

"No hay drama:" Precarity, Illness and Neglect among Female Mental Health and HIV-Aids Patients in Northern Santiago, Chile.

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Lampa

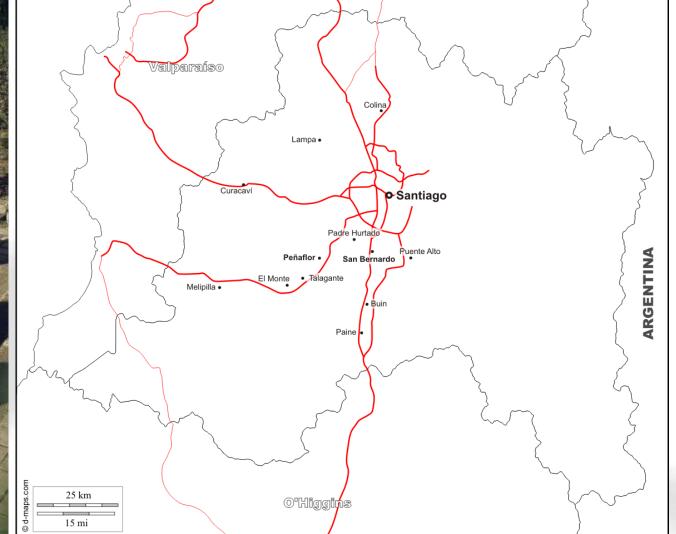
- Chilean municipality and city in the Chacabuco province, Santiago Metropolitan Region (Elevation 1,627 ft.)
- Area 451.9 km² (174.5 sq mi)
- Population: 40.228 (2002) 79.397 (2012).
- 9% under poverty line (CASEN 2013)
- 24% households live in conditions of medium overcrowding (2,5 a 4,9 persons per dormitory).

Materials and Methods

Ethnographic work was conducted in Lampa during August and September of 2016 with the Chile Global Health Field School and included 25 in-depth interviews, participant observation, and 140 surveys focused on illness experience, subjective well-being, and community engagement.



Source. Red Nacional de Pueblos Originarios en Respuesta al VIH/Sida – Chile.





Centro de Orientación de Salud Mental (COSAM), Lampa.

Qualitative Interview Excerpts

Stress affects you in general, in addition to particular points in your body. It affected my energy (ánimo), having so many illnesses is tiresome. I don't need so many pills anymore, but [I need] a body that works. I have hypertension, diabetes, thyroids cancer, I mean, I don't have thyroids anymore, uterine fibroids, arthritis (Adult woman, COSAM patient diagnosed with depression,, member of "Construyendo Futuro").

Society is not ready for this information...[others] are not educated on the disease, because for me, HIV is just like other diseases, is a **natural** disease, but for others it is not [natural] (Adult woman, COSAM patient diagnosed with depression and HIV).

I felt that my energy (ánimo) had declined, I became ill-tempered and the back pain was killing me. I would get angry at my partner, everyday...we would fight and I didn't know what was happening... [sadness] afterwards I realized how bad is to be overworked (Adult woman, Patient of the Mapuche intercultural health center).

Results

Cultural epidemiology of depression in Lampa shows that it is an embodied experience linked to everyday forms of precarity: "the life of the poor."
Linguistic devices such as "dramas" and "stress" tend to invisibilize pain, suffering, fear, and/or anguish.
Meanings of illness and healing in this particular territory obscure the "reality" of imaginary suffering and focus on those illnesses of the body that are rendered as "natural" and socially accepted.
Representations of illness and suffering are dynamic, and subject to change and transformation due to processes of accelerated urbanization, economic change, and migration that are re-shaping Lampa's everyday life.

Conclusion

Diagnosed patients lived illness experience is linked to broader sociopolitical processes (struggles for ethnic *reinvidication* and citizenship) and to social conflicts that emerge from accelerated international migration in Northern Santiago.

References

Bourdieu, P.,& Wacquant, L. J. (1992). *An invitation to reflexive sociology*. University of Chicago press.

Butler, J. (2006). Precarious life: The powers of mourning and violence. Verso.

Csordas, T. J. (1994). Embodiment and experience: The existential ground of culture and self. Cambridge University Press.

Jenkins, J. H. (2015). Extraordinary conditions: Culture and experience in mental illness. University of California Press.

World Health Organization (2017). Depression and Other Common Mental Disorders: Global Health Estimates. Geneva: World Health Organization. Licence: CC BY-NC-SA 3.0 IGO.

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