



Sites of Health: A Symposium on the Medical Humanities

25-27 April 2019

Daxue Hall, New Lehu Hotel, Shanghai University

Hosts

The David F. Musto Center for Drug Policy Studies (MCDPS), Shanghai University; and

The Centre for the Social History of Health and Healthcare (CSHHH) Glasgow, University of Strathclyde.

Organised with the generous support of the Wellcome Trust.

Thursday, 25 April 2019

14:00 – 17:00 Registration and hotel check-in

18:00 Welcome Dinner (meet at New Lehu Hotel lobby)

Friday, 26 April 2019

08:30 – 09:00	Registration		
09:00 – 10:05	Welcome Professor Yong-an Zhang, Shanghai University		
	Opening Keynote Professor Shujian Zhang, Shandong University of Traditional Chinese Medicine 'Technological and Political Function of Acupuncture in the National Discourse System of China: Taking <i>People's Daily</i> as the Center (1946-1986)'		
10:05 – 10:40	Coffee Break and Photo		
10:40 – 12:30	Panel 1 Hong Kong: Case Studies Chair: Professor Fangxiang Min, Nanjing University		
	Chris Wemyss	University of Bristol	'Lingering in the Mind': The Hong Kong SARS Outbreak and Memory in Medical Humanities
	Chi Chi Huang	University of Hong Kong	The Medical Ecology of Colonial Hong Kong
	Maxime Decaudin	Sorbonne University, Paris	Nature and the Colonial Project: Environmental Anxieties and Scientific Discourses in Nineteenth Century Hong Kong
	Frederick Stephenson	University of Nottingham/ Shanghai University	Model Settlement or Warning Sign? Hong Kong's Health Under the Gaze of Treaty Port Shanghai

12:30 – 14:00	Lunch		
14:00 – 15:50	Panel 2 Health Environments and Infrastructure: From Socialist Medicine to Postcolonial States Chair: Dr Alex Mold, London School of Hygiene & Tropical Medicine		
	Katarzyna Jarosz	International University of Logistics and Transport in Wroclaw	The Development of Museums of Medicine in Post-Soviet Countries and their Contribution to the History of Medicine
	Liu Shasha	Nanjing University	The Shape of Shipboard Space Under Naval Medicine in the Eighteenth Century
	Rebecca Le Get	La Trobe University	Intangible Tuberculosis Heritage: The Retention of Former Sanatorium Grounds as Nature Conservation Areas in Australia
	Sławomir Lotysz	Polish Academy of Sciences	Harnessing Nature and Bodies. Swamps, Health, and Biopolitics in Interwar Poland
15:50 – 16:10	Coffee Break		

16:10 – 18:00	<p style="text-align: center;">Panel 3 Challenging Biomedicine: Future Health Challenges for the Global South Chair: Ved Baruah, Shanghai University</p>		
	Branwyn Poleykett	University of Essex	From Planetary Health to Everyday Eating: Encountering ‘New’ Diseases in Dakar
	Shraddha Murali	Kasturba Medical College, Manipal	Bringing Cancer Care to the Grassroots: A Study of Health Networks in Coastal Karnataka
	Howard Chiang	University of California, Davis	Paradigm, Culture, and Psychiatry across the Pacific
	Patrick Chukwudike Okpalaek	University of Uyo	Making a Paradigm Shift: Retraditionalizing the Nigerian Healthcare System for National Development, 1900-2015
18:00 – 20:30	Dinner		

Saturday, 27 April 2019

09:00 – 10:30	Panel 4 Sex, Inclusion and Exclusion in Healthcare Chair: Professor Jim Mills, University of Strathclyde		
	Natasha Suhan	Shanghai University/ University of Strathclyde	The North Kensington Women's Welfare Centre and British Contraceptive Research and Provision
	Mary Lockwood	Manchester Metropolitan University	How Children's Stories Can Voice the Future History of Medicine
	Chris Babits	University of Texas at Austin	From Sick Mind to Healthy Genes: Same-Sex Desires and Sites of Health and Disease
10:30 – 10:50	Coffee Break		
10:50 – 12:40	Panel 5 Health Interventions and Global Health Chair: Professor Iris Borowy, Shanghai University		
	Shendy Vegaziandra Arsandy	Universitas Padjadjaran	Global Perspective in Nutritional Issues in Indonesia Post-Independence, 1950-1980
	David Bannister	University of Oslo	The Periphery's Periphery: Northern Ghana in the History of Global Health, 1900-2015

	Fan Rui	Sun Yat-Sen University	The Movement of 'Western-Medicine Practitioners using National Medicines', 1927-1937
	Reiko Kanazawa	Shanghai University/ University of Strathclyde	India in Global AIDS and Global AIDS in India: Protagonists in International Health Histories
12:40 – 14:10	Lunch		
14:10 – 16:00	Panel 6 Redefining Medical Humanities Chair: Professor Antonio Zapata, Shanghai University		
	Lu Chen	University of York	China in the Worldwide Eradication of Smallpox, 1948-1980
	Stuart Bradwel	University of Strathclyde	'An Unwarrantable Risk': Responses to Lay-Pioneers in 'Intensified' Insulin Therapy
	Catherine Newell	University of Miami	Ecosystems of Health and Healing: Blue Zones, Hippocrates's 'Airs, Waters, Places,' and Changing Definitions of Health

	Kit Heintzman	Harvard University	Healing Animals: Non-Human Animals and the Making of Human Medicine
16:00 – 16:20	Coffee Break		
16:20 – 17:00	Roundtable Discussion 'Medical Humanities Futures'		
17:00 – 18:00	Closing Keynote Dr Alex Mold, London School of Hygiene and Tropical Medicine 'Sites of Health: Public Health and the Making of Healthy Citizens in Post-war Britain'		
	Concluding Remarks Professor Jim Mills, University of Strathclyde		
	Vote of Thanks Ved Baruah, Shanghai University		
18:30 – 20:30	Dinner		

**List of Abstracts
(panelwise)**

PANEL 1
Hong Kong: Case Studies

Chris Wemyss (University of Bristol)

'Lingering in the Mind': The Hong Kong SARS Outbreak and Memory in Medical Humanities

Just six years after the 1997 handover of Hong Kong, the territory again hit global headlines as the face of the SARS outbreak. Despite appearing in South China in November 2002, the transfer of the disease to Hong Kong in March 2003 triggered widespread coverage of the outbreak. This paper will investigate why Hong Kong came to represent the SARS outbreak, and how the event was remembered by those living there. Oral interviews with a range of residents, and local newspaper reports, will be used to demonstrate how the narrative of SARS as a major trauma in Hong Kong's modern history has been internalized and propagated by its people. In doing so, the paper fuses the approaches of oral history, memory studies, and medical humanities to produce a fresh take on the SARS outbreak, and the local, global, and postcolonial networks and threads evident in the case study.

Chi Chi Huang (University of Hong Kong)

The Medical Ecology of Colonial Hong Kong

This paper looks at how discussions of 'health' permeated into the dispatches, news reports, private correspondences, and images between Hong Kong and Britain from the 1840s to the 1920s. In the nineteenth century, British commentators considered Hong Kong as a colony of pestilence. British troops suffered from cycles of illness in the first five years and Robert Montgomery Martin damningly described the island in 1847 as "originally unhealthy". This label persisted well into the twentieth century with stories of the colony's climate, noxious land, and outbreaks of plague reinforcing this reputation within the wider British imagination of Hong Kong. At the core of these discussions was the idea that Hong Kong's "tropical nature" was the root cause, underpinning the development of not only urban planning initiatives, engineering projects, afforestation schemes, but also daily private practices, cultural spaces, and leisure activities. An in-depth exploration of the latter is the focus on this paper as I borrow from the concept of medical ecology, which seeks to understand constructions of human health as interconnected to the environment and systems of the world around.

Maxime Decaudin (Sorbonne University, Paris)

Nature and the Colonial Project: Environmental Anxieties and Scientific Discourses in Nineteenth Century Hong Kong

Rotten and crumbling granite, burning sun rays, and damp atmosphere recurrently appear in nineteenth-century colonists and naturalists' descriptions of Hong Kong's environment. Indeed, the island's natural elements have either supported or threatened the British colonial enterprise depending on their debated interpretations. This paper explores the role of scientific controversies—about geology, meteorology, and botany—in the production of colonial discourses of appropriation and domination as well as their impact on the physical landscape. Starting with the controversial unhealthy influence of a weathering geology, the history of the colony's deadly climate, the combination of striking sun beams and torrential rainfalls is investigated before concluding with the repeatedly noted absence of trees and its consequences on both botanical knowledge and the construction of colonial narratives. Finally, physical transformations—such as infrastructure and hygienic building regulations—are examined as a result of scientific environmental anxieties as well as an English imperative for improvement.

Frederick Stephenson (University of Nottingham)

Model Settlement or Warning Sign? Hong Kong's Health Under the Gaze of Treaty Port Shanghai

The changes wrought by the Treaty of Nanjing were multifaceted. The new system produced many winners and losers. Two relatively ordinary, even insignificant, settlements garnered reputations as the highest success stories, these were Hong Kong and Shanghai. Closely linked economically and politically by the British Empire, both cities prospered as gateways to the Middle Kingdom. Their successes often engendered comparisons between the two cities, and these comparisons were nowhere more keenly made than in the cities themselves. From the common resident to the highest authorities, people drew on visions of their friendly rival to inform their attitudes, make judgements and change society. Despite this, the historical relationship between the two territories remains understudied. This paper seeks to redress this imbalance, focusing on the way health was used as a prism for contemporary comparison by residents and visitors to Shanghai's International Settlement. Focusing on issues ranging from the environment to infectious disease, it will be argued that a contested vision of Hong Kong

arose in the International Settlement. This was a vision that created a sense of embitterment among diehard Shanghailanders but was also used by the Municipal Authorities to pursue a more coercive medical state.

PANEL 2

Health Environments and Infrastructure: From Socialist Medicine to Postcolonial States

Katarzyna Jarosz (International University of Logistics and Transport in Wrocław)

The Development of Museums of Medicine in Post-Soviet Countries and their Contribution to the History of Medicine

Medical museums play a significant role in the study of the history of medicine. From mere cabinets of curiosities, they have transformed into institutions, whose goal is to understand the evolution of medicine, and to educate the general public on developments in standards of health. I have focused my research on museums of health, hygiene and medicine in the former Soviet countries, their past and present role. I try to establish the narrative in museums of medicine, what stories they tell about the history of medicine, what their role is, and whether they are used in the training of medical professionals. The paper looks at five history of medicine museums located in Ukraine, Lithuania, Tajikistan, Uzbekistan and Georgia. The research covers both literature and field work, as well as interviews with museum curators.

Liu Shasha (Nanjing University)

The Shape of Shipboard Space Under Naval Medicine in the Eighteenth Century

Due to the activities spread all over the world, British naval health faced unprecedented challenges. As a distinct group which far from the homeland, the British Navy is exposed to an unknown disease environment, and thus faces diverse disease situation than before. On account of the limited development of medical science in the eighteenth century and the lack of substantial progress in therapeutic technology, naval practitioners have advocated various preventive measures to prevent disease. Naval medicine, which is based on the concept of prevention, was formed. In order to meet the requirements of the medical concept for ventilation, light and fresh air,

the building materials and internal structure of the Navy ships have undergone great changes, and eventually creating a shipboard environment conducive to the health of the crew.

Rebecca Le Get (La Trobe University)

Intangible Tuberculosis Heritage: The Retention of Former Sanatorium Grounds as Nature Conservation Areas in Australia

Through late nineteenth and early twentieth century Australia, sanatoria for treating tuberculosis were erected in, or by, large, woodlands and forests. By the beginning of the twenty-first century, however, many of these institutions have been demolished with their green spaces retained as public lands. Until now, research into place-specific medical heritage of sanatoria has primarily focused on architectural significance and the re-use of buildings. It has largely ignored the large landholdings that surrounded such institutions, and how these spaces were reconceptualized after the buildings were demolished. The public lands that were once sanatoria grounds, are now being used to manage the health of local plants and animals. But they are also unacknowledged places of disease treatment, and ill human health. Using environmental history as the means to identify and examine these locations, it is possible question why sanatorium properties are not also discussed as places of medical heritage.

Sławomir Lotysz (Polish Academy of Sciences)

Harnessing Nature and Bodies. Swamps, Health, and Biopolitics in Interwar Poland

The Pripet Marshes were one of the world's most northerly endemically malarial areas. For this as well as various other reasons, in the 1920s the Polish government planned to drain them. By getting rid of the swamps, on a symbolic level the project sought to remove the alleged reason for the indigenous Poleshuk being 'apathetic, gloomy and dumb'. One synonym for their backwardness was their so-called Polish plait (*Plica Polonica*), or felted hair, which was still common back then. This was not an inherited disease, as was thought as recently as the late nineteenth century, and not merely a side-effect of the Poleshuk's unhygienic conditions, but a manifestation of their belief in plaited hair's position in their health universe. This paper examines the various health aspects of the planned amelioration project through the lens of Foucault's biopolitics theory and argues that

management of the natural environment was key to the plan. The Poleshuks' health identity and their response to the introduction of modern hygiene is also explored.

PANEL 3
Challenging Biomedicine:
Future Health Challenges for the Global South

Branwyn Poleykett (University of Exeter)

From Planetary Health to Everyday Eating: Encountering 'New' Diseases in Dakar

Heart disease, diabetes, and respiratory diseases are an increasingly visible public health issue in sub-Saharan Africa. As non-communicable diseases affect people outside of sites in the Global North where they are linked to risk taking behaviors, overconsumption, sedentary lifestyles, and polluted environments, the medical humanities have an important role to play in understanding what is driving emerging epidemics of non-communicable disease in the Global South. Based on ethnographic research in Dakar, Senegal, and drawing on narrative and political ecology approaches, I examine how people understand what are often called “new diseases” in the city. “New diseases” are an ambiguous and distributed phenomenon, shaped by both deep structural changes such as colonial interventions into West African eating and agro-ecological interventions in the Sahel, and the everyday rhythms and commitments of cooking, consumption and care in Dakar's large, complex, multigenerational households. In this paper I explore the political stakes in theorizing, localizing, and living with chronic disease in West Africa.

Shraddha Murali (Kasturba Medical College, Manipal)

Bringing Cancer Care to the Grassroots: A Study of Health Networks in Coastal Karnataka

Cancer is an ever growing burn in India with over 7 lakh new cases and 3 lakh deaths occurring annually. Coastal Karnataka, despite a good literacy rate and socioeconomic conditions has poor awareness regarding cancer, risk factors for it and screening modalities. The Centre for Community Oncology is an initiative to address some of these issues. It aims to promote and implement prevention at all levels, encourage research and build

capacity for a sustainable program. The network identifies the target groups by profiling through FGDs, and collaborates with leaders like the District Health Officer and Panchayat Head, the healthcare providers like PHCs, ANMs etc. and influential organisations like Rotary. This unique partnership helps in raising awareness, recruiting community champions and capacity building. The program is slowly but effectively erasing barriers and bringing cancer care to all.

Howard Chiang (University of California, Davis)

Paradigm, Culture, and Psychiatry across the Pacific

This paper seeks to locate the origins of the global mental health movement within the contested history of transcultural psychiatry. Specifically, it traces the process whereby the notion of cultural competence becomes increasingly central to the reorganization of modern mental healthcare, as psychoanalysis gave way to the institutionalization of transcultural psychiatry. I ask, in what ways did the discipline emerge out of the dismantling of colonial psychiatry, reshape the professional status and agency of Asian psychiatrists, establish new understandings of non-Western cultures, and contribute to an epistemic shift in mental health science from classical biological models to a greater emphasis on culture and personality? My proposed entry point for answering these questions is the social history of a cultural-bound syndrome known as koro. Koro refers to a person's overpowering belief that his genitalia is retracting and even disappearing. The rise and fall of koro's status as a 'paradigm' in culture-bound syndrome nosology unmasks a deeper history of the global circulation of knowledge between certain locations in Asia (typically dubbed as the 'margins' of biomedicine) and the alleged 'core' regions of mental health science.

Patrick Chukwudike Okpalaeke (University of Uyo)

Making a Paradigm Shift: Retraditionalizing the Nigerian Healthcare System for National Development, 1900-2015

The paper argues strongly that Nigeria must make a paradigm shift by retraditionalizing what constitutes the country's healthcare system if the national development goals must become a reality in the twenty-first century. Employing historical and interdisciplinary methodologies, the research draws from both primary and secondary sources. Findings show that before the coming of the British colonial government into what later became known as

Nigeria, various ethnic groups had operated a number of variegated healthcare system embedded in their cultural heritages. In addition, these traditional medical systems were sufficient to take care of their indigenous health issues in their various societies. However, with the emergence of conventional medicine, Nigeria was trapped in the dilemma of a poor health system owing to lack of funding for research and practical issues, corruption, among others. Consequently, Nigerians are exposed to what has been term as medical pluralism, which ultimately comes with many dire health consequences and goes a long way to affecting national development. The paper argues that the Nigerian healthcare system must retraditionalize in order to safeguard the teeming Nigerian population.

PANEL 4
Sex, Inclusion and Exclusion in Healthcare

Natasha Szuhan (Shanghai University/ University of Strathclyde)

The North Kensington Women's Welfare Centre's Mid-Twentieth Century Scientific Voluntary Parenthood Agenda

Britain's third contraceptive clinic, the North Kensington Women's Welfare Centre, opened in a rundown London suburb in 1924. The founders' aimed 'to give scientific birth control advice to women' that would enable them to space and shape the families they desired – not be forced to bear as many children as their natural fertility provided. This talk will discuss the medico-scientific programs and agendas that were pioneered and implemented at the site during its first quarter century. The first step was the scientific standardization of the clinic and its function as a medical site. Subsequently, the founders and medical staff convened a doctors' committee to focus on examining and improving patient's health and fertility through gynaecological clinics and therapies. The committee further pioneered programs of 'pure' and 'applied' scientific contraceptive research and provision – and took the first steps in Britain to scientifically regulate contraceptives. Further, site promoted and standardised scientific marital, sex and contraceptive education programs appropriate to a variety of audiences. And finally, in the 1940s introduced fertility programs to address contemporary national and individual concerns about sub- and infertility.

Mary Lockwood (Manchester Metropolitan University)

How Children's Stories Can Voice the Future History of Medicine

This paper discusses an innovative storytelling program utilizing digital technologies to give children a voice in their healthcare. It further explores how digital children's stories could be used to write and teach the history of medicine in the future. Historically excluded from medicine, children's voices offer a unique insight into how children think and feel about their illness. Digital storytelling provides a fun and low-cost method of collecting children's stories, with the potential to improve patient-clinician communication. Improving medical communication may lead to more effective management strategies for paediatric pain. Imagine 100 years in the future. A child is suffering from a rare illness. An on-demand library of digital stories transcends geographical borders. Doctors and patients have access to stories made by children who suffered the same condition. This potentially improves healthcare. Listening to children's voices from the present, may shape how medicine in the future learns from the past.

Chris Babits (University of Texas at Austin)

From Sick Mind to Healthy Genes: Same-Sex Desires and Sites of Health and Disease

This paper examines how genomics changed the site of same-sex desires from the sick mind to the healthy gene. By the mid-1990s "genetics research on homosexuality became the prominent paradigm for understanding same-sex desires" replacing neo-Freudian psychosexual theories that had long pathologized lesbians, gay men, and bisexuals. I argue that by switching the site of sexual attraction to the genetic level, scientists helped normalize same-sex desires, ushering in a wave of acceptance for sexual variance. Examining the scientific literature, in addition to the reaction to genetics research, reveals how shifting the site of same-sex desires convinced a majority of Americans that sexually variant individuals were "born that way" and that efforts to change them were in vain. Because the genetics revolution happened concurrently with the expansion of the internet, genetics research on sexuality, though mostly conducted in the United States, has had a global impact.

PANEL 5
Health Interventions and Global Health

Shendy Vegaziandra Arsandy (Universitas Padjadjaran)

Global Perspective in Nutritional Issues in Indonesia Post Independence (1950-1980)

This paper will examine the role of international organizations UNICEF and WHO, in catching on the problem of malnutrition in Indonesia after independence. As a postcolonial country, Indonesia was facing the efforts to rebuild the country after experiencing the process of war of independence in 1945-1949. Malnutrition is one of the main issues. Since it established its first collaboration with Indonesia in 1950, UNICEF has provided funding for Indonesia's development programs. Nonetheless, the conflict between Indonesia and Malaysia in the early 1960s caused Indonesia to leave the United Nations (UN) in 1964 and the health assistance for this program has stopped, which resulted in deteriorating nutritional conditions in Indonesia. Using the archives of the Ministry of Health in Indonesia and field research reports, this paper will discuss the reasons why nutrition issues are the main focus in post-independence development. In addition, this paper will also analyze why the development of nutritional health involves international organizations, and why international organizations give Indonesia development funding.

David Bannister (University of Oslo)

The Periphery's Periphery: Northern Ghana in the History of Global Health, 1900-2015

Drawing on archival sources, interview testimonies and analysis of contemporary discussions around Universal Health Coverage, this paper discusses the long-run evolution of health work in the inland West African region of northern Ghana. As an economically and politically peripheral region of a country which is itself situated on the margins of the world economy, the history of health in northern Ghana reveals how the shifting concerns, ideologies and practices of 'global health' have played out on the ground among local health workers – over the past century and across the colonial/postcolonial divide. The paper also seeks to make a methodological contribution. It examines the necessary convergence of historical methods with other disciplines for the study of the recent past and discusses the ways

in which scholarship of this kind inevitably participates in various forms of global health activism. Constrained by the available sources, any analysis of the historical political economy of public health becomes increasingly politically tangible, and infused with contemporary concerns, as the period of research approaches the present.

Fan Rui (Sun Yat-Sen University)

The Movement of “Western-Medicine Practitioners using National Medicines”, 1927-1937

The so called “National Medicines” is Chinese herbs. The movement of “Western medicine practitioners using National Medicines” rose under the background of transformation from Chinese medicine to Western medicine in China of early 20th century. In March 1929, as a derivative of the struggle between Chinese and Western medicine practitioners, the movement formally launched. This movement not only affects the formation of Chinese modern medicine, but also changes the tradition of despising pharmacy in China for the first time. It plays a crucial role in the historical process of scientizing Chinese herbs, and also offers a significant case for understanding the globalization of Western medicine.

Reiko Kanazawa (Shanghai University/ University of Strathclyde)

India in Global AIDS and Global AIDS in India: Protagonists in International Health Histories

This presentation will investigate two stories of Ford Foundation’s involvement in global health. First, it presents an account of how Ford’s New York home office prepared for an international grant making strategy amidst an ongoing domestic AIDS crisis outside of the core agenda-setting global health multilaterals, WHO and World Bank. Second, it demonstrates how Ford’s New Delhi office, guided by its Program Officers, subsequently funded Indian AIDS NGOs within an overarching reproductive health, gender and sexuality advocacy agenda. While these two accounts may at first seem like two separate stories, this presentation will argue and demonstrate how they form part of a larger narrative about global health in the 1980s and 1990s. In doing so, it points to histories of global health that can encompass the trajectories of multiple actors, agendas, and contexts, all acting within different scales.

Panel 6
Redefining Medical Humanities

Lu Chen (University of York)

China in the Worldwide Eradication of Smallpox, 1948-1980

The smallpox eradication has attracted attention from many historians to provide critical assessments of the valuable experience. However, as a member of the global community but not a member of the WHO during the 1950s-1970s, China, working on its own timetables, independently eradicated smallpox in the 1960s. In all this, China engaged with the UN, the WHO, and the US and Western European aid agencies in distinctive ways. This paper uses the case of Jiangsu Province to examine how smallpox eradication was conceived, planned and delivered in China, and what international, regional, national and local political negotiations made success possible between 1948-1980. It focuses on Beijing's interactions with the public health and political trends within Jiangsu Province and Nanjing City. It aims to provide a valuable historiographical intervention to reorient many of our current understandings of global smallpox eradication.

Stuart Bradwel (University of Strathclyde)

'An Unwarrantable Risk': Responses to Lay-Pioneers in 'Intensified' Insulin Therapy

In 1925, Jack Eastwood was diagnosed with insulin-dependent diabetes mellitus. His treatment initially involved a strict regimen of medication and diet prescribed by his doctor. During his time at university in the mid-1930s, he devised a coherent though unorthodox approach with stark similarities to modern 'intensified' treatment, based around 'the injecting of insulin at every mealtime and varying the dose according to the food eaten'. Eastwood understood the risks of opposing paternalistic professional orthodoxy, and acknowledged in a 1986 article that his approach may be considered 'an unwarrantable risk' by some. This paper will argue that the material reality of insulin therapy directly enabled the exertion of lay-control over treatment, while engaging with the variety of responses this provoked against those who did. In doing so, it will argue that the history of diabetes mellitus provides an excellent lens through which to analyze the ideological flux of twentieth-century medical practice.

Catherine Newell (University of Miami)

Ecosystems of Health and Healing: Blue Zones, Hippocrates’s “Airs, Waters, Places,” and Changing Definitions of Health

Roughly 2400 years ago, Hippocrates surveyed environmental determinates of health in his treatise “Airs, Waters, Places,” in which he wrote that “the constitutions and habits of a people follow the nature of the land where they live.” In the early 2000s, Hippocrates’s observations were given new relevance through demographic research in Sardinia, Okinawa, and three other global locations, which have since become known as Blue Zones: discrete geographic populations where people live considerably longer than the worldwide average. While research on diet and nutrition routinely dominates headlines, the longevity of these populations derives from a constellation of factors including family connections, access to natural spaces, and religious affiliation. In this paper, I explore the popular and medical discourses surrounding the “ecosystems of health” contained in the Blue Zones as an example of how humanistic dialogue can reveal and historically contextualize cyclical definitions of health across time and space, from Hippocrates to today.

Kit Heintzman (Harvard University)

Healing Animals: Non-Human Animals and the Making of Human Medicine

There is a consensus among historians of veterinary medicine that veterinary medicine has too long been excluded from the ‘history of medicine’ and that history of medicine projects an unnecessary anthropocentrism. This paper seeks to connect veterinary history to a broad interest in non-human animals in medical culture, from animal-derived pharmaceuticals of the early modern world to animals’ roles in testing modern medicine and surgical procedures. Such services are not just beneficial for humans but also for other animals that receive medical attention, be they companion species or the provisioners of milk and meat. Through a study of the myriad uses of animals in the maintenance of human health, this paper will argue that human health and illness is often in the hands (or hoofs, tentacles, or wings) of other creatures. Reading human medicine and animal medicine dialectically means uniting sites such as barnyards, forests, laboratories and oceans.

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