

News

Call for Papers

Symposium ‘Rethinking Biosocialities in Medical Anthropology’ Amsterdam, 17-19 January 2013

In 1992, Paul Rabinow, an anthropologist conducting research on the social implications of the Human Genome Project, first used the term biosocialities to draw attention to the a wide range of emergent socialities produced in the context and as a result of genetic research. Rabinow rightly predicted that the mapping of the human genome would lead to a remaking of social life, as people began identifying and socializing as genetic beings; but it was not just the social that would change. At stake was the very definition of life itself. As Gibbons and Novas summarized: “What was significant about this project, from the perspective of the social sciences, was that the potential to know, remake and to create new life forms brought into question long established ideas about what counts as natural” (2008: 3). In other words, genetic research would challenge the boundary of nature and culture in a way that would have profound effects on society and social life, the very subjects of social scientific research, including medical anthropology.

At the time, it seemed the social sciences were waiting for such a concept to help frame research situated at the interstices of science and nature. In the twenty intervening years since the concept was introduced, a plethora of studies have taken it up and applied it to examine and theorize the way genetic research has transformed the way humans think about life, nature and culture. Others have realized the usefulness of the term for framing research beyond the field of genetics, examining the way other sciences including biological, medical, and public health, have also contributed to the remaking of culture and society through a wide range of theories about what it means to be human, and tools and techniques to facilitate the remaking of identity and sociality.

More information and further announcements can be downloaded from www.medical-anthropology.nl under ‘Symposium Rethinking Biosocialities’.

During this three-day symposium, we propose to revisit Rabinow’s concept, to take stock of where we are now – twenty years on – in the field of medical anthropology. We invite papers along four themes:

- Genes, race and health
- The environment, food and wellbeing
- Reproductive technologies, life and the practice of science
- The biopolitics of HIV.

Those interested in participating in the symposium should submit a title and 250 words abstract by 30 September 2011 to the conference conveners, Eileen Moyer (e.moyer@uva.nl) and Vinh-Kim Nguyen (vinhkim.nguyen@gmail.com). In your abstract, please indicate the panel you would like to join. Full-length papers (6,000 words max) are due 1 January. Selected papers will be considered for publication in a June 2013 special issue.

The exact form of the symposium and information on registration will be announced later. For the time being, use Eileen Moyer's e-mail for all communication (e.moyer@uva.nl) with cc to Sjaak van der Geest (s.vandergeest@uva.nl).

Prestigious Spinoza Prize for Annemarie Mol

The Netherlands Organisation for Scientific Research (NWO) has awarded the Spinoza Prize, the highest scientific honour in the Netherlands, to Annemarie Mol, Professor of Anthropology of the Body at the University of Amsterdam (UvA). She will receive 2.5 million euros to spend on research of her choice.

The NWO awards the Spinoza Prize on an annual basis to a maximum of four Dutch researchers who rank among the best scientists in the Netherlands and the world. The prize is a tribute to what these researchers have achieved in their careers. Moreover, the prize serves as an incentive for further research. In addition to Annemarie Mol, three other scholars will also receive the prize.

In her research, Annemarie Mol combines philosophy, medical sociology, anthropology and science and technology research. She looks at everyday practices from an anthropologist's perspective and thus challenges entrenched ways of thinking. How do we talk about disease and what should we do with it? What is worry? What does it actually mean to eat? Her approach to these questions has inspired researchers around the world, especially in the field of social sciences.

She attends to the sociomaterial situatedness of bio-knowledge and the biological registers incorporated in social science theories. As a part of that, she explores the practices in which knowledge is being made and mobilised as well as the languages in which it travels. Anthropological field work and philosophical reflection thus come to inspire each other. In the past, she worked on the way biomedicine coordinates different versions of its objects, for instance 'anaemia' or 'atherosclerosis'; and then tried to lay out the tinkering character of the process of care. Now, in the project 'Eating bodies in Western practice and theory', she explores all kinds of eating practices – from those of people who joyfully or guiltily gobble up their chips, to those of worms

for whom moving and eating are not contrasting activities, but rather activities that are done together. She studies sites such as dumpsters, ordinary kitchens and meetings where nutrition scientists discuss global hunger. Along the way, she wonders what in all these practices is being made of 'eating', 'needs' 'desires', 'children' or 'vegetarians'. In order to be able to do so, she brackets what is ordinary known about such issues. She also explores how some things get appreciated as good while others are being discarded as bad. She uses field work stories so as to interfere in theoretical discussions – about the human body and its boundaries, about knowledge, pleasure, and language. The Spinoza premium will allow her to continue shifting, changing and reinventing the Western theoretical tradition.

Annemarie Mol has published books and articles on various subjects. Her book *The Body Multiple* (2002, Duke University Press) presents a detailed ethnographic description of hospital practices, in which 'the body' figures as an 'actor enacted' that takes on a variety of shapes in a variety of practices. In *The Logic of Care* (2008, Routledge), she describes how the ideal of 'choice' collides with the reality of living with a sick body. In *Care in Practice* (2010, Transcript), she worked together with two colleagues in order to rethink the link between care and technology so that they could be analysed together. In 2009, she was awarded an ERC Advanced Grant for research titled 'The eating body in Western practice and theory'.

[sources: Website University of Amsterdam and personal e-mail]

In Memoriam Ingrid Baart 1952-2012

Op 18 januari 2012 overleed, op bijna 60 jarige leeftijd, Ingrid Baart. Ingrid studeerde psychologie en werkte na haar afstuderen in allerlei functies die gekenmerkt werden door de gemeenschappelijke noemer van het perspectief van de patiënt. Zo werkte zij o.a. bij het vrouwengezondheidscentrum Aletta en bij Patiëntenpraktijk.

In 2002 promoveerde zij bij de Universiteit van Humanistiek op een proefschrift getiteld 'Ziekte en zingeving: Een onderzoek naar chronische ziekte en subjectiviteit'. In dit onderzoek ontwikkelde Ingrid een manier van denken over de zin en betekenis die mensen met een chronische ziekte geven aan hun leven. Met behulp van het begrip 'narratieve identiteitsvorming' beschrijft zij een drietal genres waarbinnen lichamelijke, psychische en sociale factoren zich vermengen tot unieke zingeving, genres die verbonden zijn met drie kwesties in het leven met een chronische ziekte: autonomie, lijden en erkenning.

In 2005 kwam zij als universitair docent in dienst bij de afdeling Metamedica van het VU Medisch Centrum. Daar gaf zij op gedreven wijze onderwijs en werd zij in 2010 ook onderwijscoördinator van de afdeling. Zij ontwikkelde onderzoeksprojecten die in lijn met haar eerdere werk weer nieuwe gebieden ontsloten, met name op het gebied van de betekenis van genetische kennis in de psychiatrie en op het gebied van disabilitystudies.

Ze was nog veel van plan, want na een lange weg had ze haar plek gevonden. Maar een korte en heftige ziekte heeft het zelf uitvoeren van die plannen op een voor iedereen verbijsterende wijze onmogelijk gemaakt.

Arko Oderwald