

# Introductory Anthropology

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## Course description

Anthropology is not a field of study that is generally known to the public. Hence there are several misconceptions. One of the common misconceptions about anthropology comes from the mix-up with archaeology. But there is a distinction between the two. While archaeology is a study about people in the past, anthropology is about people of the present day – the here and now. Another common misconception is that anthropologists are particularly interested in indigenous people in non-Western parts of the world and their "exotic" practices. Although it was the case in the beginning – remember that anthropology was born of the colonial world, the world has changed, and so has anthropology's discipline.

Anthropology today focuses on people everywhere globally, from a community of indigenous people in the Middle East to a hipster group in London. It no longer matters who and where they are, but what matters is, how they live and what makes them unique. To answer these questions, anthropologists observe and examine many aspects of their living, from the everyday practices, rituals and ceremonies to sciences technologies. These practices are what we define as "culture". Culture is what makes us unique as human beings, and anthropology is the study of culture.

Then, one might wish to ask how anthropology, as a study of culture, can be relevant to medicine and health? Here is a simple answer to this question because culture influences our perception of health and patterning of diseases. For example, the mortality rate was higher among infant girls than infant boys in certain countries. This disproportionate mortality was arguably a reflection of their cultural preference for sons over daughters. Here, the expressions of health and disease are determined by the culture.

Nevertheless, culture may not be the element appreciated in the field of medicine. To take an example of epidemiology, it is true that most epidemiological studies are based on biomedical theories of illness causation, and justified by empirical tests and falsifiable hypotheses. Therefore, epidemiologists are unlikely to agree with the idea that cultural rules and politics in science dictate their study. But research designs, statistical tests, definitions of risk and disease, and health concepts all rise and fall in popularity. Is it not that epidemiology itself is a form of our cultural practices?

In the course of "Introductory Anthropology", we will explore anthropology's ideas - what anthropology is, how it can be relevant to medicine, and what it can teach us. More importantly, I would like to discuss how anthropologists see the reality and try to articulate its complexity when interpreting. Here, I introduce a new idea of anthropological perspectives into your field of study. It is essential to look beyond the scales we are familiar with, and see the reality (or our cultural perception of reality) differently.

## About the instructor

During my studies in London, I was fascinated by the idea of *surréalisme* and psychoanalysis theories that emerged in Europe during the interwar period. My fascination sprang from the sense of anxiety, loneliness and neurosis within this particular moment of history. But many things changed after the 2011 Fukushima nuclear accident, and so did my research interest. Because it confronted me with many questions that I cannot disregard, I conducted anthropological research on Fukushima's nuclear accident aftermath for my PhD study. In my fieldwork, I collected both vocal and non-vocal testimonies of how the Fukushima residents encounter radiation, how they embrace their death, and how they repeat the trauma in everyday life after the nuclear accident. I interpreted this repetition compulsion as their willing recollection of a traumatic past and projection of such past into the future. This interpretation paralleled the Nietzschean radicalization of the repetition compulsion (the Eternal Recurrence of the Same) into the will (the Will to Power). What emerged here was the positive agency of the Fukushima residents.

Since 2018, I have been working in the field of public health as a researcher at Fukushima Medical University. While the area somewhat remains foreign to me, I try to bring critical theory with the statistical and quantitative tradition of public health.