

Review on the Development of Medical Anthropology in Latvia

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Three major trends: physical anthropology, ethnography and social anthropology

The beginnings of anthropological research can be dated to the twentieth century with the main focus on issues of traditional beliefs, physical anthropology, health and hygiene.¹ Virtually no study has been done which has attempted to date research prior to that time. Nevertheless, traces of this research can be found at the end of the nineteenth century in descriptions of fieldwork conducted by an ethnographer called Alksnis in the northern part of Latvia and Estonia on child-birth customs (Ploss 1901: 28).

Medical anthropology research became institutionalized in 1938 with the opening of the Institute for the Study of Living Strength² where research was conducted in the tradition of physical anthropology: e.g. it explored population density and eugenics to support and popularize the idea of eugenics. The institution was closed in 1940 after the Soviet occupation of Latvia (Grāvere and Salaks 2009; Zelče 2006). Ethnological and anthropometric study was preserved through the period of Soviet occupation and ethnographic expeditions collected data and artifacts on folk medicine.³ A rich collection of archeological and ethnographic data on folk and professional medicine was also collected and stored in the Pauls Stradins Museum for the History of Medicine.⁴ The Institute of Anatomy and Anthropology was registered at Riga Stradins University (the former Latvian Medical Academy / Institute) in 1997, consolidating physical anthropology research.

Another direction of Latvian medical anthropology conducted within the tradition of social anthropology stems from Western European universities. Vieda

1 This publication is written with the support of a European Social Fund co-funded project "Capacity building for interdisciplinary biosafety research". Contract No. 2009/0224/1DP/1.1.1.2.0/09APIA/VIAA/055.

2 In Latvian: Tautas dzīvā spēka pētīšanas institūts.

3 Online collection of the Latvian Institute of History can be found on www.lvi.lv/etnokratuve.htm.

4 For more information see the museum home page <http://www.mvm.lv/en>.

Skultans, a medical anthropologist of Latvian origin and professor at the University of Bristol, was already an established anthropologist when she embarked upon her research in Latvia in the 1990s. She started her career in the 1970s exploring spiritualist beliefs and practices of healing in South Wales (Skultans 1974, 1976), the symbolism of menstruation and menopause in Wales (Skultans 1970), the relationship between mental illness, gender, and family structure in rural Maharashtra, Nepal (Skultans 1991a), and the history of madness (Skultans 1975, 1979).

After Latvia regained independence in 1991, it became more open for anthropological fieldwork. The first anthropological fieldwork focused on narrative, memory, autobiography and illness in Latvia (Skultans 1998, 2007a). Skultans directed her research to Latvia, looking at psychiatric practice, narratives of the somatization of the history of Soviet occupation, the relationship between psychiatrics and social and economic changes in post-Soviet Latvia (Skultans 1997, 1998, 1999, 2003, 2004a, 2004b, 2007b). She has also published a number of articles on the relationship between anthropology and psychiatry (Skultans 1991b, 2000a), as well as having reflected on ethics in the anthropological research of psychiatric practice (Skultans 2005). Alongside this, Skultans has co-edited several books on the anthropology of psychiatry and the narrative study of health and illness (Skultans, et al. 2000b, Hurwitz, et al. 2004). Her latest book (2007a) contains a collection of her essays, as well as describing the path of her research in medical anthropology.

Martin Gunnarson (2012) became the first international scholar conducting comparative doctoral research on kidney transplantation and dialysis in Stockholm and Riga, exploring the relationship between the body, illness and transplantation.

Establishing medical anthropology within the field of (British) social anthropology

There are three main reasons for the comparative strength of medical anthropology in Latvia. Firstly, integration within international research networks has allowed the bypassing of often poor local funding opportunities and the acquisition of an international profile. Secondly, this discipline is successfully institutionalized and this has generated second-generation researchers. Thirdly, in Latvia medical anthropology, as well as social and cultural anthropology in general is mostly a public discipline seeking to publicize research results and influence policy making processes.

International research links. Latvian anthropologists working on topics of medical anthropology have obtained degrees from the London School of Economics and Political Science, and the Universities of Bristol and Cambridge thus publicizing their research in an international environment. Aivita Putniņa, in her doc-

toral thesis at the University of Cambridge (1999), focused on childbirth experiences and theoretical issues of agency and change (also Putniņa 2001, 2002). Agita Lūse (2005) conducted her research on mental illness in Latvia while at the University of Bristol.

Study experience abroad seems to foster collaborative projects in medical anthropology and brings research funds to Latvia. So, in 1997-98 a first collaborative EU BIOMED II programme project, "A qualitative assessment of quality of life after stroke," was carried out by Lūse (McKevitt, et al. 2002). Most of the subsequent research projects in the 2000s on topics of organ transplantation, genomics, mental disorders and reproductive health were funded by the EU and international donors.

Institutionalization of academic and research fields. Permanent academic and research positions allow the stabilization of research. The 2000s brought research on publicly relevant topics: population genomics (Putniņa, 2003, 2008), domestic violence and health (Putniņa, et al. 2007, 2009), images of biotechnologies (Putniņa 2010), reproductive health (Putniņa 2004, 2011a), suffering and healing (Lūse and Lázár, 2007), discursive aspects of psychological problems (Lūse 1999), and the support group movement (Lūse 2009).

Medical anthropology also became institutionalized through study programmes and through research institutions opening the way for a cohort of new generation researchers. Topics of student research have included gender and reproductive health issues (Krecele 2006, Mileiko 2009), health policy (Dompalma 2007), biotechnologies: genomics (Linde 2010) and stem cell applications (Kalēja 2010). From the 2000s onwards, a course in medical anthropology has been taught in the sociology programme at the University of Latvia. However, in 2009 the university launched bachelor- and masters-level study programmes in social and cultural anthropology including a wider specialization in medical anthropology. This facilitated the building up of the research potential and resulted in the establishment of the Centre for Bioethics and Biosafety⁵ at the University of Latvia in 2006.

The centre coordinates medical anthropology research on biotechnologies and runs several internationally and locally-funded research projects on organ transplantation, genomics, xeno-transplantation, stem cells, new reproductive technologies and reproductive health.⁶ Current research projects at the centre explore the governance of biotechnologies in Latvia. A comparative research project on citi-

5 See more on <http://www.biodrosiba.lu.lv/eng/project/center>.

6 2009-2012 EC FP7 project "Public participation in knowledge intensive policy field", SSH-CT-2008-225327; 2009-2012 ESF project "Capacity building for interdisciplinary biosafety research", Nr.2009/0224/1DP/1.1.1.2.0/09/APIA/VIAA/055; 2011 WHO, "Papardes Zieds" project on reproductive health; 2007 UNESCO funded project "Societal aspects of human genome research in Latvia"; 2007 WHO project National report on domestic violence and health; 2003-2006 EC FP6 project "Challenges of Biomedicine"

zen participation in decision-making on biotechnologies allowed researchers to stress the post-socialist context of policy process and problematize the notion of public participation (Hanson, et al. 2011), risk and trust (Putniņa 2011b), the development of the notion of the body under biotechnologies (Putniņa 2012). Research on assisted reproduction allowed them to argue for the role of ethnic and gender factors in gamete donation (Mežinska, et al. 2011). Doctoral research on fertility is currently being completed as one of the centre's research focuses.

Another centre for medical anthropology research was built around the masters-level programme in social anthropology at Riga Stradins University. The programme allows for a specialization in medical anthropology, psychiatry, communication and understanding of madness as well as death and dying. The research focus is mainly directed towards mental disorders and the stigmatization of mental illness (Lūse 2010; Lūse and Kamerāde 2011; Lūse and Kāpiņa 2011).

Getting public. Most of the anthropologists in Latvia are involved in different civic and public activities, policy planning and analysis. The majority of research projects are designed to have a larger public impact and contain not only academic but also policy components, aiming to produce guidelines and recommendations. Anthropologists have also been active in raising public discussions concerning patient support mechanisms, domestic violence and health, public funding of assisted reproduction services and biobanking.

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Medical Anthropology in Russia

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Medical anthropology is a new field of scholarship with approximately ten years of history in Russia, and only preliminary steps have been made to establish it as a separate discipline in the country (Mikhel 2004). There are still no special study programs in medical anthropology in Russian higher education, and only two universities have special courses on medical anthropology. The first one is the Saratov State Technical University, which first introduced a special course in this field named “Medical Anthropology: the History of the Discipline’s Development” in 2001 (Mikhel 2010). The other one is the Russian State University for the Humanities, which also offers an introductory course named “Medical Anthropology”.

However, taking into account that the term “medical anthropology” has been imported into the Russian academic landscape rather recently, we should look more precisely at local intellectual traditions of understanding health and medicine. There are generally two main groups of scientists which investigate issues related to health, illness and medicine. The first one is represented by researchers who explicitly identify themselves as medical anthropologists and who are ethnologists in terms of their educational background. This group focuses on the social and cultural aspects of traditional medicine. Most of these scholars are based at the Institute of Ethnology and Anthropology of the Russian Academy of Science, where they have conducted research in this field since the late Soviet period. In 2005, the “Center for studies of shamanism and other traditional beliefs and practices” of this Institute was transformed into the medical anthropology research group. The members of this group have continued with their previous studies in ethnomedicine and ethnopsychology. The head and leader of the group, Valentina Kharitonova, investigates contemporary Siberian shamanism (Kharitonova 2006), healing practices of shamans (Kharitonova and Topoev 2006), their adaptation to the spreading of modern medical knowledge in the region (Kharitonova 2009a, 2009b, 2011), and the interpretation of health and illness in the frame of neoshamanism and new religious movements (Kharitonova, et al. 2008). The research center also provides training in medical anthropology for several PhD students, and organizes summer schools on the subject. Currently the group is developing a new line of research – anthropological studies of bioethics. This is reflected in