

Medical Anthropology in Poland

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Social sciences and medicine in Poland have had a relatively long relationship. Nevertheless, this relationship has long been limited to medical sociology, which has existed as a separate discipline and been under continuous development since the 1960s.¹ In comparison, medical anthropology in Poland is a young discipline. Locally produced research and literature, both theoretical and empirical, are still modest. For a long time, only two universities took the trouble to look at medicine through the lenses of sociality and culture (research started and conducted since the late 1970s by Danuta Penkala-Gawęcka in Poznań and Adam Paluch in Wrocław). Today students from other universities have the opportunity to familiarize themselves with the issues of medical anthropology which is taught as a separate subject at some institutes. Even so, the curriculum consists mainly of international authors, while literature produced by Polish authors reflects the early days of the discipline in the country – it consists mainly of introductions to medical anthropology in general or interdisciplinary works that include some anthropological perspectives (Penkala-Gawęcka 2008a, 2008b; Piątkowski and Płonka-Syroka 2008; Płonka-Syroka 2008; Płonka-Syroka and Marczyk 2009). However, this situation is changing and we can see a significant increase in medical anthropological research in Poland.

The character of the sub-discipline has been formed by the history of general anthropology and its specific place in the academic landscape of the country. Polish ethnology grew from the ground of research on local folk cultures, and when anthropological research developed in Poland, it was connected to ethnological research.² Thus, interest in “folk cultures” has for a long time been central to Polish general anthropology, and this has shaped medical interests as well. “Folk medicine”, ethnomedicine (Dłużewska 1983; Szychowska-Boebel 1972; Tylkowa 1989) and ethnobotany (Paluch 1980, 1984, 1989) dominated research at the ethnological and anthropological institutions in the early days of Polish medical anthropology. Today, we also find a rich body of literature continuing and developing

1 For a history of medical sociology in Poland see Sokołowska (1966); for later developments see Ostrowska (1996), and Piątkowski and Płonka-Syroka (2008).

2 Today both disciplines are still practiced together at Polish universities, at institutes of ethnology and cultural anthropology.

traditional ethnobotanical research in Poland (Pirożnikow 2008; Kujawska 2011; Adamus 2012) and in countries from the former Eastern Bloc (Kołodziejska-Degórska 2008). Because ethnomedical studies have been connected to historical and museum studies, medical and cultural historians are also engaged in studies of modern ethnomedical practices (Płonka-Syroka 2009; Sikora 2011; Jeszke 1996).

The tradition of ethnomedicine and ethnobotany, as well as of research on local “folk medicine” (Penkala-Gawęcka 1980, 1995; Libera 1995; Bem 1996) was important for the development of medical anthropology in Poland. Nevertheless, the discipline has undergone a gradual change in character. Due to awareness of the status of concepts of “folk culture” or “folk medicine”, Polish anthropologists have turned their analytical attention towards complementary or alternative medicine. Currently the sub-discipline is being strengthened, better defined and focused. Stronger links to general anthropology are developing, as seen in the increasing use of common research methods, concepts, and theories in medical anthropology. Lately Polish researchers, especially the younger generation, have focused their attention on issues from the mainstream of modern medical anthropology. Researchers are both participating in and facilitating specialized conferences.³ Unfortunately, in spite of increasing participation in medical anthropological arenas, the Polish body of literature is still a little meagre.

Because of European geopolitics and financial issues, most Polish anthropologists have done their fieldwork in Poland and Eastern Europe. An exception was research done by Penkala-Gawęcka in Afghanistan (1980, 1988a, 1988b). The situation is changing and increasing numbers of researchers choose ethnographic sites far from Poland; the most researched areas are Central Asia and Latin America. Also, urban medical studies, hospital studies and studies of health policies at the national level are slowly getting attention (Wierciński 2011; Weimann 2011). Regarding research subjects and themes, medical pluralism is certainly the most investigated (Penkala-Gawęcka 1988a, 1988b, 2002, 2006, 2010a; Kołodziejska-Degórska 2008; Kujawska 2010; Wądołowska 2003, 2007, 2010; Charyton 2011a, 2011b). Polish researchers, both anthropologists and sociologists, have also become particularly active in studying complementary and alternative medicine

3 An important event was the conference *Antropologia medyczna w Polsce – doświadczenia, pola badań, perspektywy* (Medical anthropology in Poland – experiences, field of research and perspectives) organized in Poznań in 2009. The meeting was organized by The Department of Ethnology and Cultural Anthropology at Adam Mickiewicz University in Poznań together with the Ethnographic Commission of The Poznań Society of Friends of Learning. Papers from the meeting are published in the first anthology of Polish medical anthropological texts edited by Penkala-Gawęcka (2010a). Another important event proving the strength of the environment and engagement of young medical anthropologists was the organization of MAYS (the Young Scholars Medical Anthropology) meeting in 2011 in Warsaw. The meeting was facilitated by the Section for Medical Anthropology of the Student Society for Culture Research at the Institute of Polish Culture (University of Warsaw).

(CAM) (Piątkowski 1990, 2008, 2012; Penkala-Gawęcka 1991, 1995, 2002, 2006, 2010b; Pietrzyk 2011; Kocikowski 2011; Zatorska 2010; Grzywacz 2010a, 2010b; Górny and Marczyk 1997). Other studies reflect problems or developments associated with social changes in Poland and globalization, such as stress (Charyton 2011a); the increase in HIV/AIDS cases (Sznajderman 1994a, 1994b; Krawczyk-Wasilewska 2000; Ratkowska 2005); the increase of cancer patients (Wierciński 2010, 2011); the increase in the proportion of the elderly (Szenajch 2011) and more self-care and use of alternative medicine (Trojanowska 2009; Płonka-Syroka 2009). There is also research on health issues connected to migration (Kujawska 2008, 2010; Węgrzynowska 2011) and religious minorities (Rajtar 2010, 2011). Unsurprisingly, studies of patient-doctor relations are so far being done in a comparative perspective with alternative medicine (Szlagowska 2009).

Anthropologists in Poland seem to appreciate interdisciplinary perspectives and are cooperating on publications and events with medical sociologists and medical historians, but also psychologists, biological anthropologists, medical professionals and pharmacologists.⁴ They are active in strengthening their role amongst medical professions. Another example is cooperation with the Department of Human Sciences in the Faculty of Pharmacy at Wrocław Medical University, which employs anthropologists and organises conferences with an anthropological focus.

Poland has never been a popular field of interest amongst non-Polish medical anthropologists. A notable exception is Adriana Petryna with her book on the pharmaceutical industry based on fieldwork in Poland (2009). The last few years have seen a noticeable growth in interest amongst “halfies”.⁵ The major area of studies undertaken by these anthropologists is reproductive and women’s health (Mishtal 2009, 2010, 2012; Mishtal and Dannefer 2010; Węgrzynowska 2012). Local anthropologists have also shown an interest in the subject, with empirical work from Mexico (Wądołowska 2010). Post-socialist perspectives and studies of post-socialist health care are slowly gaining attention (Owczarzak 2009; Robbins 2009; Bartoszek 2011). Here it is important to mention significant research on post-socialist health care and the transition to democracy after communism within

4 For example, interdisciplinary conferences such as *Zdrowie, choroba i leczenie w perspektywie interdyscyplinarnej* (Interdisciplinary perspectives on health, illness and healing) organized in 2011 in Będlewo by The Committee on Ethnological Sciences of the Polish Academy of Sciences and The Department of Ethnology and Cultural Anthropology, Adam Mickiewicz University in Poznań, or *Stress, nerwy, lęk* (Stress, nerves and anxiety) organized in 2012 in Poznań by The Department of Ethnology and Cultural Anthropology and Association of Students of Ethnology, Adam Mickiewicz University in Poznań.

5 According to Lila Abu-Lughod halfies are “people whose national or cultural identity is mixed by virtue of migration, overseas education, or parentage” (1991: 137). Halfie anthropologists are anthropologists who study societies and cultures to which they partially belong, sharing thus perspectives of both the native and the stranger.

the framework of qualitative sociology conducted by Peggy Watson (2002, 2006a, 2006b).

For now, medical anthropological research in Poland is a rather small contribution in comparison with global anthropology – it is fragmented and yet to find a clear structure. Polish medical anthropology does not have one dominant theoretical or analytical orientation, a factor which is not seen by us as a disadvantage. Many of the cited works are conference papers, or works not yet published or in progress. Therefore, it remains to be seen what direction Polish medical research will take, and how research will evolve with regard to theory application and development, as well as the choice of ethnographic fields and methods.

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