MODULE SPECIFICATION

Academic Year (student cohort covered by specification)	2026-27
Module Code	1802
Module Title	Medical Anthropology and Public Health
Module Organiser(s)	Simon Cohn, Justin Dixon
Faculty	Public Health & Policy
FHEQ Level	Level 7
Credit Value	**CATS:** 15 **ECTS:** 7.5
Term of Delivery	Term 2
Mode of Delivery	This module will be delivered predominantly by face-to-face teaching modes. It will combine live and interactive activities (synchronous learning) as well as recorded or self-directed study (asynchronous learning). Where specific teaching methods (lectures, seminars, discussion groups) are noted in this document, it should be assumed that these will be delivered face-to-face unless further details are included.
Mode of Study	Full-time
Language of Study	English
Pre-Requisites	None
Accreditation by Professional Statutory and Regulatory Body	None
Module Cap (Indicative number of students)	60
Target Audience	Any MSc student regardless of specialisation and previous training.
Module Description	This module offers an introduction to the concepts, perspectives, theories and methods of medical anthropology and how these can be applied to contemporary public and global health concerns. The module will equip students with an understanding of how medical anthropology can both complement other forms of other health research and offer critical commentary of it.
Duration	5 weeks at 2.5 days per week

Timetabling slot	D1
Last Revised (e.g. year changes approved)	August 2026

Programme(s) This module is linked to the following programme(s)	**Status**
MSc One Health: Ecosystems, Humans and Animals	Compulsory
MSc Public Health	Recommended
MSc Control of Infectious Diseases	Recommended
MSc Health Policy, Planning & Finance	Recommended
MSc Public Health for Global Practice	Recommended

Module Aim and Intended Learning Outcomes

Overall aim of the module
The overall module aim is to: • Provide an introduction to concepts, perspectives, theories and methods in medical anthropology, and illustrate their relevance to public and global health issues.

Module Intended Learning Outcomes
Upon successful completion of the module a student should be able to: 1. Demonstrate an analytical understanding of a range of concepts, principles and definitions used in medical anthropology; 2. Apply these concepts and principles in the analysis of particular public and global health issues; 3. Evaluate the role of anthropological inquiry and analysis in public and global health arenas; 4. Critically evaluate, from an anthropological perspective, epidemiological, medical and public and global health approaches.

Indicative Syllabus

Session Content
The module is expected to cover the following topics: • The role(s) of anthropologists in responding to public and global health issues. • Anthropological conceptualisations of biomedicine, public and global health, including those around illness and disease, risk, structural violence, biopower, colonial legacies, health citizenship, and scepticism of biomedical expertise. • Introduction to anthropological methods, especially ethnography; what their strengths and weaknesses are, and how to apply these to issues in public and global health.

Teaching and Learning

Notional Learning Hours

Type of Learning Time	Number of Hours	Expressed as Percentage (%)
Contact time	40	27%
Directed self-study	38	25%
Self-directed learning	31	21%
Assessment, review and revision	41	27%
Total	**150**	**100%**

Student contact time refers to the tutor-mediated time allocated to teaching, provision of guidance and feedback to students. This time includes activities that take place in face-to-face contexts such as lectures, seminars, demonstrations, tutorials, supervised workshops, practical classes, project supervision as well as where tutors are available for one-to-one discussions and interaction by email.

The division of notional learning hours listed above is indicative and is designed to inform students as to the relative split between interactive and self-directed study.

Teaching and Learning Strategy
The module is delivered through lectures (11 contact hours), seminars (15 contact hours), two discussion sessions (3.5 hours), four 'conversations with anthropologists' sessions (6 hours), one session 'tutor group feedback on methods exercise' (1.5 hours), one "essay discussion" session (1.5 hours), and one session 'tutor drop-in on essays' (1.5 hours). The module also requires careful reading of key texts listed in the module session outlines. Essential references (1-2 per lecture topic, to be read in advance) and additional references are provided via Moodle. Further readings are listed for those interested for each topic, and for the module overall. **Lectures:** The lectures will introduce key concepts and debates in contemporary medical anthropology, illustrating their relevance and application through examples from anthropological research in the fields of public health and medicine. **Seminars:** The seminars encourage discussion around the issues raised in the lecture and associated readings. Some entail practical exercises, where students will work with other resources that highlight central themes from the lectures and readings. **Additional sessions:** A range of additional sessions have been put together to introduce students to different elements of Medical Anthropology practice, through such things as film, 'conversations' with a range of anthropologists, and engaging with Research Students who are just embarking on their careers.

Assessment

Assessment Strategy
The assessment for this module has been designed to measure student learning against the module intended learning outcomes (ILOs) as listed above. The grade for summative assessment(s) will go towards the overall award GPA. The module will be assessed through a take home essay-based assignment (100%) to be submitted at the end of the module. Students will be required to write a 2,500 word essay on a subject chosen from a range of questions based on the topics covered in the module to demonstrate their learning and a critical appreciation of the discipline.

Summative Assessment

Assessment Type	**Assessment Length** (i.e. Word Count, Length of presentation in minutes)	**Weighting** (%)	**Intended Module Learning Outcomes Tested**
Essay	2500	100%	1, 2, 3 & 4

Resitting assessment
Resits will accord with Chapter 8a of the LSHTM Academic Manual

Resources

Indicative reading list

Farmer, P. 2004. An Anthropology of Structural Violence. Current Anthropology 45(3): 305–325

Singer, M. et al. 2017. Syndemics and the Biosocial Conception of Health. *Lancet* 389:941-50

Keller, Richard. 2006. Geographies of Power, Legacies of Mistrust: Colonial Medicine in the Global Present. *Historical Geography* 34: 26-48

Bosire, E. et al. 2018. When Diabetes Confronts HIV: Biological Sub-citizenship at a Public Hospital in Nairobi, Kenya. *Medical Anthropology Quarterly* 32(4): 574-592

Adams, V. 2016. *Metrics: What Counts in Global Health*. Durham: Duke University Press.

Brown, H. and A.M. Nading (2019) Introduction: Human Animal Health in Medical Anthropology. *Medical Anthropology Quarterly* 33(1): p. 5-23

Steffens T.S., Finnis E. 2022. Context Matters: Leveraging Anthropology within One Health. *One Health* 14: 100393

Stellmach, D. et al. 2018. Anthropology in Public Health Emergencies: What is Anthropology Good For? *BMJ Global Health* 3(2): e000534.

Wilkinson, A. and Fairhead, J. (2017). Comparison of Social Resistance to Ebola Response in Sierra Leone and Guinea Suggests Explanations Lie in Political Configurations Not Culture. *Critical Public Health*, *27*(1), pp.14-27.

Kirk, T., Green, D., Allen, T., Carayannis, et al. (2021). Crisis Responses, Opportunity, and Public Authority during Covid-19's first wave in Uganda, the Democratic Republic of Congo, and South Sudan. *Disasters*, *45*, pp.S195-S215

Leach, M. et al. 2022. Vaccine Anxieties, Vaccine Preparedness: Perspectives from Africa in a Covid-19 Era. *Social Science & Medicine* 298:114826/

Dwyer H, Enria L, Beckmann N & Leask J. (2025). Trust and the infodemic: reframing information threats in the realm of public health. *Critical Public Health*, 35:1, 2535084.

Teaching for Disabilities and Learning Differences

The module-specific site on Moodle gives students access to lecture notes and copies of the slides used during the lecture. Where appropriate, lectures are recorded and made available on Moodle. All materials posted on Moodle, including computer-based sessions, have been made accessible where possible.

LSHTM Moodle is accessible to the widest possible audience, regardless of specific needs or disabilities. More detail can be found in the Moodle Accessibility Statement which can also be found within the footer of the Moodle pages. All students have access to "SensusAccess" software which allows conversion of files into alternative formats.

In addition, if notified prior to commencement of teaching, the Module Organisers will take whatever steps may be deemed reasonable in order to accommodate an individual student's needs. Student Support Services can arrange learning or assessment adjustments for students where needed. Details and how to request support can be found on the LSHTM Disability Support pages.