

Developing and Establishing Medical Anthropology in Serbia

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As a new research field within social/cultural anthropology in Serbia, medical anthropology emerges both as a result of certain theoretical and epistemological changes affecting its wider disciplinary context, and as an outcome of the social and institutional transformations that have facilitated academic production in terms of teaching, research projects and articles and books exploring social and cultural aspects of (bio)medical phenomena.¹ Generally speaking, there has recently been a shift in epistemological positions and research paradigms which can be described as a move away from classical ethnomedicine and towards medical anthropology. Three areas can be pinpointed to characterise the recent development of medical anthropology in Serbia: the researches carried out by certain professors and postgraduate students affiliated with the Department of Ethnology and Anthropology of the University of Belgrade, the introduction of courses related to medical anthropology and international collaboration with research and policy institutions.

The interest in 'popular health culture' or ethnomedicine in Serbia has a long history in both biomedicine (see: Đorđević 1872; Dragić 1991; Živanović 1997; Đurić Srejić and Hadžinikolić 2000) and ethnology (later anthropology), which can be traced back to the works of the scholars who established the discipline (Đorđević 1908, 1930, 1938, 1958, 1965). The Department of Ethnology at the Faculty of Philosophy, University of Belgrade, was founded in 1906. In 1990, it changed its name to the Department of Ethnology and Anthropology and is still the only educational institution where social/cultural anthropology is taught in Serbia at undergraduate and graduate level.

The continuity in studying ethnomedicine during the twentieth century enabled researchers to create a large body of ethnographic material related to local ideas about the cause of various health disorders, ways of maintaining health and a range of prevention, diagnostic and treatment practices (Srdić Srebro 2009)

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throughout Serbia and surrounding countries.² Health, illness and treatment procedures were interpreted as a part of the system of customs, beliefs and magic-religious practices of "traditional", rural Serbian society and culture. Some research focused on the historical development and role of medical institutions and staff (Nikolić 1971, 1972, 1973), and the use of ethnomedical concepts and practices in contemporary health prevention practice (Lazarević 1975, 1977, 1979). However, the ethnomedical approach as a whole can be seen as lacking a wider theoretical perspective, as well as being characterised by a materialistic conception of the body. An important aspect of this approach was a view of illness as a fundamentally natural phenomenon ('disease'), while cultural or local conceptions and healing practices were usually thought of as 'traditional' or pre-scientific responses to pathological conditions of psychosomatic or somatopsychic disorders. Central to this approach was the opposition between conventional, 'scientific' biomedicine, on the one hand, and ethnomedicine and so-called alternative medicine, on the other. The latter was understood as a non-modern, culturally specific knowledge system rather than just as a different form of conceptualising the body, illness and well-being which may be comparable to that of scientific medical thinking. What characterised the theoretical underpinnings of ethnomedicine in Serbia throughout the last century is the abstraction of biomedical knowledge from the social conditions of its production. This approach led to a view of biomedicine as a scientific, socially decontextualised system. In this context, it can be said that recent anthropological interest in modern science as a "culturally specific form of reasoning" of modern Western societies and the understanding of the body as a socio-cultural artefact have encouraged the development of the field of medical anthropology in Serbia. Related to this recent 'reflexive turn', there has been a growing interest in questions of medical anthropology which has given rise to some nascent forms of its institutionalisation (postgraduate courses, research projects, articles and books).

The works published since the end of the 1990s have focused on the analysis of social/cultural aspects of certain (bio)medical systems, practices and phenomena, involving the conceptualisation of sickness in different medical systems (Pavlović 1999), characteristics of contemporary alternative medicine (Romelić and Vasić 1999), the media discourse of the healthy mind in the slender body (Malešević 2000), or the social and discursive construction of menopause (Malešević 2002).³

2 Due to a lack of space here I cannot discuss the works on "traditional" ethnopsychology, a perspective which received much criticism for trying to establish "ethnopsychic characteristics", "national mentality", "psychic types" of ethnic and national groups in the Balkans and among the South Slavs (Cvijić 1922, 1931; Dvorniković 1939; on contemporary ethnopsychology see Jovanović 1991).

3 In addition, neuropsychiatrist, Časlav Hadžinikolić, interested in transcultural psychiatry and shamanism, received his PhD at the beginning of the 1990s at the Department of Ethnology (later Ethnology and Anthropology) for his thesis on Hallucinogenic Ritual as a Psychotherapeutic Procedure in Some Tribes of Upper Amazonia (Hadžinikolić 1991).

However, crucial to the development of medical anthropology and its institutional bases are the researches of Bojan Žikić (Department of Ethnology and Anthropology), who was the first to study HIV vulnerability and engage in systematic fieldwork research of the risk behaviour of intravenous drug users in Belgrade (Žikić 2006, 2007), and that of sex workers and the violence they are exposed to (Žikić 2008; see also Žikić 2009, 2011). This encouraged the creation of a network of young researchers interested in these topics. Through collaboration with Professor Žikić and colleagues from London Imperial College and the London School for Hygiene and Tropical Medicine, they participated in a number of different projects (2005–2010) and published their studies in anthropological and medical journals (Baroš 2006, 2010; Baroš and Žikić 2006, Bassioni Stamenić, Baroš and al. 2006; Bernays, Rhodes, Prodanović 2006; Kuneski 2006; Rhodes, Prodanović, et al. 2008; Prodanović, et al., 2006; Simić, et al. 2008; Rhodes, Simić, et al. 2008).⁴ All the projects in which social/cultural anthropologists participated were developed and conducted in collaboration with national institutions (Institutions for Public Health, National Office for HIV) and international organisations, such as the United Nation Development Programme (UNPD) or UNICEF. It is through this process of collaboration and research that the institutional basis has started to develop.

A course entitled “Anthropology of AIDS” was introduced to the postgraduate (Master) programme in 2006. However, with the education reform and departmental changes of academic programmes that occurred in 2009, anthropology of AIDS was dropped as a separate teaching course at Masters level, while medical anthropology was introduced into the PhD programme, but only as a part of a course called “Cognitive and Medical Anthropology”. It is also worth noting that the research and teaching of some medical anthropology topics has been organised as a part of other courses, such as “Anthropology of Gender and Kinship”, “Anthropology of the Body” and “National Ethnology - the Body and Identity” (undergraduate programme), “Urban and Gender Studies” (MA programme) and “Anthropology, Kinship, Biotechnologies” (Phd programme). These subjects discuss, for instance, the body as a socio-cultural artefact (Ivanović, Šarčević 2002; Ivanović 2003; Srdić 2008), cultural conceptualisations and local interpretations of reproduction, kinship and bodily processes and inheritance (Ivanović 2002), biopower, biological citizenship, the cultural phenomenology of suffering, the political technology of “disability” (Trifuljesku 2012), social, cultural and religious aspects of new reproductive technologies (Pišev 2012), and health, kinship and stem cell banking (Krstić 2012).

As a result of recent changes in teaching programmes, there has been a growing interest, among PhD and MA students, in medical anthropology issues and re-

4 In November 2006 a dissemination conference entitled “HIV Risk and Prevention in Serbia and Montenegro: Research, Policy and Action”, organised by UNPD, DFID UK, took place in Belgrade.

lated phenomena. Elena Kuneski (2011), a PhD student, explored aspects of the men who have sex with men (MSM) population in Belgrade. In 2011, Tamara Lepetić started her PhD research project on social and cultural aspects of new reproductive technologies in Serbia, both at the organisational and institutional level (health system, clinics, policy) and at the level of practice and consumer experiences, focusing especially on socially as well as medically identified reproductive pathologies and “stratified reproduction”. Research projects conducted by MA students involve questions of cultural aspects of olfactory experience (Mandić 2008), alternative medicine (Srdić 2009) and “subjects with disabilities” in Serbia (Trifuljesku 2010). Some of the most recent projects that are still in progress include the exploration of the reproductive health of Romani women in Serbia (Tatjana Malinović) and social and cultural aspects of oral hygiene in contemporary Belgrade (Milutin Micić).⁵

5 Some of the former Belgrade anthropology students doing their PhD thesis at various western universities explore medical anthropology issues not in Serbia but in other countries of the post-Yugoslav region. For example, Čarna Brković has completed her PhD thesis entitled ‘Navigating Rules and Wills: Healthcare and Social Protection in a Bosnian Border Town’ (PhD awarded in 2012 at University of Manchester). Her ethnographic study explores the recursive and complex relationship between state-provided social protection services for children with developmental disabilities and “non-state” actions (humanitarian aid, informal social networks). Although her research may not be seen to fit the (sub) disciplinary boundaries of medical anthropology, it provides an analysis of some important aspects concerning illness, costs of medical treatment and social assistance, showing how changing borders, often crossed for health care reasons, have created a specific type of social and charity practice. It is also worth mentioning a number of other western-based graduate students and scholars originating from ex-Yugoslavia, who carry out similar research projects in the region. For example, Goran Dokić completed his MA thesis on ‘Psychosocial Transition in a Postsocialist Context: Post-Traumatic Stress Disorder (PTSD) in Croatian Psychiatry’ (2009, University of Victoria, Canada, available at <https://dspace.library.uvic.ca:8443/handle/1828/1490>, see also Dokić 2008). He analysed the effects of the recent introduction of PTSD to the psychiatric discourse in Croatia and the ways in which local medical professionals reproduce, transform and resist conventional narratives of the effective treatment of war-related emotional traumatization. His PhD research project entitled ‘Between Warfare and Welfare: Veterans Associations and Social Security in Serbia’ (University of Manchester) is focused more on Serbian war veterans as a re-emergent group of welfare recipients and on the influence of informal networks on the organization and provision of social assistance in a postsocialist context rather than on medical anthropology questions *sensu stricto*. Regarding medical anthropology topics in postsocialist and post-conflict Bosnia and Hercegovina, important work has been done by Larisa Jašarević (senior lecturer, Chicago University) on the revitalisation of medical pluralism due to the reappearance of traditional and the appearance of new, more global alternative forms of medical knowledge (Jašarević 2011), on traditional and alternative medicine between the commoditization and gift economy (2012a), and on healing practice of *strava* (“great fear”) that seems to be competing with psycho-pharmaceutical treatments of anxiety and depression (2012b).

Like elsewhere where medical anthropology has emerged recently, the challenges for its further development at the national level are numerous. Although programmes involving some medical anthropology issues already exist and anthropologists are recognised by national and international organisations as partners in projects to some extent, further institutional grounding (funded anthropological projects, and not just medical projects with anthropological participation; separate course/s on medical anthropology, colloquia and conferences, publications and international collaboration) are much needed. It would also be useful to encourage projects concerning applied medical anthropology.

REFERENCES:

- Baroš S., Bojan, Ž., 2006. Kvalitativna istraživanja u okviru „Druge generacije nadzora nad HIV-om“ [Qualitative Researches Within Second Generation Surveillance for HIV]. *Socijalna misao*, 13 (3), pp. 57-75.
- Baroš, S., 2006. Kondom kao simbol profesionalnosti kod osoba koje se bave seksualnim radom u Beogradu [Condom as a Professional Symbol Among the Persons Engaged in Sex Work in Belgrade]. *Glasnik Etnografskog instituta Srpske akademije nauka i umetnosti*, 54, pp. 201-217.
- Baroš, S., 2008. Dejstvo okruženja na upotrebu kondoma među seksualnim radnicima/radnicama u Beogradu: kvalitativno istraživanje [The Effect of Environment on Condom Use Among the Sex Workers in Belgrade]. *Glasnik Instituta za javno zdravlje Srbije*, 80 (3), pp.13-18.
- Baroš, S., Bojan, Ž., 2010. Faktori rizika na mogućnost inficiranja HIV-om i rizično ponašanje među muškarcima koji imaju seks s muškarcima i ženama (MSMŽ) [HIV Risk Factors and Risk Behaviour Among Men Having Sex with Men and Women]. *Istraživanja među populacijom pod povećanim rizikom od HIV-a i među osobama koje žive sa HIV-om. Osnovni rezultati nadzornih istraživanja 2009-2010*. Beograd: Ministarstvo zdravlja Republike Srbije, pp. 333-358.
- Baroš, S., Bojan, Ž., 2010. Kontekstualni faktori koji utiču na nekorišćenje zdravstvenih usluga infektivnih klinika – odeljenja za HIV/AIDS među osobama sa HIV-om (PLHIV) [Contextual Factors Discouraging the Use of Health Services of Infectious Disease Hospitals – HIV/AIDS Clinics Among the Persons with HIV]. *Istraživanja među populacijom pod povećanim rizikom od HIV-a i među osobama koje žive sa HIV-om. Osnovni rezultati nadzornih istraživanja 2009-2010*. Beograd: Ministarstvo zdravlja Republike Srbije, pp. 359-380.
- Bassioni, S. F., and S. Baroš, Z. Čakić, D. Šormaz, E. Kuneski, et al., 2006. *Živeti sa HIV-om* [Living with AIDS]. Beograd: Institut za javno zdravlje Srbije „Milan Jovanović Batut“, Nacionalna kancelarija za HIV/AIDS.
- Bernays, S., and T. Rhodes, A. Prodanović, 2007. *HIV treatment access, delivery, and uncertainty. A qualitative study in Serbia and Montenegro*. Belgrade: United Nations Development Programme Report, Belgrade.
- Cvijić, J., 1922. *Balkansko poluostrvo i južnoslovenske zemlje I* [The Balkan Peninsula and the South Slavic Lands I]. Beograd: Državna štamparija Srba, Hrvata i Slovenaca.
- Cvijić, J., 1931. *Balkansko poluostrvo i južnoslovenske zemlje II* [The Balkan Peninsula and the South Slavic Lands II]. Beograd: Geca Kon.
- Dokić, G., 2008. Embodiment of Trauma through Performative Acts of Remembering. *Platform: Journal of Graduate Students in Anthropology*, 9, pp. 25-41.
- Dokić, G., 2009. *Psychosocial Transition in a Postsocialist Context: Post-Traumatic Stress Disorder in Croatian Psychiatry*. Unpublished MA Thesis. University of Victoria. Available at: <http://hdl.handle.net/128/1490>.
- Dvorniković, V. 1939. *Karakterologija Jugoslovena* [Characterology of the Yugoslavs]. Beograd: Geca Kon.
- Đorđević, V., 1872. *Narodna medicina u Srba* [Serbian Popular Medicine]. Novi Sad: Srpska narodna zadružna štamparija.
- Đorđević, T. R., 1908. *Medicina u Srbiji prvih godina vlade Kneza Miloša* [Medicine in Serbia during the early years of Prince Miloš' reign]. Beograd: Državna štamparija.
- Đorđević, T. R., 1930. *Naš narodni život I* [Life of our people]. Beograd: Geca Kon.
- Đorđević, T. R., 1938. *Zle oči u verovanju i običajima Južnih Slovena* [The evil eye in the beliefs and customs of South Slavs]. Beograd: Srpski etnografski zbornik LIII.
- Đorđević, T. R., 1958. Priroda u verovanju i predanju našeg naroda. *Srpski etnografski zbornik* 72, Život i običaji 33.
- Đorđević, T. R., 1965. *Nekolike bolesti i narodni pojmovi o njima* [Some diseases and their popular conceptualisations]. Beograd: Srpska akademija nauka i umetnosti, Građa XVI, Odeljenje medicinskih nauka knj. 2.
- Đurić S. M., Hadžinikolić, Č., eds., 2000. *Antropologija bolesti i zdravlja* [Anthropology of illness and sickness], Beograd: Želnid - preduzeće za železničku izdavačko-novinsku delatnost, Zavod za zdravstvenu zaštitu radnika ŽTP Beograd.
- Hadžinikolić, Č., 1991. *Halucinogeni ritual kao psihoterapijski postupak u nekim plemenima gornje Amazonije* [Hallucinogenic ritual as a psychotherapeutic procedure in some tribes of Upper Amazonia]. PhD. thesis, unpublished manuscript. Belgrade: Faculty of Philosophy, University of Belgrade.
- Ivanović, Z., 2002. Na koga liče deca? Srodstvo kod Srba i principi percepcije sličnosti među srođnicima [Who Do Children Take After: Serbian Kinship and Principles of Perceiving the Resemblance Between Kin]. In *Životni ciklus u gradskoj sredini*. Beograd: Posebna izdanja EI SANU, knj. 48, pp. 375-408.
- Ivanović, Z., and P. Šarčević, 2002., Uvod: O statusu tela u antropologiji [Introduction: On Body Status in Anthropology]. *Antropologija tela, Kultura*, 105-106, pp. 9-26.
- Ivanović Z., 2003., „Antropologija žene“ i pitanje rodnih odnosa u izmenjenom diskursu antropologije [„Anthropology of Women“ and the Question of Gender Relations in Changed Discourse of Anthropology]. In Ž. Papić, L. Sklevicky, eds., 2003. *Antropologija žene*. Beograd: Drugo izdanje, XX vek, pp. 381- 435.
- Jasarevic, L., 2011. Lucid Dreaming: Revisiting medical pluralism in postsocialist Bosnia. *Anthropology of East Europe Review*, 29 (1), pp. 109-126.
- Jasarevic, L., 2012a. *Three Lights on the Queen's Face: On Mixing, Muddle, and Mêlée*. Religion & Culture Web Forum. The Martin Marty Center for the Advanced Study of Religion.

- Available at: <http://divinity.uchicago.edu/martycenter/publications/webforum/042012/Jasarevic%20Web%20Forum%20Final%20.pdf>. [Accessed 15 June 2013.]
- Jasarevic, L., 2012b. Pouring out Postsocialist Fears: Practical Metaphysics of a Therapy at a Distance. *Comparative Studies in Society and History*, 54 (4), pp. 914-941.
- Jovanović, B., ed., 1991. *Ethnopsihologija danas* [Ethnopsychology Today]. Beograd: Dom kulture "Studentski grad".
- Krstić, M., 2012. Zdrava porodica i uspešno roditeljstvo: antropološka analiza Internet medija o očuvanju matičnih ćelija u Srbiji [Healthy family and successful Parenthood: an Anthropological Analysis of Stem Cell Banking in Serbian Internet Media]. *Antropologija / Anthropology*, 12 (3). (Forthcomming.)
- Kuneski, E., 2006. Štek: susret dva sveta. Urbana legenda beogradskih intravenskih korisnika droge [„Štek“: When Two Worlds collide. Belgrade Injecting Drug Users' Urban Legend]- *Antropologija / Anthropology*, 2, pp. 35-44.
- Kuneski, E., 2011. *Društvena i prostorna organizacija MSM populacije u Beogradu* [Social and Spatial Organisation of Men Who Have Sex With Men/MSM Population in Belgrade]. PhD. thesis, unpublished manuscript. Belgrade: Faculty of Philosophy, University of Belgrade.
- Lazarević, A., 1975. Seksualna potencija-impotencija kao pojam u našim narodnim običajima [Sexual Potency/Impotence as a Concept in Our Popular Customs]. *Glasnik Etnografskog instituta*, 24, pp. 115-127.
- Lazarević, A., 1977. Hirurgija i ortopedija u narodnoj medicini kod Srba [Surgery and Orthopedics in Serbian Popular Medicine]. *Glasnik Etnografskog instituta*, 26, pp. 95-117.
- Lazarević, A., 1979. Kontracepcija u našoj etno-medicini i njena primena u savremenoj zdravstvenoj zaštiti [Contraception in Our Ethnomedicine and Its Use In Contemporary Health Prevention Practice]. *Glasnik Etnografskog instituta*, 28, pp. 153-160.
- Malešević, M., 2000. Reklamna bajka o zdravom duhu u vitkom telu [An Advertising Fairy Tale of the HealthyMind in the Slender Body]. In M. Đurić-Srejić, Č. Hadžinikolić, eds., 2000. *Antropologija bolesti i zdravlja*. Beograd: Želnid - preduzeće za železničku izdavačko-novinsku delatnost, Zavod za zdravstvenu zaštitu radnika ŽTP Beograd, Srpsko antropološko društvo, pp. 161-168.
- Malešević, M. 2002. Menopauza-poslednja misterija krvi [Menopause- The Last Mystery of Blood]. In *Običaji životnog ciklusa u gradskoj sredini*. Beograd: Etnografski inštiut Srpeke akademije nauka i umetnosti, Posebna izdanja knj. 48, pp. 199-215.
- Mandić, B., 2008. Kulturni aspekti olfaktornmog iskustva [Cultural Aspects of Olfactory Experience]. MA thesis, unpublished manuscript. Belgrade: Faculty of Philosophy, University of Belgrade.
- Nikolić, Stojančević, V., 1971. Prva sanitetska služba i zdravstvene prilike u oslobođenim krajevima 1877-1878. godine [The First Battlefield Medical Service and Health Situation in the Regions Freed in 1877-1878]. In *Zbornik XXI naučnog sastanka, Niš: Naučno društvo za istoriju zdravstvene kulture Jugoslavije*, pp. 69-75.
- Nikolić Stojančević, V., 1972. Uloga Aleksinačkog karantina u migracionim kretanjima u Srbiji i novooslobođenim krajevima do 1878. godine [The role of Aleksinac Quarantine in the Migration Within Serbia and Newly freed Regions Up To 1878]. *Arhiv za istoriju zdravstvene kulture Srbije*, 2 (2), pp. 195-199.

- Nikolić Stojančević, V., 1973. Uputstva i naredbe dalmatinske provincijalne uprave za suzbijanje kuge i kolere na zadarskom području 1814-1831 [Guidelines and Orders of the Municipal Government in Dalmatia for Checking the Spread of Plague and Cholera in the Region of Zadar 1814-1831]. *Acta- časopis jugoslovenskog društva za istoriju medicine*, 13 (2), p. 155.
- Nikolić Stojančević, V., 1973. Prvi medicinski i akušerski kadar vranjanskog okružnog fizikata 1903-1906 [The First Medical and Midwifery Staff in the Municipality of Vranje 1903-1906]. *Arhiv za istoriju zdravstvene kulture Srbije*, 2 (2), pp. 143-146.
- Pavlović, M., 1999. Pojam bolesti u različitim medicinskim sistemima [The Concept of Illness in Different Medical Systems]. *Glasnik Etnografskog instiuta Srpske akademije nauka i umetnosti*, 48, pp. 95-106.
- Piše, M., 2012. "Zovite ih po očevima njihovim". Muška sterilnost i nove reproduktivne tehnologije u svetlu islama ["Name Your Adopted Sons After Their Fathers". Male Sterility and the New Reproductive Technologies in the Light of Islam]. *Antropologija / Anthropology*, 12 (3), pp. 155-167.
- Prodanović, A., Žikić B., Rhodes T., and Kuneski, E., 2005. Delenje pribora za ubrizgavanje droge kao faktor rizika za HIV/HCV među intravenskim zavisnicima u Beogradu [Distribution of Drug Injection Equipment as a Risk Factor for HIV/HCV Among the Intravenous Addicts in Belgrade]. In B. Шуловић, B. Цуцић, and Д. Илић, eds. 2005. *Intervencije i programi za posebno vulnerabilne grupe za SIDU*. Beograd: Srpska akademija nauka i umetnosti – Međudeljenski odbor za SIDU / Asocijacija za borbu protiv SIDE JAZAS. Pp. 173-185.
- Prodanović, A., 2006. HIV risk and prevention in Serbia and Montenegro: Research, policy and action. *Antropologija / Anthropology*, 1, pp. 127-131.
- Rhodes, T., Žikić, B., Prodanović, A., Kuneski, E., Bernays, S., 2008. Hygiene and uncertainty in qualitative accounts of hepatitis C transmission among drug injectors in Serbia. *Social Science & Medicine*, 66 (6), pp. 1437-1447.
- Rhodes, T., and A. Prodanović, B. Žikić, E. Kuneski, T. Pavićević, D. Karadžić, S. Bernays, 2008. Trust, disruption and responsibility in accounts of injecting equipment sharing and hepatitis C risk. *Health, Risk & Society*, 10 (3), pp. 221-240.
- Rhodes T., and M. Simić, B. Sladana, L. Platt, B. Žikić, 2008. Police violence and sexual risk among female and transvestite sex workers in Serbia: qualitative study. *BMJ* 337; a811.
- Romelić, Ž., and V. Tojaga, 1999. Neke karakteristike alternativne medicine danas [Some Characteristics of Alternative Medicine Today], In *Za zdravlje. Iz istorije narodne medicine i zdravstvene kulture*, Zaječar: Narodni muzej Zaječar i Zavod za zaštitu zdravlja Zaječar.
- Simic M., and J. L. Grazina, L. Platt, S. Baros, V. Andjelkovic, T. Novotny, T. Rhodes, 2006. Exploring Barriers To 'Respondent Driven Sampling' In Sex Worker And Drug-Injecting Sex Worker Population In Eastern Europe. *Journal of Urban Health*, 83 (1), pp. 6-15.
- Simić D., and Z. Gledović, J. Zajeganović, S. Baroš, 2008. Procena prevalencije HIV i virusne hepatitisa C infekcije, faktora rizika, rizičnog ponašanja i korišćenja usluga u populaciji injektirajućih korisnika droga u Beogradu, Novom Sadu i Nišu [Assessment of the Prevalence of HIV and Hepatitis C infection, Risk factors, Risk Behaviour and the Use of Ser-

- vices Among the Population of Intravenous Drug Users in Belgrade]. *Glasnik Instituta za javno zdravlje Srbije*, 80 (3), pp. 1-7.
- Srdić, A., 2008. Telo i telesnost u antropološkoj perspektivi [The Body and Corporality in an Anthropological Perspective]. *Glasnik etnografskog muzeja*, 72, pp. 93-105.
- Srdić Srebro, A., 2009. Medicinska antropologija i/ili antropologija zdravlja i bolesti [Medical Anthropology and/or Anthropology of Health and Illness]. *Etnološko-antropološke sveske*, 14 (3), pp. 79-92.
- Srdić, A., 2009. Uticaj dalekoistočnih isceliteljsko-meditativnih tehnika na promenu predstava o telnosti u Srbiji [Impact of Far East healing and meditative techniques on changing notions of corporality in Serbia]. MA thesis, unpublished manuscript. Belgrade: Faculty of Philosophy, University of Belgrade.
- Trifuljesku, S., 2010. Od telesne razlike do „invalidnosti“ u savremenoj Srbiji: između diskursa i iskustva [From body difference to „disability“ in contemporary Serbia: between discourse and experience]. MA thesis, unpublished manuscript. Belgrade: Faculty of Philosophy, University of Belgrade.
- Trifuljesku, S., 2012. Political technology of “disability”. *Antropologija / Anthropology*, 12 (3). [Forthcoming.]
- Žikić, B., 2006. *Antropologija AIDS-a. Rizično ponašanje intravenoznih korisnika droge* [Anthropology of AIDS. Risk Behaviour of Intravenous Drug Users]. Beograd: Filozofski fakultet i Srpski genealoški centar, Etnološka biblioteka knj. 19.
- Žikić, B., 2006. Anthropology of AIDS. Risk environment and injecting routine. The case of Belgrade injecting drug users. *Issues in Ethnology and Anthropology*, 1 (1), pp. 35-46.
- Žikić, B., 2006. Managing HIV/HCV-related Risk at Private Places Among Belgrade Injecting Drug Users. *Bulletin of the Institute of Ethnography*, 54, pp. 189-199.
- Žikić, B., 2006. Antropološka analiza HIV-vulnerabilnosti i rizičnog ponašanja u Beogradu [Anthropological Analysis of HIV Vulnerability and Risk Behaviour in Belgrade]. In Z. Divac, ed., 2006. *Svakodnevna kultura u postsocijalističkom periodu u Srbiji i Bugarskoj*, Beograd: Etnografski institut SANU, 22, pp. 57-75.
- Žikić, B., 2006. Generally Mistreated Bodies: Injecting Drug Users, Their Habits, and Law Enforcement. *Symposia - Journal for Studies in Ethnology and Anthropology*, pp. 259-272.
- Žikić, B., 2007. Injecting Drug Users' Utilisation of Public Space in Belgrade: Places, Risk-management, and Habitual Life. *Bulletin of the Institute of Ethnography*, 55 (1), pp. 103-114.
- Žikić, B., 2008. *Rizik i nasilje. Antropološko pručavanje seksualnog rada u Beogradu* [Risk and Violence. An Anthropological Investigation into Sex Work in Belgrade]. Beograd: Odeljenje za etnologiju i antropologiju Filozofskog fakulteta i Srpski genealoški centar.
- Žikić, B., 2008. „Neukročena goropad“: upravljanje reprodukcijom kao kulturna praksa [The Untamed “Shrew”: Managing Reproduction as Cultural Practice]. *Etnoantropološki problemi*, 3 (1), pp. 143-157.
- Žikić, B., 2009. The Same Risk, the Different Vulnerability? Social Environment as Risk-Generating Factor in Injecting Drug Users and Sex Workers. *Issues in Ethnology and Anthropology*, 4 (1), pp. 149-162.

- Žikić, B., 2011. Društveni činioci zdravstvene vulnerabilnosti marginalizovanih društvenih grupa [Social Factors of Health Vulnerability of Marginalized Social Groups]. *Etnoantropološki problemi*, 6 (3), pp. 783-805.
- Žikić, B., 2011. Reproduktivno zdravlje i reproduktivna vulnerabilnost [Reproductive Health and Reproductive Vulnerability]. *Etnoantropološki problemi*, 6 (4), pp. 885-903.
- Živanović, S., 1997. *Medicinska antropologija. Pogledi i razmišljanja* [Medical anthropology. Views and considerations]. Beograd: Akademia nova.

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