

TALK

HUMAN LIFE HISTORY SHAPES THE CONSTRUCTION OF LOCAL MEDICAL SYSTEMS ACROSS THE LIFESPAN

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ABSTRACT

In this investigation, we explore theoretical predictions from Life History Theory, Grandmother Hypothesis, and Embodied Capital Theory for understanding the role of human life history on the construction of local medical systems - a human strategy developed to respond pressure imposed by diseases in our species. The fieldwork was conducted in a small rural mixed subsistence community (03°29'48.8"S and 41°26'19.5"W) in northern Piauí, Northeastern Brazil. The local population is structured by 103 individuals in 30 family units. We applied the free listing technique, semi-structured interviews, photographic checklist, and direct observation to gathering data from 90 research participants. We assessed whether life history shapes knowledge about medicinal plants (H1), and also investigated whether there is a set of plants and therapeutic targets strongly associated with the reproductive and post-reproductive stages (H2). For testing H1 and H2, we performed a Permutational Analysis of Variance-PERMANOVA, and Indicator Species Analyses-ISA, respectively. Our findings suggest that life history shapes knowledge about medicinal plants. In this way, there is a set of medicinal plant knowledge appropriate to each life stage. Our findings also show that there is a set of plants and therapeutic targets strongly associated with the reproductive and post-reproductive stages, when pressures on health care increase mediated by diseases, both at the individual and offspring level. Our insights suggest that life history is a key factor of human behavior associated with building local medical systems across the lifespan.