

Max Planck Research Group Lipphardt: Colloquium series, August and November, 2013.

The seminars take place in Room V005, in the seminar room of the Villa, Harnackstraße 5. If you have not visited us before, the Villa is 2 minutes walk away from the back entrance of the MPIWG, and you can get in with your white key-card. The seminar room is on the ground floor on the right-hand side through the glass fire door.

28th August: Maria Letitia Galluzzi Bizzo, Federal University of Rio de Janeiro.

From colonial to international nutritional standards: the episteme of human variation and the biopolitics of difference (1932–1951)

(This paper will be circulated a week before the colloquium.)

Nutrient recommendations are charged with social, ethical and historical meaning. This paper examines how the episteme of the human variation, originating in colonial practices, was articulated with social conjunctures, historical contexts and tacit cultural assumptions, in the shaping of an authoritative, international rule of difference regarding human nutritional standards. Constructed by the League of Nations (1930s) and later by the FAO (1950s) by scientists formed in the ‘live laboratories’ of the colonies, they became programmatic constructs in medical governance and scientific initiatives. They consisted in lower calories patterns (in comparison to those delivered for the Western peoples) and locally based (instead of international) nutrition standards, and involved the employment of more rudimentary methods of evaluation of body nutritional status as well. The paper will explore the biological and social arguments that grounded nutritional standards, and their underlying scientific and political ambiguities.

29th August: Johanna Gonçalves Martin, University of Cambridge.

What is ‘indigenous health’ in Venezuela? An anthropological (mis)understanding.

In this talk I will explore the construction of diversity by those practicing biomedicine and research in the Upper Orinoco in Venezuela, and in recent policies for Indigenous Peoples which go under the banner of ‘indigenous health’. Through my case study of the Yanomami, and of the doctors or researchers who have been involved with them, I trace how the Yanomami have been constituted as ideal subjects of medical research and care, and how biological and cultural differences are articulated in practice. This is only part of the story, however, and I argue that going further requires that we pay attention to what Indigenous Peoples—in this particular case, the Yanomami—have to say themselves about the care provided in health posts, the collection of data in the context of research, and other practices which come to be known as ‘health’ (in Yanomami people’s own words, the ‘path of health’). However, an ethnographical approach suggests that most of the time there is no real understanding. Ethnography happens in a space in which the anthropologist learns more

from the constant misunderstandings, refusals and reverse anthropologies he or she is subjected to. This has methodological relevance for the recent efforts in gaining distance from an Eurocentric historical narrative about knowledge, and renders in all its complexity the task of taking into account the difference of thought of the Other.

30th August: Ricardo Ventura Santos, Oswaldo Cruz Foundation and National Museum, Rio de Janeiro.

Pharmacogenomics, color/race and human population genetic diversity: A view from Brazil (co-authored with Glauca Oliveira da Silva, Federal Fluminense University, Rio de Janeiro).

(This paper will be circulated a week before the colloquium.)

Public funding for research on the action of drugs in countries like the U.S. requires that racial classification of research subjects should be considered when defining the composition of the samples as well as in data analysis. In a controversial arena, once race is included in research designs, it is created the possibility of interpreting that whites and blacks are so distinct that pharmacogenes present in the genetic background of black people would be absent from the genetic background of white and vice versa. In Brazil, pharmacogenomic results have led to very different interpretations when compared to those obtained in U.S. This is explained as deriving from the genomic heterogeneity of the Brazilian population. The premise is that admixture prevents the direct association between color and genetic ancestry. This paper addresses the relationship between scientific practice and the naturalization of social values in biomedical research. Our data derive from anthropological investigation conducted in INCA (Brazilian National Cancer Institute) with a focus on the drug warfarin, which are compared with similar data derived from research carried out in the US and Europe. The criticism of Brazilian scientists regarding the uses of racial categorization includes a revision of mathematical algorithms for drug dosage widely used in clinical procedures around the world. Our analysis reveals how the incorporation of ideas of racial purity and admixture, as it relates to the efficacy of drugs, touches on issues related to the possibility of application of pharmaceutical technologies on a global scale.

26th November, Kathryn Ticehurst, University of Sydney.

'First Encounters': anthropological field work in 'mixed race' Aboriginal communities in Australia, 1940–1965

In Australia between 1940 and 1965, several anthropologists including Diane Barwick, Jeremy Beckett, Ruth Fink, Marie Reay and Judy Inglis undertook research in Aboriginal communities labelled as "mixed race." This term had a confused application even at the time, referring to communities which self-identified as Aboriginal, but which government authorities viewed as transitional and assimilable. Such communities were neither bounded nor isolated and they presented theoretical and methodological challenges to anthropological study. These young researchers found themselves in a period of change: the traditional,

colonial “anthropologist-subject” relationship was increasingly recognised as problematic and in need of re-theorising. They searched for new ways to conceptualise cultural identities, struggling to disentangle old racial definitions from the lived reality of Aboriginal communities. I examine the interactions which constituted their fieldwork in order to trace changes in anthropological understandings of Aboriginal identity.

28th November: Jenny Bangham, Max Planck Institute for the History of Science

Making human difference genetic in the 1950s

This paper considers some of the varied practices that went into making populations into legible biological entities in the 1950s, work that was not simply self-evidently ‘biological’. Similar to other recent historical studies, I describe how the construction of blood groups as devices for producing human biological difference relied on notions of kinship, racial and national identity, multiple historical traditions, and questions and practices imported from geography and anthropology. But it is my argument that, this recourse to ‘cultural’ knowledge was not disingenuous or naïve, as some have implied; rather, this made blood-group genetics distinctively ‘human’. The paper concerns the work of Arthur Mourant, avid collector of blood groups and prolific author of what he called ‘blood group anthropology’. By calibrating his blood-group frequency data researchers like Mourant sought to give it the potential to reveal new knowledge about human difference and identity, even if the production of that knowledge was constantly deferred. By focusing on blood groups I outline an account of the way in which human difference was made genetic, and about how genetics was made human.