

Anthropology of Health, Care and the Body

Sociology and Anthropology

Programme leaders

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Refer to

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Scope and position of the programme

The theoretical climate in the program is strongly influenced by the idea of the socio-cultural construction of reality. Experiencing and defining illness, health and well-being, enacting and attaching meaning to body and sexuality, and producing medical knowledge and practice are the outcome of social transactions and cultural transmissions. The research cluster has an interdisciplinary character, including researchers working in the fields of medical anthropology and sociology, postcolonial, gender and sexuality studies, and the social studies of (bio)medical science and technology. This work addresses a broad range of topics, including research on AIDS/HIV, the body and food, morality, reproductive health, children, crime, pharmaceuticals, genetics, medical technologies and practice.

General objectives

Three general objectives of the program are:

1. Investigate in comparative perspective changing experiences of health and well-being, sexual identities and body regimes,
2. Identify and analyze the social and cultural factors involved in the construction of scientific knowledge in medicine, and their influence in the way in which such knowledge is put to practice in clinical settings, care and self-help practices.
3. Identify the exercise of biomedical power and study the patterns of resistance to and acceptance of medical regimes and scientific knowledge and technology.

The strength and sustainability of the cluster is reflected in an increased number of researchers, research projects, partner institutions and funding sources. External funding adds to the university support for the research program and strengthens the empirical and comparative scope of the research program.

Subprograms

The current research within this cluster can be divided into four strongly related sub-programs, indicating collaborations between scholars across these sub-programs.

1. Globalization and the science and technologies of health policies and practices

The focus of this sub-program is on the production, distribution, deployment and consumption of biomedical knowledge and the technologies; both in clinical and in everyday settings. It also studies related processes of change in health care, both over time and from culture to culture. To strengthen this goal a close collaboration has been established between this program and the Center for Global Health and Inequality (a shared initiative of the Anthropology of Health, Care and Medicine Cluster [formerly the Health, Care and the Body Cluster] and the IIAS). The program takes as point of departure that developments in technoscience are bringing about radical transformations in contemporary health care and society at large. Health policy makers are seeking ways to assess the financial, organizational, and ethical implications of new medical technologies, which promise increased longevity, bodily perfection, of reduced risk of illness or impairment - and therefore capture mass media attention and are in high demand. These new technologies reinforce an increasingly dominant individualism, leading to higher demands on medicine. Medicine itself is thereby becoming both unsustainable and increasingly inequitable.

At present medical care for HIV infected persons and AIDS/HIV research are central to this sub-program. The program as a whole focuses on four specific kinds of technologies: *pharmaceuticals, vaccines, reproductive and genetic technologies.*

2. Young people's health and well-being

The aim of this program is to develop the field of child and youth health from an anthropological perspective. Central to the projects in this program is a focus on young persons as social actors and on their own understandings and actions concerning health and well-being in the context of their lives. Children and youth are typically understood as vulnerable and in need of care and especially adolescents are viewed as aggressive and in need of disciplinary measures. In this sub cluster we explore a different route in which we focus (from a generational perspective) on the productive and constructive contributions of young persons to

their health and the care for themselves and for others. Theoretically the sub-program critically analyses the applicability of concepts and theories developed in adult-centered social science that relate to discussions on agency and structure, competence and the development of cognition, and issues of vulnerability, accountability and power. Methodologically, important themes in this sub-program are the development of cross-culturally applicable methods suitable for qualitative research with children and youth of different ages.

3. Anthropology of crime and violence

This research program is concerned with the phenomena of crime and violence. It departs from the idea that neither violence nor criminal behavior is a natural or innate quality that resides in individuals. Rather as lived realities and as objects of scientific research crime and violence are products of complex socio-cultural relations and scientific and medical interventions. The program has two strands, one is centered on *crime*, crime prevention and detection, and the second is concerned with *violence*, the context of violent behavior and the subjects and objects of violence. The first line of research is concerned with technologies, such as forensic technologies, surveillance technologies and technologies and practices aimed at the medicalisation of criminal behavior. The second aims to enhance understanding of violence, including insight in the prevalence and nature of the violence and its consequences, within historical, social and cultural contexts. Both strands of the program are concerned with the production of sexual and racial subjectivities and the normativity and morality of the practices studied.

4. Postcolonial bodies and subjectivities

The postcolonial in this sub-program refers both to a historic trajectory in the relation between "centers" and "peripheries" or "north" and "south", and to epistemic changes that had taken place in our understanding of "the subject". This subject is embodied and located in time and space, it is an object of power and power relations, it is an effect of technologies such as medical technologies. In short the subject is a configuration of complex relations that can lead to its racialisation, sexualisation, social location in terms of class, or yet a different ordering. Within this sub-program comparative research is being conducted on embodied experiences, the diversity in the configurations of (dis)abled and ageing bodies and the technologies and practices affording them. It does so in different research, such as research pertaining to illness, health care, medicines, sports, crime, beauty, dance and food. Rather than contributing to a coherent rendering of the body and health, each of these research fields has its specific discourse and practices with equally varied contributions. In addition, special attention is paid to the construction of racial, sexual and gendered identities. These and related categories are investigated in varied research e.g., the history of medicines, research on chronically ill patients (e.g. sickle cell anemia), queer and gay research, studies of sexuality in relation to HIV transmission, research on trans-gender and trans-sexuality, research on crime and criminal identification, research on the biomedical production of the family.

The four subprograms show partial overlaps between research methods and topics, contributing to a synergy between the researchers and their current and future projects.