International Health and Culture Studies

In the spring of 2003, as a student at Indiana University Bloomington, I took a course titled *International Health and Social Issues*. During that course I was challenged to increase my knowledge of the world outside of the United States. We discussed many health and social problems within Third World countries, and learned the effects culture has on health procedures. This course commenced my search for a major that would increase my understanding of health issues in developing countries.

I began my freshman year as a pre-Nursing student because I wanted the hands-on experience of helping people and making a difference in the world. Throughout this time I took various health-related classes, but none of them touched on the interrelation between health and culture. I was still interested in doing Nursing, but I also knew that I did not want to be a nurse in the United States in a hospital. My real passion was, and is, to work overseas in a developing nation. I transferred from IU Bloomington to IUPUI for Nursing School; however, I did not get in. I came away from this experience with an even stronger desire to find a major in international health. I now know that there are no existing majors that coincide with my interests in global health issues. I am not interested in the administrative aspects of healthcare, nor am I interested in the philosophical ideals of healthcare. I simply want to study the affects that culture and societies have on healthcare, and from there to ascertain how to educate people on basic health procedures. For this reason, I have decided to create my own major entitled International Health and Culture Studies.

Culture is a complete way of life, including what people think, say, do and make.
I believe that culture has a vast effect on how people take care of their bodies, and on the treatments they use when they become ill. As a result, I wish to combine the study of health in developing countries with the study of the cultures in those areas. I want to be able to examine a certain nation by looking into their belief system and values, and from there determine the best way to educate them on health procedures and basic health knowledge. By doing this I will not be going over to their country and declaring that the United States practices health care a certain way and so they must follow the same procedures, but to practice healthcare as best relates to their culture and society.

In the course packet from the *International Health and Social Issues* class my professor, Dr. Noy Kay, wrote about “cultural competence”. She wrote, “cultural competence moves beyond the concepts of cultural awareness and cultural sensitivity to focus on the fact that some level of skill development must occur. Gaining cultural competence is a long-term, developmental process that requires more than studying a culture; it is thinking critically about issues of power and oppression and acting appropriately. Culturally competent individuals have a mixture of beliefs/attitudes, knowledge and skills that help them establish trust and communicate with others” (pg101). This passage has been integrated into my everyday experiences of interacting with people in the United States and abroad.

This major stems from the desire I have always felt to impact the world one life at a time. I have always been very intrigued by international cultures. I have traveled abroad to Mexico many times and to China. While in Mexico I did work projects to build homes, and I distributed food and clothing to communities. In China, I worked closely
with university students, and I spent time with children in orphanages. This past summer I traveled to Kenya with a Social Work professor, Becky Van Voorhis, to learn about the affects the IU-Kenya program is having on the communities and aided them in that project. I have not done much healthcare volunteering, but I have done other volunteering. I started volunteering when I was very young. In elementary school I volunteered at the Children’s Museum as a tour guide in the ‘What If…’ department. In high school, I was the leader of a group of students that received a grant to hold a second-chance prom at a retirement home. Also in high school, I volunteered at the Mental Health Association as part of a teen crisis hotline called TEENlink. In Bloomington, I volunteered with Bloomington Hospital’s Hospice, and for a short time at Hannah House Maternity Home. On some occasions I have volunteered days at Wheeler Mission, Backstreet Missions, Horizon House, Dayspring, Dream Center in L.A., etc. I would like to become a Red Cross volunteer, but have not had much time to do so. As you can see, I have a passion to learn about people’s needs, and how I can assess those needs through my knowledge of their every day lives, culture and their health situation.

In addition to doing the Individualized Major Program in International Health and Culture Studies, I am going to be doing a minor in Anthropology. With this minor I will gain insight into how to study cultures, and gain knowledge of the effects that society has on medical practices. Furthermore, I can asses what may be done in addition to their delivery of medical care to assure a higher life expectancy and a decline in the spread of diseases. I had planned to do a minor in Medical Sociology, but after consulting with the department it seems as though they will not be offering the courses I need and want until
after I should have graduated. As much as I would like to take the courses, I would not like to put off graduation for just a few courses that I do not really need for graduation.

Now I will give an overview of the courses that I have chosen for my major. During my semesters as a Pre-Nursing student in Bloomington, I took many health courses. As I have stated, I took International Health and Social Issues, Microbiology, Disease and the Human Body, Nature of Cancer, and Nutrition for Health. While at IUPUI, I have mainly focused on the requirements for the School of Liberal Arts; however, last semester I took Principles of Epidemiology. This class was similar to Microbiology because it studied the spread of diseases, but it looked at how one attains the correlation between exposure to a disease and the outcome. During this fall semester, for the major, I am taking Medical Anthropology, Introduction to International Relations and Women and Health. These classes are all focused on understanding the basic concepts of my major, which concentrates on communicating basic health necessities internationally and inter-culturally. In the spring semester, as my final classes for my major, besides the Capstone, I am registered for Health Consumer-Provider Communication. I am hoping this class will provide me with the communication techniques to be more attentive to people’s health issues. I have learned in my Women and Health class that communication between consumers and providers is one of the biggest problems facing healthcare. I would like to learn how to reconcile the miscommunication.

At first glance a few courses may not appear to assimilate with my major, therefore, I will clarify why I took, or am taking, them. First, Nutrition for Health, which
helped me to understand the effects of malnutrition and poverty. And secondly, Introduction to International Relations, will give me better insight into the relationships between countries. My faculty sponsor suggested I take Introduction to International Relations with Scott Pegg, who, likewise, informed me that the course would include material on the health relations between countries as well. There are additional (alternative) courses that I would like to take that are not being offered. These include Medical Geography, Comparative Politics in Developing Countries, Popular Cultures and African Cities, Sociology of Health and Illness, and Community Health Education.

Except for the Advanced Courses, I have most of the School of Liberal Arts requirements complete. However, I will be able to integrate the courses from my minor into these advanced courses. There are two exemptions that I would like to request. I would like to incorporate HIST B421 Topics in European History as an upper level course in substitution of the 100-level courses offered as Arts & Humanities course requirements—-with permission given by Sloane Thompson. The final exemption is to use ten credit hours of “outside electives” as compared to the typical maximum of nine credit hours. In so doing, I will achieve the full 122 credit hours by the end of this Spring semester without having to take more than sixteen credit hours.

During my final semester of my senior year (Spring 2006), I will be working on my Senior Project/Capstone. Dr. Rick Ward has agreed to be my faculty sponsor for my Capstone. The theme of this Capstone will be “AIDS in Africa”. I have discussed my interest in working alongside the IU-Kenya researchers with data that they have
collected. They will be analyzing their data regarding the effectiveness of Traditional Birthing Attendants in the fight against AIDS in Kenya. I will be researching the traditional culture of Kenya and of the Traditional Birthing Attendants. I will further research HIV/AIDS pregnancy in Kenya and utilize the analyzed data to present whether Traditional Birthing Attendants can play a role in these pregnancies. I am looking forward to learning more about the situation in Africa.

In summary I would like to propose my created major of International Health and Culture Studies. After graduating with this major I would like to work for an organization such as the World Health Organization, Red Cross, National Institute of Health, or some like-minded organization so that I can learn more about research and international health issues. From there I would like to attend graduate school for a dual degree in Medical Anthropology and Public Health and continue to work at one of the preceding organizations. I desire to work to improve health conditions internationally while being considerate of the importance of maintaining the world’s cultural variations.