

		Teaching Guide				
	2020/21					
Subject (*)	Health Anthropology		Code	651516004		
Study programme	Mestrado Universitario en Discapacio	Mestrado Universitario en Discapacidade e Dependencia (plan 2015)				
		Descriptors				
Cycle	Period	Year	Туре	Credits		
Official Master's Degre	ee 1st four-month period	First	Obligatory	4.5		
Language	Spanish					
Teaching method	Hybrid					
Prerequisites						
Department	Humanidades					
Coordinador	Couceiro Dominguez, Enrique E-mail enrique.couceiro.dominguez@udc.es			o.dominguez@udc.es		
Lecturers	Couceiro Dominguez, Enrique	E-ma	il enrique.couceir	enrique.couceiro.dominguez@udc.es		
Web		'	'			
General description	Provide the student, through an introductory course, with theoretical and methodological knowledge in anthropology of			knowledge in anthropology of		
	health and disability, for the qualitative empirical understanding and analysis of the sociocultural aspects of disability an					
	illness and health, as life experiences and as Phenomena and conditions with an essential moral and symbolic dimension					



## Contingency plan

1. Changes in the contents:

No changes will be made to the content

2. Methodologies

\*Teaching methodologies that are maintained

Guided work (computed in evaluation)

Master session

Objective test (computing in the evaluation of semi-presencial students)

Targeted discussion (computed in evaluation)

Bibliographical claim (computation in the evaluation)

\*Teacher methodologies that are modified: There is no methodology that is modified; but the A1 competence is also covered by the 'master session', and the C4 through 'Readings'. In addition, the 'Custom Care' is extended to all methodologies, with the exception of the 'Master Session'

- 3. Mechanisms of personalized attention to students:
- -Email: daily use, both for communication with students and eventually, and as a second option after Moodle for the rapid sending of digital documents with the writings of the works of the different competences.
- -Moodle: on a regular basis given according to the communication needs between teachers and students, it will be used to consult through the 'forum', and mainly to serve in digital material files for the different methodologies in 'tasks', and news through the forum.
- -Teams: tool reserved for the conduct of the master sessions and associated comments, between teachers and students in a situation of non-in-face force forced by confinement measures
- 4. Modifications in the assessment: Both face-to-face and semi-presence students maintain the respective criteria for the distribution of percentages corresponding to the different methodologies. Specifically, the face-to-face should not carry out the objective test, so that the 20% that it computes is distributed among the other methodologies that do count for evaluation; while semi-presences should perform the objective test and be computed 20% differentiated. However, under conditions of non-in-personity per contingency plan, the attendance count of face-to-face students will be estimated until the time of confinement, so that the test will remain unsused for those who have attended at least 2/3 of the effective face-to-face sessions up to that time, and continue to attend virtual master sessions through Teams.
- \*Evaluation Comments:

The requirements for exceeding the matter under conditions regulated by the contingency plan shall consist of:

-Delivery the works associated with the different methodologies (tutored work, reading and bibliographic detention) in the form and deadlines indicated.

In-person students, attend at least 2/3 of the masterful sessions actually taught, and follow up on those eventually taught by Teams

- -For semi-presencial students, in addition, take the objective test
- Obtain in either case an overall score estimated considering the different percentages of the different methodologies equal to or greater than 5
- -The requirements for the call for 2nd opportunity will be to deliver and/or redo the work and/or evidence suspended or not presented in the first call.
- 5. Modifications of bibliography or webgraphy

There are no modifications to the literature, taking into account that all materials in the form of articles will be provided to students, by system, via Moodle.

	Study programme competences / results
Code	Study programme competences / results

A1	CE1. Ser capaz de integrar o fenómeno da discapacidade e a dependencia dentro da construción social do proceso saúde-enfermidade
A4	CE4. Capacidade para a análise da influencia das achegas sociais e científicas das ciencias socio-sanitarios sobre a discapacidade e a dependencia no sistema xurídico
B1	CB6. Posuír e comprender coñecementos que acheguen unha base ou oportunidade de ser orixinais no desenvolvemento e/ou aplicación de ideas, a miúdo nun contexto de investigación
B2	CB7. Que os estudantes saiban aplicar os coñecementos adquiridos e a súa capacidade de resolución de problemas en ámbitos novos ou pouco coñecidos dentro de contextos máis amplos (ou multidisciplinares) relacionados coa súa área de estudo
В3	CB8. Que os estudantes sexan capaces de integrar coñecementos e enfrontarse á complexidade de formular xuízos a partir dunha información que, sendo incompleta ou limitada, inclúa reflexións sobre as responsabilidades sociais e éticas vinculadas á aplicación dos seus coñecementos e xuízos
В7	CG2 Identificar, avaliar e resolver os problemas derivados da presenza de discapacidade e dependencia
В9	CG4 Ser capaz de intervir na problemática derivada da discapacidade e da dependencia
C1	CT1. Ser capaz de relacionarse de forma eficiente con e dentro do equipo multidisciplinar, intradisciplinar e transdisciplinar.
C4	CT4. Desenvolverse para o exercicio dunha cidadanía aberta, culta, crítica, comprometida, democrática e solidaria, capaz de analizar a realidade, diagnosticar problemas, formular e implantar solucións baseadas no coñecemento e orientadas ao ben común
C6	CT6. Valorar críticamente o coñecemento, a tecnoloxía e a información dispoñible para resolver os problemas aos que deben enfrontarse

Learning outcomes			
Learning outcomes			amme
Learning outcomes  Iderstand the relevance of social and cultural anthropology within the health-disease and normality paradigms, faced by the man being. Recognize the anthropological roots on which any therapeutic system is built and representations of disability didependence- Iderstand the methodology of study of this discipline and execute some technique of collecting anthropological information.	competences /		
		results	
Understand the relevance of social and cultural anthropology within the health-disease and normality paradigms, faced by the	AR1	BR1	
human being. Recognize the anthropological roots on which any therapeutic system is built and representations of disability	AR4	BR3	
and dependence-		BR7	
Understand the methodology of study of this discipline and execute some technique of collecting anthropological information.	AR1	BR2	CR1
		BR3	
Integrate the importance of symbols, representations, values and behaviors that occur in different cultures around health,		BR9	CR4
disease, disability and dependence			CR6

	Contents
Topic	Sub-topic
Unit 1. The social and cultural anthropology as a discipline.	
	What is Anthropology; What is its object and method.
Unit 2. The research methods and techniques in Social and	Fieldwork, participant observation, action research, the interview
Cultural Anthropology.	ethnographic, the history of life, the genealogical method.
Topic 3 Relativism and cultural diversity. The cultural concept	Cultures as symbolic systems of representations, values and behaviors. The
of normality.	interpretation of the specific knowledge, values and local practices in Anthropology.
Theme 4º Anthropology of health. Disciplinary history.	The anthropological perspective of disease and healing; The illness; The healing
Topic 5º Medical anthropology and ethnomedicine.	Cultural premises of biomedicine; The field of biomedicine and its
	compartmentalization in specialities; Values and practice in biomedicine;
Topic 6 ° Cultural trends and choice in medicine and health.	The social construction of the doctor, the patient and the diagnostic-therapeutic
	process.
Topic 7º. The universe of illness, disability and dependence.	Deficiency, disability and handicap.
	The dependence
Topic 8°. Illness and healing Three theories	Cultural approach. Ecological approach. Socio-political approach

Topic 9°. Disability: The role of society and culture.	Perception as an interpretation
	The view in the west;
	conclusio
Topic 10th. Applied anthropology in disability	The critique of the cultural assumptions of disability. From disability to functional
	diversity

Planning				
Competencies /	Teaching hours	Student?s personal	Total hours	
Results	(in-person & virtual)	work hours		
A4 B2 B7 C1	1	25	26	
A1 C4	1	15	16	
A1 C6	20	0	20	
B3 C4	8	22	30	
B1 B9	0	13	13	
	7.5	0	7.5	
	Competencies / Results A4 B2 B7 C1 A1 C4 A1 C6 B3 C4	Competencies / Results (in-person & virtual)  A4 B2 B7 C1 1  A1 C4 1  A1 C6 20  B3 C4 8  B1 B9 0	Competencies / Results         Teaching hours (in-person & virtual)         Student?s personal work hours           A4 B2 B7 C1         1         25           A1 C4         1         15           A1 C6         20         0           B3 C4         8         22           B1 B9         0         13	

/*\The information in the	valanning table is far guidence	ambrond daga nattaka inte	account the heterogeneity of the students.
( ) The information in the	e bianning table is for quigance	only and does not take into	diaccount the neterodeneity of the students.

	Methodologies
Methodologies	Description
Supervised projects	The student will select, to carry out his supervised work, one of the following thematic options:
	1. Perception, classification and emic experience of disability, and its specific sociocultural conditioning factors. The specific
	conflict and negotiation process involves specialists and disabled people.
	2. Models, response and alternatives in the sociocultural construction of the categories disease / cure / health, or disability /
	treatment / integration, and of the specialist / patient or specialist / disabled roles.
	The methodology will consist of a small study of the chosen topic, from the student's own professional, healthcare or training
	experience, supported by the empirical description of some cases associated with one of the aforementioned topics, and
	developing an interpretation that takes into account social processes and cultural that operate around this phenomenon of
	disability. Due to the characteristics of the course, the object and objective of the study will be very specific, and the scope of
	the analysis limited.
	The blended students will receive information and tutoring regarding the preparation of the work, either by online means
	(email, news in Moodle), or on the occasion of one of the two face-to-face meetings to which they will be called during the semester.
	In circumstances of general non-attendance due to the pandemic, for their work, the student will be able to carry out the
	empirical survey of real cases with online tools, or replace them with the design sketch of an empirical survey based on semi-structured interviews or life history.
	Both in classroom and non-classroom conditions, the work will be prepared and delivered in digital document, in Word or PD
	format, sent as a 'task' in Moodle or via email. The delivery will take place at the end of the course (December).

Objective test	It will consist of the conduct of a thematic examination through questions with short answers, the day and time marked for this
	purpose by the organization of the master, and with a maximum hour of duration of the test.
	Under conditions of face-to-face normality, the conduct of this examination will be mandatory for semi-presence students
	and/or for students who do not attend at least 2/3 of the master sessions (under face-to-face conditions).
	Under non-in-person conditions per contingency plan, the attendance count of face-to-face students will be estimated until the
	time of confinement, so that the test will remain unsused for those who have attended at least 2/3 of the effective face-to-face
	sessions up to that point, and continue to attend virtual master sessions through Teams.
	The objective test will be carried out in person on the day of the official call.
	The materials for the preparation of the test will be provided by the teacher, as the topics of the program are taught, in the
	form of summaries of what was given in the master sessions, sent as documents in Word or in Power point through the
	Moodle platform. The objective test will be done in person on the day of the official call.
	The materials for the preparation of the test will be provided by the teacher, as the topics of the program are taught, in the
	form of summaries of what was taught in the master sessions, sent as documents in Word or in Power point through the
	Moodle platform.
Guest lecture /	Presentation in class by the teacher, relying on power-point projected diagrams, of the subject matter of each of the ten
keynote speech	program topics. Clarifications and dialogue on controversial or particularly interesting aspects of the subject presented.
	In the non-attendance contingency due to the pandemic, the master sessions will be taught through conferences on the
	Teams platform, convened during the time slot assigned to the subject in the weekly schedule, and will be accompanied by
Markhaak	sending the students, via Moodle., from the summary of the corresponding topic, at the end of the virtual teaching of the same
Workbook	In the case of face-to-face students, reading, summary, presentation in weekly sessions -each assigned to 1-2 students-, and open debate in class of a total of 15-20 readings referring to topics of anthropology of disability and dependency.
	open debate in class of a total of 15 25 readings referring to topics of antihopology of disability and dependency.
	In the case of blended students, the text reading about health, disability or dependency, instead of being the subject of oral
	presentation in class, will be delivered in writing for evaluation in the form of a digital document with a summary and evaluation
	of the article that be assigned personally, of a maximum of 8 pages in length, and that also includes the conceptual maps that
	reflect the theoretical-argumental and ethnographic treatment of the content.
	In a situation of general non-attendance arising from the measures against the pandemic, the 'readings', instead of being the
	subject of exposition in class, will be summarized, valued and provided with concept maps, carried out in writing in digital
	format, and delivered via Moodle or email in the week and day of the semester that each student had assigned his
	presentation in class (distribution that is made at the beginning of the course)
Critical	Brief critical comments on the following readings:
bibliographical	1st Langdon & Wiik (2010) & quot; Anthropology, health and disease: an introduction to the concept of
	culture applied to health sciences ". Enfermagem, 18
	2ª Guerrero, Joaquín (2011) "Humanizing disability. From ethnography to commitment in sociocultural research on
	intellectual disability". Experimental Anthropology Magazine, 11
	3º Velarde, Valentina (2012) "The models of disability: a historical journey" Enterprise and Humanism Magazine, 1
	The three texts for the preparation of the reviews will be provided in digital format and sent to all the students (face-to-face
	and blended) through the Moodle forum, so that each student submits a review of each text at the beginning of each month,
	sending it in Word or PDF format through the same channel (Moodle forum).
	The same procedure will be followed in case of entering general conditions of non-attendance.

	Personalized attention
Methodologies	Description



## Critical bibliographical Supervised projects Objective test Workbook

The personalized attention will consist of the orientation and follow-up, through tutoring, both of the preparation of the supervised course work, as well as the preparation of the readings to be presented, the preparation of the bibliographical review and -for semi-presential students- in the orientation on doubts and difficulties raised in preparing the subject for the objective test.

For personalized attention, email will be used (Monday and Wednesday morning), as well as the Moodle forum (every week of the course) and, especially in the case of blended students, face-to-face meetings called in two moments of the semester.

The blended students must develop the methodologies envisaged for the remaining students, delivering the indicated works (supervised work, readings and bibliographical review). But you will be exempt from attending the magisterial sessions, just as you will be required to submit to the objective end-of-course test.

		Assessment		
Methodologies Competencies /		Description	Qualification	
	Results			
Critical	B1 B9	The critical capacity of the student will be evaluated when evaluating the text	10	
bibliographical		proposed for recension, as well as his ability to make schematic summaries of it, and		
		the detection of its key concepts		
Supervised projects	A4 B2 B7 C1		40	
		To assess the supervised work to be developed during the course, the development of		
		the basic study on the proposed topics will be taken into account, taking into account		
		the experiential approach - professional or practical - expressed, as well as the		
		interpretation of the same by the student from the models theorists of the		
		Anthropology of health or disability		

Objective test	A1 C4		20
		The final written test will try to assess the theoretical knowledge obtained from	
		attending to the substitute theoretical materials of the face-to-face classes. It will	
		consist of answering ten questions of short answer, based on the readings on the	
		contents of the program. It is compulsory for blended students and for those who do	
		not attend at least 2/3 of the sessions.	
		It is not a methodology to be developed or compulsory evaluation in the case of	
		face-to-face students. In these cases, the qualification percentage of the 'objective	
		test' is distributed adjusting it among the other methodologies under evaluation, in the	
		proportions expressed in the "evaluation observations".	
/orkbook	B3 C4	The capacity of analysis, identification of problems and critical argumentation of	30
		answers to them will be valued in the personal presentation and comment, followed by	
		debate, at the end of the sessions, on selected readings of Anthropology and	
		ethnography of health and disability.	

## **Assessment comments**

- The blended students, or those who do not attend at least 2/3 of the sessions of the course, must compulsorily carry out the objective test, as well as the other methodologies contemplated, although only the first will be done in person.
- Regular assistant students may voluntarily choose to take the objective test. If they choose not to do it, supervised work will mean 50% of the grade, readings 35% and bibliographic reviews 15%
- The students who present themselves to the second opportunity call must do so in those methodologies not passed -or not presented and should be done- in the first call. In this case, only the objective test of the 2nd call will be face-to-face (except confinement), while the other methodologies will be covered by sending the corresponding works in digital format, and via Moodle or email.

Sources of information

Basic	Augé, Marc ? Jean-Paul Colleyn (2005) Qué es la Antropología. Barcelona, Paidós. Brown, Peter J. (1998)
	Understanding and Applying Medical Anthropology. Mountain View, Mayfield Publishing Company Comelles, Josep
	Ma - Angel Martinez (1993) Enfermedad, cultura y sociedad. Douglas, Mary (1998) Estilos de pensar. Barcelona,
	Gedisa. Giner Abati, Francisco (1992) Los Himba. Cap. 8º (?Medicina y magia entre los Himba?). Salamanca, Amarú
	Kuschik, Ingrid (1995) Medicina popular en España Madrid, Siglo XXI. Hahn, Robert A. (ed.)Anthropology in Public
	Health, New York, Oxford University Press Lévi-Strauss, Claude (1980) ?La eficacia simbólica?, en ld. Antropología
	estructural. Buenos Aires, Eudeba. Martinez, Angel(2008) Antropología médica. Teorías sobre la cultura, el poder y la
	enfermedad. Barcelona, Anthropos. Martínez, Angel (1996)? Antropología de la salud. Una aproximación
	genealógica?, en Prat, Joan y Angel Martínez (eds.) Ensayos de antropología cultural. Barcelona, Ariel. Otegui,
	Rosario (2005) ? ?Una cosa fea?: VIH-SIDA y sistema de género entre los gitanos españoles?, en Revista de
	Antropología Social. Vol. 14. Publicaciones Universidad Complutense de Madrid. Turner, Victor (1988) ?Niveles de
	clasificación en un ritual de vida y muerte?, en Id., El proceso ritual. Madrid, Taurus
Complementary	

Research Methodology/651516	Subjects that are recommended to be taken simultaneously  Subjects that continue the syllabus	
	Other comments	
o help achieve an immediate	stainable environment and meet strategic objective 11 of the Green Campus Plan of the Faculty of Physiotl	nerapy
e documentary work carried	in this matter will be requested in electronic format and will be sent by online procedures (Moodle and / or	
e documentary work carried		
e documentary work carried		
e documentary work carried		
documentary work carried		
documentary work carried		

(\*)The teaching guide is the document in which the URV publishes the information about all its courses. It is a public document and cannot be modified. Only in exceptional cases can it be revised by the competent agent or duly revised so that it is in line with current legislation.