

ANTHROPOS

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A Matter of Health: In the November 1997 issue of Natural History, Leslie Nielsen, a nurse and former Peace Corps worker, writes about revisiting the town in the African country of Niger where she carried out her Peace Corps duties in the early 1990's. In her article, she writes about her feelings of dismay as she became reacquainted with people she had first met only a few years before. As a Peace Corps volunteer, she had promoted nutrition education out of a poorly equipped clinic which served approximately 33,000 people near the town of Safo. Things had been bad then, but now they were worse. People who had been healthy five years before were thin and complaining of sickness and hunger. When she circulated pictures she had taken earlier, she learned that about 25% of the people in them had died. Bad health was the norm; "Adults and children often died of conditions that are preventable or curable: measles, malaria, meningitis, malnutrition, polio, postpartum infection, tuberculosis." Throughout her article, Nielsen comments that to the people of Safo, she was fat. (The photographs of Nielsen that accompany the article show her to be - for an American - of average size.) "In Niger, fat connotes health and wealth, while skinniness is ugly and speaks of poverty and misery. Women have long conversations about my size. She might not have a husband, they say, but look, what great fat arms she has."

None of these circumstances is surprising to an anthropologist who has worked in the Third World, and especially in SubSaharan Africa, the poorest of the world's major geographical areas. The good health that Americans take for granted is extraordinary in many places in the Third World where disease, malnutrition, and unsanitary living conditions are rampant. The circumstances for Niger are not unusual, especially for Africa. Niger is a poor country with few prospects. Land-locked and largely desert, Niger's economy has been in decline for over 15 years. The people of Niger are not the source of many of its ills, but rather are the victims of colonialism, bad management, a degraded environment, and the uncertainties of the global economy.

Niger was at one time a French colony, part of the huge territory designated on world maps of the 1950's as French West Africa. French West Africa was about the size of the continental United States. The French clearly viewed their enormous colony as a source of labor and raw materials for the French economy. Originally

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drawn to the area by the promise of gold, the French developed a number of schemes in French West Africa to generate wealth for themselves. These included vast cotton plantations, cattle ranching, minerals development, and local trade for French merchants. During both World War I and II, thousands of French West African soldiers fought for their colonial masters in Europe and North Africa, and during periods of economic expansion in France, Africans migrated there to be cheap migrant labor in French cities. Few of these efforts directly benefited West Africans. The relationship between colonizer and colonized was extractive; French West Africa existed to produce wealth for the French. In turn, the French invested in a bare minimum of services for their colonies in order to facilitate extracting what they could - a few roads to get cotton to market or enough schools to train a few West African clerks to help record transactions in French-run businesses.

Independence came suddenly to French West Africa in the early 1960's. Beset by the expenses of rebuilding from World War II and trying to maintain a colonial empire in Algeria and Indochina by military force, the French found their huge West African colony a luxury they could no longer afford. French West Africa became divided into the nations now seen on a world map - Senegal, Mali, Burkino Faso, Chad, and Niger. None of these new nations had the infrastructure on which to build a new nation - only a bare minimum of roads, ports, communications, energy sources, and schooling. Niger and Chad were especially underdeveloped. Land-locked and largely desert, they had received the least investment during the French colonial era.

Faced with the absence both of infrastructure and resources, Niger followed the path of many new nations in the Third World in the second half of the 20th century - borrowing heavily from industrialized nations, private banks in Europe and the United States, and multilateral lending institutions such as the World Bank. The needs were great, and up until the mid-1980's, money was generally available - as loans to be repaid with interest. Like many Third World nations, Niger had a single resource on which to generate income to repay its loans, the mining of uranium. Colonizers often promoted the development of single resource economies in their colonies, such as sugar in Jamaica or cocoa in Ghana, to increase the efficiency of the extraction of wealth. If a colony produced only one resource, then only one form of raw processing, storage, and transportation was needed to get that product to a market in an industrialized country. A colony that produced multiple resources complicated costs for the colonizer. Being dependent on a single resource is like putting all of one's eggs into one basket for a Third World nation. When the demand for a resource is high in the global marketplace, the economy of a nation can soar, but if demand drops, then a country may have little to fall back on. This is what has happened to Niger. World demand for uranium underwrote its international loans in the 1960's and 1970's, but when the demand for uranium fell in the 1980's, Niger's economy went into a decline from which it has never recovered. Now, like many African nations, Niger spends two-thirds of its annual budget on debt repayment.

Rapid independence, few resources, rising expectations, and limited resources

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have often produced political instability in Africa since the 1960's. Niger is no exception. Niger is currently ruled by a military government that came into power in January 1996 after overthrowing its predecessor. This is not the first sudden turnover of power in Niger's history. The current regime, uneasy in its power, is wary of its critics and is accused of human rights violations in the international community. As a result, international aid is not as available to Niger as it once was; all U.S. funding has been cut off since the coup in 1996. In the 1990's, Third World nations are urged by economists and international development experts to move away from loans and international aid to the creation of capitalist markets: the 1990's salvation for the Third World is supposed to be corporate investment. But investors are wary of a country with as few prospects as Niger, and few industries would want to relocate there because of the absence of ports from which to move manufactured products.

As a result, Niger and its people are desperately poor. The average citizen makes about \$1 a day - far too little to afford a nutritious diet, clean drinking water and sanitation, or medical care when it is needed. The numbers on government resources are equally grim. The total budget for public health in Niger works out to an expenditure of less than a dollar per person. Public health must compete with a host of other needs for the one-third of Niger's budget that doesn't go for debt repayment. As a result, medical facilities are few and far between, and the handful of doctors in the country are concentrated in the capital city of Niamey. When Nielsen visited the clinic in which she worked in Safo, she found an overworked nurse doing interviews and paperwork on the hundreds of patients lined up for care, while a janitor administered vaccines and penicillin (donated by an international organization) with syringes that were blunt from reuse. There was no running water in the clinic, nor much else either other than a few pieces of furniture and the donated medicines. Given that penicillin was all they had, every ailment - most of which were tied to malnutrition - was treated with the antibiotic.

What few efforts are available for preventative medicine or critical care are blunted by the extreme poverty of the people. Nielsen recalls sitting in on a talk given by a public health worker on preventative steps to prevent malaria, a disease spread by mosquitos. The audience listened attentively as they were advised to use mosquito netting around their beds at night; the mosquitos that carry malaria are most active after dark. Nielsen notes that for these people, mosquito netting was an impossible expense. It is an axiom of modern health care that preventative health is cheaper than critical care, but in Niger, even as simple a measure as boiling water is near to impossible given the scarcity of firewood and the effort involved in boiling water over an open fire.

Hospital care is available in Niger, but only in a few locations that require rural people to travel great distances to obtain it. And a hospital in the Third World bears little resemblance to what Americans expect. Here is Nielsen's description of the facility that served her area: "The hospital - typical for rural Africa - is made up of tiny cement-block rooms with unscreened, unglazed windows, no ceiling fans or lights.

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Flies are everywhere; dirty bandages and used gloves are on the floor. Patients sit outside on straw mats because the rooms are too hot. When people go to the hospital, a family member must stay with them. Nurses give medicine and treatments, but not physical care and feeding. It's difficult to spare a working member of the family to accompany the sick, so people from the villages rarely go there." Indeed, one of the people Nielsen interviewed in Sofa was a man racked with what she felt was tuberculosis. He wanted to go to the hospital, and his treatment there would be at government expense, but his wife and mother were reluctant to send him. "They can't spare a healthy person to sit with him there, they say, especially with the rainy season coming and fieldwork to do."

(Students in introductory anthropology classes often ask BU anthropology faculty what anthropologists do to protect their own health in field situations in the Third World. Remember that cultural anthropologists practice participant observation, which is built on the idea that the anthropologist lives, eats, and socializes with the people being studied. The idea in participant observation is to minimize the distance between the anthropologist and the people being studied. So, the anthropologist eats local foods, drinks the local water, and sits and talks to people with a host of diseases because fieldwork requires that kind of intimacy. Nielsen writes of her own experience: "I was reckless yesterday and drank some of the unfiltered, untreated village water and was really sick all night: vomiting and diarrhea: What the hell is in the water?" Cultural anthropologists get a full range of vaccinations before they enter the field; their general good health and nutrition helps them weather diseases that debilitate or kill Third World people; and they can afford medical care in the Third World when they become sick. But cultural anthropologists in field situations in the Third World are sick often; usually anthropologists get to know all of the local health care providers on a first name basis.)

Given the constant reality of disease, the extreme poverty of much of the Third World, and the absence of either good preventative health measures or critical care facilities, increasingly community development efforts in the Third World, such as those provided by the Peace Corps, are focusing on health. At any moment, there are literally thousands of programs going on in the Third World to try and alleviate the problems of the poor; most of these are funded and staffed by people from the industrialized world. While many of these programs historically tried to raise the incomes of the poor - through the introduction of new crops or new agricultural techniques, new ways of making a living, or literacy programs - many development programs now focus on health issues. It may seem strange to an American to tackle poverty by trying to improve health, but in reality it makes a great deal of sense. The bad health of the Third World poor undermines their ability to cope with their problems. Poor health takes away work days or lowers productivity; it also undermines morale. In addition, the expenses in time and money to obtain whatever health care is available cut into already lean family budgets. (One program in Pakistan which provided the poor with sanitary latrines found health expenses dropped 85% with even the simplest sanitation; previously peoples used buckets or the streets for

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wastes.)

It is also the case that development workers find that health care is one area where they can make a real difference. The economic conditions of Third World nations will not change overnight, and there is little a single rural development effort in one village can do about national debt repayment or the absence of national resources. Nor can development workers change the governments of the Third World to make them more stable, more democratic, or more open to the needs of the poor. Many well-intentioned development programs end up failing because there is no road or transportation to take a new product to market or no local expertise or replacement parts to support a new technology. But some simple health measures can usually be introduced without too much trouble. An example is Oral Rehydration Therapy (ORT), a program designed to cope with infant diarrhea and mortality in the Third World. Already ill or poorly nourished infants die from dehydration from diarrhea; this is a constant fact of life in the Third World. But ORT, a small packet of salts and sugar, costing 2 to 3 cents apiece, when added to water and given to an infant prevents dehydration. Because of efforts by the United Nations, ORT is routinely available in most areas in the Third World. It is easy to use, and it undercuts the high infant mortality rate. It can be a small success in the lives of the poor.

Not unexpectedly, anthropologists are often involved in putting together health care programs for the poor. Anthropologists give advice to development agencies on how best to approach a community's health problems or how to overcome reluctance on the part of a community. A group of people may balk at a health program because it interferes with some local practice or belief. For example, one development program in Central Africa found that people refused to cut down brush near a waterway that hosted tsetse flies and other animals that serve as vectors for disease. Research by an anthropologist found that people believed that the spirits of their ancestors lived in that same brush and they would be angered by losing their homes. Knowing this information, a compromise solution could be worked out. Anthropologists can often increase compliance with a new health initiative by making the initiative more compatible with the local culture.

Culture Contact in Mesoamerica: Prehistoric and traditional cultures did not live in splendid isolation, ignorant of everyone around them. Rather, most engaged in some degree of trade with their neighbors. In some cases, archaeologists find evidence of far-flung trade networks. Work in North America occasionally finds abalone shell from the Pacific coast, raw copper from the Upper Peninsula of Michigan, or obsidian from Mexico hundreds or thousands of miles away from its place of origin. In many cases, this was small-scale, person-to-person trade, but in some areas, such as Mesoamerica, trade was often in the hands of merchants who sometimes traveled great distances to bring goods from one community to another.

In the November/December 1997 issue of *Archaeology*, Patricia Rieff Anawalt examines evidence for long distance trade 1500 years ago between what is now

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western Mexico and coastal Ecuador. A distance of 2400 miles separates the two areas by sea (distances by land would be even greater), yet archaeological evidence from western Mexico suggest a number of Ecuadorian influences. Anawalt looks at similarities in dress, ceramic design and technique, tomb architecture and mortuary offerings, and the distribution of the Mexican hairless dog as evidence of trade contact.

Anawalt notes that the preColumbian people of West Mexico dressed in a fashion distinctly different from other Mexican cultures. Using the Tarascans as an example, she writes "Whereas other Mesoamerican men wore rectangular capes and long, wraparound loincloths, Tarascan men wore short breeches and tunic-like shirts, often decorated with checked patterns. Most Mesoamerican women wore long wraparound skirts and enveloping tunics known as huipils, or modest shoulder-shawls called quechquemitl, while Tarascan women dressed in tight, short, checkered skirts worn with or without a tiny mantle over the shoulders." She notes that the Tarascans live in a mountainous terrain at 6800 to 8700 feet which is quite cold; their clothing seems inappropriate to the weather., but is shared with other cultures in West Mexico. Anawalt points out that ceramic figurines from the Manabi Province of Ecuador are depicted in very similar costumes, right down to the patterning on the material.

Those ceramic figurines come from mortuary deposits from several sites in western Ecuador. The figures are large hollow depictions of both men and women, and they are characteristically found at the bottom of deep shaft tombs found in both Ecuador and Peru. The same kinds of figurines and tombs are also found in West Mexico, where the tombs in particular have been regarded in Mexican archaeology as anomalies. (Another article by Robert Pickering about the shaft tombs of West Mexico is in the same issue of the magazine.) The presence of the Mexican hairless dog, a creature with a very distinctive appearance that was bred as a food animal, in both areas is also very interesting and suggests again some degree of contact between the two areas.

When the Spanish arrived on the western coasts of Meso- and South America, they found Ecuadorian merchants sailing the coastline in balsawood craft made with movable centerboards and rigged sails and trading woven cloth for exotic shells. Shells may seem an unusual trade item, but Andean cultures, such as the Inca, placed great significance on shells as ceremonial items, especially those of the spiny oyster, Spondyls princeps. These are distinctive shells with spiky, scarlet exteriors and porcelain-white interiors. In Andean cultures, important religious and/or political leaders wore spondylus shells when living and were buried with them when they died. Powdered spondylus shells were sprinkled in the path where the ruler was to walk, a literal red carpet. Unfortunately for Andean cultures, the spiny oyster does not live in the cold, coastal waters of Peru; rather it is found in warmer water to the north, including the coasts of western Mexico. Anawalt believes that what the Spanish saw in the 16th century was going on in earlier centuries as well: Ecuadorian traders using their sea-worthy craft to move and up down the coast of western America, trading cloth for goods.

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She additionally believes that the reason the people of West Mexico adopted a style of dress that seems inappropriate for their climate also has to do with that trade. In preColumbian times, cloth in Mexico was made primarily from the fibers of plants such as yucca, palms, and cotton. Ecuadorian traders presumably could have offered cloth woven from the hair of Andean camelids, such as llamas or alpacas. These woolen garments not only would have had the allure of the exotic, but also dyes take better and last longer on them. And as anyone who has ever had an alpaca sweater can testify, these fabrics are both soft and warm. Thus, trade over 2400 miles would have been desirable for all concerned.

Anthropology Club News: In November, the Anthropology Club has sponsored talks by two different anthropologists, one an archaeologist, and the other a specialist in biocultural anthropology. On November 11, Professor Brian Peasnall spoke to the group about an archaeological site he has worked on in southeastern Turkey called Hallan Cemi. Professor Peasnall is replacing Dr. Wymer this semester while she is on sabbatical. The Hallan Cemi site has the potential for completely changing the way archaeologists look at the history of agriculture in the Middle East. Before the work in Turkey, archaeologists were convinced that agriculture developed slowly in the Fertile Crescent area of the Middle East as hunter-gatherers first began to focus more on collecting wild grains as food and then settled down to cultivate wheat; sheep and goats were thought to be the first domestic animals. But at Hallan Cemi, a permanent village dating back to 10,500 years ago, people settled down before they developed grain agriculture. There was a complex mixed economy based on collecting wild plant foods - and domesticating pigs. Thus, here is a site out of the Fertile Crescent without grain agriculture in its early sedentary stages with an emphasis on the pig as the first domesticated animal - a stunning three part counterpoint to earlier theories.

Professor Peasnall presented slides of the site and talked about its significance. He also talked about the difficulties of conducting research in an area without any modern facilities - and in a war zone, to boot. Indeed, archaeological research at Hallan Cemi has stopped because of the on-going civil war between the Turkish government and Kurd separatists in that region. Work at Hallan Cemi is also frustrated by the fact that the Turkish government plans to build a dam which will flood the site. But other sites in southeastern Turkey are also plentiful - if they are safe to work. Professor Peasnall, who is using his work in Turkey towards his Ph.D. at the University of Pennsylvania, is quoted in a New York Times article about archaeology and Hallan Cemi as saying, "There's a lot of monotony and drudgery. But each shovelful is part of the missing link. That's where the romance is - in uncovering something that has not been seen in 10,000 years. That's the part I love about it."

On November 18, Dr. Sunil Khanna of Oregon State University will present a lecture on his research on female infanticide and gender discrimination in India. Dr. Khanna is a research associate of Professor Warner's, who taught at OSU before coming to Bloomsburg. In fact, he will be in the area to work with Professor Warner on a joint presentation on child anthropometry and gender discrimination that they will

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make at the annual meetings of the American Anthropological Association in Washington, D.C., Nov. 19-23. Professor Warner collected anthropometric data on children in the refugee camp in which she worked in southern Mexico, and she will integrate her data with Dr. Khanna's from India. (Anthropometry is the taking of body measurements for comparative purposes across populations.)

The Anthropology Club is also preparing to host the induction ceremonies for Lambda Alpha, the national honorary in anthropology, on December 6. Contact Kelly Wiggert or Professor Warner for details.

The Jane Goodall Institute: Jane Goodall is famous for her research on chimpanzees in the Gombe River Reserve in the East African nation of Tanzania. Beginning in 1960, Goodall and her associates have recorded reams of data about the Gombe chimps, including the first-ever recorded sightings of chimpanzee tool use and of chimpanzee hunting and sharing meat. Through her many books and talks, Goodall has become a well-known global figure; some of her subjects, such as the chimp, Fifi, are almost as well known. For the last several years, Goodall has been focusing her time on promoting chimp conservation through the Jane Goodall Institute, a non-profit organization intended to promote research, fund conservation efforts, and, through its Roots & Shoots children's program, produce new generations of environmentally conscious and responsible people.

One of the main purposes of the Institute is to provide funding for a number of chimpanzee refuge centers in central and eastern Africa. As noted in an article in ANTHROPOS last January, chimpanzees are routinely hunted in Africa either as food or to sell to zoos or for pets. In either case, hunters kill adult females with infants. The infants are often kept alive as pets or in the hopes of selling them. The young chimps languish in human care, poorly nourished and poorly cared for. Many die, but those who live become unruly as they grow older. If they are not killed then, they are placed in cages with little care or they are abandoned. The Institute has dedicated itself to rescuing these chimp babies and caring for them properly. Generally, this means lifetime care, since the babies do not have the skills to provide for themselves in the wild. Institute refuge centers are now bursting with abandoned or rescued chimps, and the Institute needs money to maintain them.

Students may join the Institute for a donation of \$25. In return, the Institute provides a quarterly journal and opportunities to get involved in Institute activities. The most recent issue of the journal has a tribute to Fifi by Goodall and reports on poaching in the Gombe reserve by refugees from the civil wars in Rwanda and the Congo. Dr. Minderhout is a member of the Institute; see him for further details.

BU Anthropologist News: Both Dr. Sue Dauria and Professor Faith Warner will be making presentations at the national meetings of the American Anthropological Association in Washington, D.C. from November 19-23. As noted, Professor Warner

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will be co-presenting her research on child anthropometry with Dr. Khanna, while Dr. Dauria will be presenting her research on architecture and social history in a New York deindustrializing city in an invited poster session sponsored by the Society for Urban Anthropology. A number of BU anthropology majors will also be attending the conference.

Professor Warner has been notified that a book for which she has submitted a chapter will be published by Rowman & Littlefield Publishers. The book will be titled Power, Ethics & Human Rights and will be edited by Ruth M. Krulfield and Jeffrey L. MacDonald.

Dr. Wymer made a presentation on the Streater Site to the local chapter of the Society for Pennsylvania Archaeology in Williamsport on November 11.