



European Ethnology

Prof. Dr. A. J. Strathern & Prof Dr. P. J. Stewart,
University of Pittsburgh, USA & University of Otago,
New Zealand

Dr. Pamela J. Stewart (Strathern) and Prof. Andrew J. Strathern are a wife and husband research team with a long history of joint publications and research. They are based in the Department of Anthropology, University of Pittsburgh, and have been Visiting Research Fellow and Visiting Professor, Department of Anthropology, University of Durham; Visiting Research Fellows in the Research Institute of Irish and Scottish Studies, University of Aberdeen; and have been Visiting Research Fellows at the Institute of Ethnology, Academia Sinica, Taipei, Taiwan over many years.

They have also lived and worked in Japan, Australia, New Zealand, and the Netherlands, and presented lectures in many countries around the world. They have published numerous books and articles on their research in the Pacific region, especially in Papua New Guinea; and in Europe (primarily Scotland and Ireland); and in Asia (mainly in Taiwan and China). Their research interests are wide ranging, including Anthropology, Philosophy, and Religious Studies.

Lecture

Medical Pluralism, Migration, and Shifting Contexts of Healing
May 19, 2016, 6:15 p.m. – 7:45 p.m.
University of Augsburg (Universitätsstr. 2, 86159 Augsburg),
Building D, Room 2006

The concept of medical pluralism constitutes one of the core findings of empirical investigations in the field of medical anthropology. Pluralism, however, produces problems. Patients may wish to be free to choose between different forms of treatment, but in practice cannot. The relationships between different medical systems and ideologies of the body may be conflictual or harmonious. These kinds of problems are ex-

acerbated in circumstances of human migration, where people of many different cultural backgrounds are brought suddenly together in new and cosmopolitan circumstances. Biomedical treatments are dominant in most host countries, but migrants may bring with them a whole suite of cultural differences and find it hard to adapt. Conflicts between what we have called (using the English language) Curing on one hand and Healing on the other, are likely to come to the fore, if doctors are concerned with Curing while patients are seeking Healing (Here we define Curing as medical practices that aim to eliminate a disease condition in a patient; we define Healing as therapeutic practices that aim to restore a feeling of wellbeing in a patient). Outside of the context of migration all varieties of medical treatment are also from time to time placed under severe challenge, as has happened recently with the exponential growth to concern over the Zika virus in Brazil and many other parts of the world. A new infectious agent of this kind challenges all forms of treatment and explanation, pluralistic or otherwise, and such perturbations form a long-standing part of international medical history. Medical disasters and threats of disaster of this kind may be compared to environmental disasters in general (Our program is Disaster Anthropology: How people Cope and How people Hope). We have been working in this topic for many years now, focusing on short and long term responses. Short-term responses are in the domain of Coping, comparable to attempts to Cure a disease. Long-term responses we characterize as the phase of Hope, parallel to a process of Healing. In this way, we integrate our studies of disasters with our studies of medical anthropology as a model for better understanding our world today and to come.

International Lectures on Health Research

The Center for Interdisciplinary Health Research (ZIG) invites five renowned scholars for its first series of „ZIG International Lectures on Health Research.“The series is intended to discuss research on health and illness from the perspective of social sciences, humanities, legal and economic studies. It seeks to stimulate cross-disciplinary dialogue and, in addition, build bridges between non-medical scholarship, and the natural sciences. We invite academics, students and the public to engage in current and socially relevant issues in health research, and discuss cutting edge research with international scholars.

*Contact ZIG International Lectures on Health Research:
Prof. Dr. Helena Bilandzic, Board Member ZIG (helena.bilandzic@phil.uni-augsburg.de)*

About ZIG

The Center for Interdisciplinary Health Research (ZIG) was founded in April 2014 as a research facility of the University of Augsburg. It creates a network between researchers in economics, law, social sciences and humanities as well as other disciplines, and facilitates and stimulates interdisciplinary research. Its goal is to monitor and analyze current developments in the health care system and explore the meaning of medical and health practices. A board of advisors composed of highly appraised members supports the Center with their broad expertise on health issues in politics, society, the public and the media.

Contact ZIG: Dr. Julia von Hayek, Managing Director (julia.von-hayek@praesidium.uni-augsburg.de), www.zig.uni-augsburg.de



International Lectures on Health Research

Summer term 2016

Center for Interdisciplinary Health Research /
Zentrum für Interdisziplinäre Gesundheitsforschung (ZIG)

Sociology



Prof. Dr. Niki Vermeulen,
Science, Technology and Innovation Studies (STIS), School of
Social and Political Science, University of Edinburgh

Niki Vermeulen is a lecturer in the history and sociology of science at the University of Edinburgh. She specializes in science and innovation policy and the organization of research, with an emphasis on collaboration in the life sciences. Her current Wellcome Trust project looks into the emergence of systems biology. Niki holds a PhD from Maastricht University, and held positions at the University of Vienna and the University of Manchester. In addition, Niki has been working for Technopolis Group, the Netherlands Scientific Council for Government Policy, and the Scientific Council of the Royal Netherlands Embassy in Washington D.C.

Lecture

Collaboration in Health Sciences: Ways of working together
July 12, 2016, 6 p.m. – 7:30 p.m.
University of Augsburg (Universitätsstr. 2, 86159 Augsburg),
Building D, Room 3065

Scientific collaboration is key to advancement in science, and gets particular forms when it concerns research into life. The exploration of various ways of working together is high on the agenda in Science & Technology Studies (STS) and this also includes collaborations in health sciences and care. This lecture will focus on my research into systems biology, a recent highly collaborative trend in the biosciences, which claims to revolutionize medicine. While the Human Genome Project and subsequent reductionist-omics approaches produced masses of data on the key molecules in living cells, systems biology aims to shift towards a more holistic mind-set, focusing on interactions to discover life's universal principles and laws. The integration of data in mathematical models of life currently targets single-cell organisms – such as yeast – and human organs (heart and liver). Ultimately, it should lead to the creation of a virtual human, advancing systems medicine by making health-care personalized, predictive, preventive, and participatory (P4 medicine).

Philosophy

Prof. Dr. Marc Wicclair
West Virginia University, USA

Mark Wicclair is Professor of Philosophy at West Virginia University. At the University of Pittsburgh, he is Adjunct Professor of Medicine; Part-Time Instructor, Master of Arts in Bioethics Program; and Core Faculty, Center for Bioethics and Health Law. He has a Ph.D. in philosophy from Columbia University and a B.A. in philosophy from Reed College. His primary research and teaching interests are in bioethics and applied ethics, and he has published extensively in these areas. His publications include two books: *Conscientious Objection in Health Care: An Ethical Analysis* (Cambridge University Press, 2011), which was designated a 2012 Choice Outstanding Academic Title in Philosophy, and *Ethics and the Elderly* (Oxford University Press, 1993). He has published numerous articles in professional journals and has contributed several book chapters and encyclopedia entries. He has received a number of fellowships, including a Woodrow Wilson Fellowship, a Fulbright Fellowship, and a National Endowment for the Humanities (NEH) Fellowship for College Teachers and Independent Scholars. In addition, he received a total of five awards for outstanding research, teaching, and public service at West Virginia University.

Lecture

Conscientious Objection in Health Care
July 1, 2, 15, 16, 2016, 8:00 a.m. – 5:00 p.m.

While conscientious objection may have its historical roots in objections to military service, a growing number of physicians, nurses, and pharmacists are refusing to provide legal and professionally accepted health services that violate their core moral (i.e. ethical and/or religious beliefs). Examples include abortion, sterilization, standard and/or emergency contraception, withholding or withdrawing medically provided nutrition and hydration, palliative sedation to unconsciousness, and organ donation after cardiac determination of death. A crucial question concerning conscientious objection in health care is how to respond to practitioners who refuse to provide a service. One approach is “conscience absolutism”. Its advocates hold that health care professionals should be exempted from performing any action that is contrary to their conscience. Accommodation is unlimited and practitioners may refuse to provide or assist in providing any service that is against their moral beliefs. They may also refuse to provide information and referral to patients if doing so is against their conscience. Another approach is “incompatibilism”. Its advocates oppose accommodation on the grounds that practitioners have an obligation to provide any good or service that is legal, professionally accepted, clinically appropriate, and within the scope of their professional competence. The talk will critically examine each of these extremes and argue that neither is defensible. A third approach, “reasonable accommodation”, will be presented and defended. It features a set of guidelines that are designed to protect the moral integrity of health professionals without interfering with patients’ access to medical services or imposing excessive burdens on other health professionals and institutions.

Communication Science



Prof. Dr. Michael Dahlstrom,
Greenlee School of Journalism and Communication,
Iowa State University

Michael Dahlstrom is an associate professor at the Greenlee School of Journalism and Communication of Iowa State University. He holds a Ph.D. in Journalism and Mass Communications, joint degree with Environmental Resources, University of Wisconsin-Madison, 2008; M.S. in Biophysics, Iowa State University, 2004; B.A. in Journalism, Iowa State University, 2002; B.S. in Biophysics, Iowa State University, 2002. His current research interests include science, risk, health, agricultural and environmental communication, narrative communication, perceptions and ethics of science communication in policy contexts, communicating beyond human scale.

Lecture

Telling Stories About Health: How Narratives Can Improve Healthy Decision-Making Among Lay Audiences
July 4, 2016, 6 p.m. – 7:30 p.m.
University of Augsburg, Building D, Room 2105

The behaviors that lead to better health outcomes have never been better understood, yet many people ignore or even reject health information and continue to make choices that hurt their health and well being. Experts often assume the solution is to counter misinformation by disseminating more facts about health. Yet, sometimes what is lacking is not understanding, but engagement with information. This talk will explore how storytelling techniques can be used to engage audiences and communicate health information in ways that audiences are more likely to accept and use to modify their behaviors.