of illnesses in women.

In his introduction to the second edition, the author indicated the additions that he has made to most of the chapters. In the rapidly expanding field of medical anthropology, these additions reflect not only new areas of concern eg AIDS, but also evolving attitudes eg awareness of the casualties of social change. Most of these themes have been derived from other more specialised contexts: the key messages of authors such as Kleinman, Jansen, Janzen, Fabrega, Littlewood, Minuchin, and others, have been extracted and made available to the non-specialist reader. Since the family doctors of the First World have discovered that the Third World is on their doorstep, it is not surprising that the author advocates anthropological insights to assist in a better understanding of the "other" in all medical contexts.

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Not only does Medical Anthropology address the socio-cultural context of medical practice, but also the very process of medical enculturation itself. The extensive use of symbols and rituals to establish and consolidate medical power are discussed at length: these are also being adopted by our other professional colleagues, (all want to wear white coats and stethoscopes the symbols of authority). The expansion of medical services into the primary care setting will clearly give the nurse-practitioner more power. Will her/his patients acknowledge it?

The author would do well to explore the area of primary health care in greater depth in his next edition, since his book is certainly gaining a foothold in the world market, judging by the reviewers.

Have the changes in content been adequate in terms of the aims of the book? Many of the health professionals most concerned with the cultural aspects of medical practice are members of the nursing profession, or are front-line health-care-workers. Since his central focus is on the practice of doctors, the author has ignored the pioneering work in transcultural nursing over the past two decades.

Helman could have drawn on the extensive work done by Madeleine Leininger (1978) in developing transcultural and ethnonursing constructs. She has studied the impact of this teaching on nurses, who have, as a result, developed a greater awareness of anthropological concepts in their practical work. Such evidence, which demonstrates the practical value of anthropological knowledge, is limited in the field of medical practice. Balint groups did

much to heighten the doctors' awareness of the psychological aspects of the doctor-patient encounter: possibly the same discussion group model will enable health professionals to develop greater socio-cultural awareness in their clinical practice.

Turning to other omissions, the general focus is on the micro-level of illness presentation and context of diagnosis and healing; only glancing attention is paid to the power differential between doctor (healer) and patient. In addition, while the nature of medical care is being sociopolitically shaped under the growing influence of insurance or employment agencies, critical medical anthropology is encouraging researchers in this field to be less identified with organized medicine and public health. Medical professionals need to critically examine the social production of illness, the political factors underlying the medical construction of disease, the medicalisation of social - even religious - problems, the social control function of medicine and the inequalities in health care.

In view of the fascination of biomedicine with the natural sciences and its respect for quantitative measures in research, a more detailed discussion on qualitative research, used and respected in anthropology, would have been of value. Indeed some practical hints on ethnographic research in a medical context would have enriched the text and added to its clinical relevance especially in the Third World.

What of the presentation? The text resembles a rich fruit cake, full of nourishing ingredients, but digestible

only in small morsels. The information, drawn from the fields of sociology, psychology and anthropology, has been updated. The speedy appearance of the book in paperback suggests that the publishers recognised they had made a valuable investment!

A glimpse at text books that undergraduate students like to use, and the material that they can readily assimilate, would have prompted the author to re-organize the text. Pages of concentrated information in a cursive style alienate all but the most dedicated reader!!! Better paragraphing, more diagrams, highlighting salient points in "boxes" and more succinct statements would have helped the undergraduate – even post-graduate student – assimilate this valuable material much more easily.

The value of this book will be primarily as a source book to a lecturer in medical anthropology, so that he/she can draw on current views and communicate these to students of medical anthropology, medicine, social work and nursing. However it would also be a useful text for all practising professionals especially in a Third World context, by way of reference; it encourages us to examine our current practices more critically, and research our own bailiwick. As Angela Burr (1984) said "Any doctor who reads "Culture, Health and Illness" will never look at himself (sic) or a patient in quite the same way again!!! I agree.

Eleanor S Nash

Reference

Burr, Angela. Book review. Brit Med J 1984;288:1754.