

# NEWS

**The future is looking up. Recent ONS data suggests that 80 per cent of adults in the UK had received at least one COVID-19 vaccine dose by June 2021, with 57 per cent fully vaccinated. We are optimistic that these positive trends will mean that we can all return to campus soon.**

Yet these statistics for the UK mask the large inequalities in access to health around the Globe. Less than six per cent of the world population had been vaccinated at the time of writing; and in countries such as Ecuador (5.2 per cent), India (3.4 per cent), the Philippines (1.56 per cent) and Uganda (0.01 per cent), the majority of adults has not yet been offered a vaccine. There is much work to be done, and GHSM will play a pivotal role in shaping the conversation on what the next stage of the COVID-19 response will mean for the lives of millions of people around the globe.

It has been a challenging year, but challenges have also brought with them new opportunities and prompted positive changes. We are thrilled to celebrate our students' graduations – hats off to one of the most resilient cohorts to have ever passed through Bush House and logged into MS Teams!

And there have been exciting developments: Dr Hanna Kienzler, Reader at GHSM, has been appointed as interim co-Director of the Centre for Society & Mental Health. In this new role she has already demonstrated leadership by co-chairing the inaugural Centre conference, [Social Change, Inequality and Mental Health: Shifting the Narrative](#), which took place 23–25 March this year. Dr Nancy Tamini has been appointed GHSM lecturer in education. Dr Nele Jensen has taken over as Director of Internships and Career Lead, and will share career-related events in global health and related areas.

We welcome [Dr Lucy van Der Wiel](#) in August this year as lecturer in GHSM. Dr van Der Wiel's research focuses on the social analysis of new biomedical technologies, with a

particular focus on reproductive and data-driven technologies.

This year was an important research landmark as we delivered our 2021 Research Excellence Framework (REF) submissions. Representing sociology at King's College London, GHSM submitted 59 academic papers, nine books, and three impact case studies that are testament to the Department's high-quality research, with 75 per cent of outputs internally rated as four-star. Many thanks to Professor Karen Glaser, Dr Courtney Davis and James Gagen, who led this effort. In the 20/21 academic year, the department also submitted grant applications for over £11 million, up from 10 million in 19/20. [Professor Lochlann Jain](#) was awarded a prestigious [Guggenheim Fellowship](#), intended for 'individuals who have already demonstrated exceptional capacity for productive scholarship or exceptional creative ability in the arts.' Ahead of the G7 Conference, Drs Ann Kelly, Nele Jensen and Hanna Kienzler contributed to the School of Global Affairs' series [G7 Build Back Better Together](#), showcased in [Our Sick Society](#) podcast.

We hope everyone can take some time to relax in the summer. The work in the past year by faculty, professional services and our students has been remarkable. We look forward to a new academic year with restored energy and resolve.



**Professor Mauricio Avendano Pabon** HOD  
**Dr Ann Kelly** Deputy HOD

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## Farewell to Susan Chandler



Susan Chandler, who has worked in professional services with GHSM since 2012, is retiring and will be sorely missed! Susan first started working

in GHSM as Nik Rose's personal assistant in May 2012.

Susan says of her retirement plans:

**'I am planning to spend a lot more time in the garden over the summer. I have only had a garden for four years and it has been a steep learning curve. I also hope to start swimming and to go back to Pilates classes. Quite a few of my school friends have moved to the coast recently, so I will be visiting them in Herne Bay, Ramsgate, Deal and Whitstable.'**

Susan's fondest memory of GHSM to take with her?

**'The wonderful staff and students and their commitment to making the world a better place.'**

We wish Susan a wonderful retirement and will miss her dearly.

## Hanna Kienzler appointed interim Co-Director of the Centre for Society and Mental Health

**The Centre is a unique cross-faculty collaboration between GHSM at the Faculty of Social Science & Public Policy and the Institute of Psychiatry, Psychology & Neuroscience.**

**H**anna's appointment will be for one year initially, during which she will work with Craig Morgan to co-direct the Centre. Hanna has been a key member of the Centre, co-leading on the Marginalised Communities Programme and the Innovative Methods platform, as well as collaborating with colleagues across the faculties. ■



## Christine Aicardi invited to be an expert panellist

**Christine Aicardi was invited to be an 'expert' panellist at the inaugural online event of Tales from the Cybersalon, a series of interdisciplinary, technology and policy investigations through science-fiction storytelling organised by Cybersalon, the UK-based collective and think-tank activities of Digital Liberties Ltd.**

**T**his thinktank focuses on the process and effect of the digital revolution in industry, society and its emerging digital cultures. The event on 30 March 2021 featured four newly commissioned speculative short stories by sci-fi writers Benjamin Greenaway, Britta Schulte, Jule Owen and Stephen Oram, exploring dystopian imaginaries of digital health. The writers gave a live reading of their stories, which was followed by a panel conversation between the writers and the night's three 'experts' Prof Lucy Hooberman (Warwick University), Angus Fraser (AI developer and tech entrepreneur) and Dr Aicardi. The writers made it all too easy to relate to the stories' protagonists, whose ordeals triggered much discussion around important issues such as privacy, surveillance, new forms of extractive capitalism, personalisation and social (in)justice. You can read a [full account](#) of the evening by Eva Pascoe, co-chair of Cybersalon or better, [watch](#) the recording of the evening. ■





## International Impact Funding awarded for the project Achieving community integration and participation of persons with mental illness in Palestine and Ghana

**Hanna Kienzler and her colleagues Ursula Read (GHSM), Rita Giacaman (Birzeit University in Palestine) and Annabella Opere-Henaku (University of Ghana) will develop and test democratic and inclusive methods for mental health advocacy and policy influence following an innovative approach combining deliberative dialogue with co-production and artistic experimentation.**

In Ghana, they will co-create radio programmes featuring ethnographic vignettes and commentaries by persons with mental illness. In Palestine, they will create interactive virtual platforms to disseminate an illustrated storybook and animated videos co-produced with people with mental illness. Both platforms are spaces for public deliberation prompting stakeholder-participants and the general public to share their impressions, reflect on their values, make suggestions for improving the lives of persons with mental illness, and make pledges of a small change they seek to implement in their daily lives. Based on this, they will develop a guidance document highlighting generalisable practices for the development of inclusive and locally meaningful knowledge dissemination, policy influence, and social change in the field of mental health. ■

## Around GHSM



**Zara Shaikh** with her supervisors Hanna Kienzler and Dörte Bemme were awarded a LISS DTP studentship for the PhD project *The mental health of adolescent refugees in the UK: Understanding the lived experiences of marginalisation, resilience and support in challenging social conditions.*



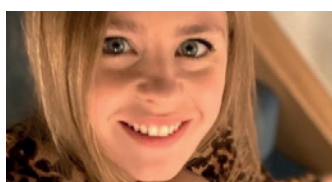
**Joel Janhonen** (MSc Bioethics & Society) undertook an internship placement in the Finnish Institute of Bioethics. Joel compiled a literature review in cooperation with the chairman of the board Heikki Saxén and Arja Halkoaho from the Tampere University of Applied Sciences on the topic of the use of normative terms in the assessment of pathogenic variants.



**Yu Xuan** (MSc Bioethics & Society) published his dissertation as [an article](#) in *Sport Ethics and Philosophy*, the official journal of the British Philosophy of Sport Association. Yu is also a professional equestrian and competes with the Hong Kong team.



**Dr Sara Dahlen** (MSc Bioethics & Society) published [an article](#) titled *Dual Uncertainties: On Equipoise, Sex Differences and Chirality in Clinical Research* in the *New Bioethics* and is also first author of a new [systematic review](#) of international clinical practice guidelines for gender minority/trans people. Dr Dahlen, a medical doctor, will join the GHSM PhD cohort in the next academic year, funded by LISS-DTP for the project *Genetic sex and uterine donation? Re-examining the Montreal Criteria for the Ethical Feasibility of Uterine Transplantation.*



**Sophia McCully** (MSc Bioethics & Society) published a paper in the *Journal of Medical Ethics*, on the topic of extending the 14 day rule for embryo research. ■

## GHSM Anti-Racism Steering Group awarded 20/21 Race Equality and Inclusive Education Fund

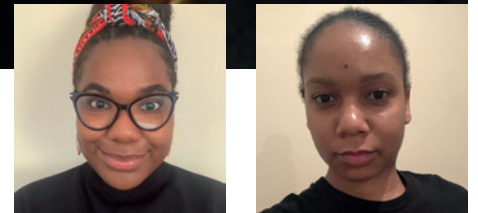
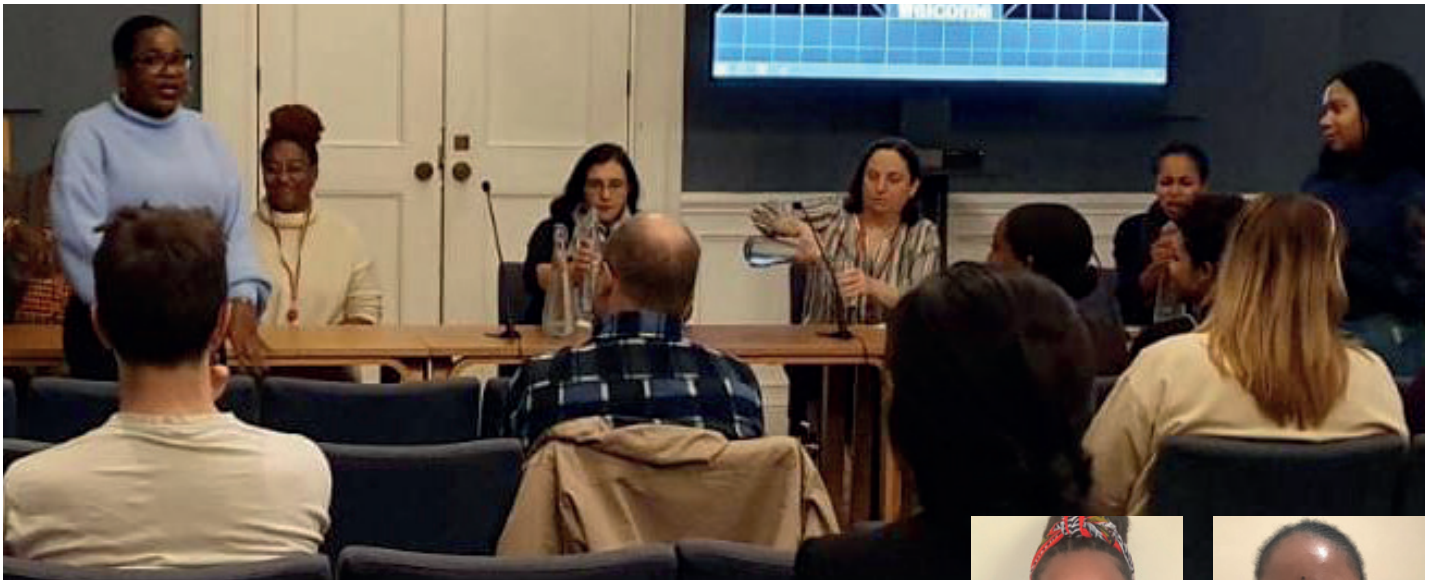
**The Anti-Racism Steering Group pilots two interconnected projects to begin closing the BME attainment gap and decentralising our curriculum.**

**C**losing the BAME attainment gap involves implementing a student-staff led UG BAME mentoring scheme and showcasing BAME talent and new leaders.

*Decentralising the curriculum* focuses on

- Creating Reflexive Hubs where staff and students talk sensitively about racial discrimination; the colonial legacies shaping our field; and amplifying silenced contributions by BAME scholars.
- Providing new role models by inviting experts from the 'Global South' to contribute guest lectures on some of our modules.

Additionally, the Anti-Racism Steering Group started the process of developing a secure complaints system for students and staff who wish to raise sensitive issues within the department related to discrimination, bullying and harassment. Please contact [Hanna Kienzler](#) with any questions. ■



# GHSM BAME Committee report

by **Shirley João Do Nascimento** and **Patricia Jairos**

**As our time in the Global Health & Social Medicine department comes to a close, we look back at the Spring Semester events and initiatives of the GHSM BAME Committee. We would like to thank our committee members and the allies we have built along the way that have contributed to creating a space of learning, growth and pride.**

The Committee has continued to develop along two key streams – building our department community and continuing to raise awareness of current social and health issues. Our members have continued to work with the Anti-Racism Steering Group to improve the inclusion of GHSM BAME students. A highlight is the GHSM BAME Mentoring scheme, an initiative culminating from our summer reports that provided a system where first-year BAME students could be supported academically and socially by BAME student mentors from second and third-year. In creating this initiative, we hoped to help new students navigate a new academic setting, particularly in the COVID-19 era.

**'I joined the BAME mentoring scheme because whilst navigating my first year at university, I felt lost with all the changes. I know I would have benefited from a mentor to help me better navigate King's and our department. What makes this scheme special is that it is from BAME students for BAME students. We share a similar understanding and can provide each other with tips and needed support. The most rewarding aspect for me has been to see how first-years look at global health – their fresh perspectives and the opportunities I have to learn from them.'**  
Chanelle Scott, third-year student.

We were also motivated to improve students' understandings of what a career in Global Health & Social Medicine, particularly in a post-pandemic world, might entail, so we created *Coffee Breaks: Talks with Alumni*, where students had the opportunity to hear from alumni in different areas of global health such as academia, non-governmental organisations and civil service.

Our committee strives for diversifying conversations regarding social issues through group discussions, panels and debates. We were touched by emerging data underlining that during COVID-19, all types of violence against women intensified in what has been called the Shadow Pandemic. Consequently, we focused our awareness-raising stream on health and gender. In March we focused our Instagram platform on issues such as Racial Disparities in Maternal Health, and we led a panel on Understanding Menstrual Equity, joined by advocates, journalists and businesswomen who have played a crucial role in achieving menstrual equity in Zimbabwe, Nepal and the United States. We also hosted a talk by King's professor Cathy McLlwaine on gender-based violence in Latin America, which highlighted the complexity of gender-based violence and the need to move beyond narratives focused on addressing the symptoms and not the causes.

Throughout our time at King's GHSM BAME we have learned a lot about what it takes to transform concepts explored in class into initiatives 'on the ground', the mindset and skills to build successful community interventions. We had the opportunity to learn more about the role of BAME members and allies in building a global health landscape that we can be proud of. In exploring a plethora of topics ranging from Vaccine Apartheid to Gender-based Violence we have reiterated the importance of understanding the role of race, gender and the milieu to create meaningful change. We are proud of our growth and proud to announce that our initiative and values will continue as a ratified university society: the KCL Global Social Justice Society. ■



# Should I care or should I work?

A new study from Ludovico Carrino, Vahe Nafilyan and Mauricio Avendano from the Institute of Gerontology has received significant attention from media outlets including *The Telegraph*, the *Daily Mail*, and the *FTAdviser*, following coverage by the Royal Economic Society (RES) in its newsletter and at the RES 2021 conference.

The paper, titled *Should I care or should I work?* explores the unanticipated consequences of pension reforms on the provision of care within and between generations by adult female workers in the UK. A series of recent reforms postponed the State Pension age for women in the UK by up to six years.

The study shows that female workers who work longer due to the reform reduce significantly the amount of help they provide to older parents, with the effect being larger for women in 'sandwich' care

arrangements or in heavy and inflexible jobs. Crucially, the study also finds that older parents receive less care overall when their daughters face a longer pension age due to the reform. That is, there is no compensation for the foregone care through an increase in, say, formal care use. The social and economic relevance of the topic has attracted the interest of policy makers, who invited Ludovico to speak at a meeting of the All Party Parliamentary Group on Women's Pension on 19 May. ■



## Introducing the KCL Global Social Justice Society

The KCL Global Social Justice Society is a new KCLSU ratified society that will consist of a diverse community of open-minded students engaging with contemporary global affairs. We aim to build a community that takes an interest in the world we live in and to explore ways in which we can contribute to actively shaping it.



Fadak Jaf (Founding President, first-year GHSM student)

With regular academic talks, discussions on current news stories, and career events throughout the year, we will spark discussion between those interested in global affairs and issues of social justice. We will do this through exploring current socio-political issues, such as humanitarian crises and social inequality, from an academic lens, whilst also generating thought-provoking conversations to examine potential solutions and ways to move forward for us to create a more just world.

We look forward to having you with us and you can follow our Instagram page [@kclgsjsoc](https://www.instagram.com/kclgsjsoc) to stay up to date on all our upcoming events and ways in which you can get involved! ■

# MHS book forum on mental health and psychiatry in war and conflict

by Dörte Bemme and Penelope Quinton

**The MHS research group held a book forum on 'mental health and psychiatry in war and conflict,' inviting international authors to present their recently published monographs.**

In February, historian Joelle Abi-Rached (École Normale Supérieure) presented her book: *Aşfuriyyeh, A History of Madness, Modernity, and War in the Middle East* (MIT Press 2020). *Aşfuriyyeh* (formally, the Lebanon Hospital for the Insane) founded by a Swiss Quaker missionary in 1896, was one of the first modern psychiatric hospitals in the Middle East. It closed in 1982, a victim of Lebanon's brutal fifteen-year civil war. Joelle discussed the necessity of employing a *longue durée* approach to examine how developments of modern psychiatric theory and practice intersected with the complex socio-political history of Lebanon. She reflected on *Aşfuriyyeh*'s evolution from a missionary led organisation to its acceptance by the local social elite as a Lebanese organisation with wide regional influence. She showed how the hospital's distinctive non-sectarian philosophy during the civil war was overridden by religious and political actors. The closure of the hospital – its property and building were claimed as *Wqaf* وَقْف (a charitable endowment under Islamic law) by Christian sects in Lebanon – thus epitomizing the collapse of non-sectarianism in Lebanon.

In March, anthropologist Saiba Varma (UC San Diego) presented *The Occupied Clinic. Militarism and Care in Kashmir* (Duke University Press, 2020). Similarly, the book takes a hospital – the Srinagar's Government Hospital in Kashmir – as an anchor to examine the entanglement of psychiatry and war during prolonged armed conflict, occupation and colonialism. The conversation focused on how the inevitable normalisation of violence during prolonged conflict also led to it being normalised

and woven into the spaces and practices of care. For example, the brutalising methods of torture used throughout the conflict leaked into the 'care practices' of psychiatrists – who due to war shortages gave ECT without analgesia. She also explored the histories, terms and counter-imaginaries of health in Kashmir – such as *kamzōrī* – that exceed the colonial and medical lens and defy easy placement as 'local idioms of distress.' Saiba's book is interspersed with poems by Kashmiri poets and her own poetry. She opened the discussion reflecting on a poem at the start of the book titled: *Before* where the conqueror of Kashmir: Akbar the Great's 'empire building' headache was found to be inconceivable to the Kashmiri peasants who encountered him. As with *Aşfuriyyeh* – Saiba Varma's text unravels and mobilizes the *longue durée* histories of war and psychiatry in Kashmir in order to grasp the strands of their longstanding entanglement.

In April, historian Hannah Zeavin (UC Berkeley) presented *The Distance Cure. A History of Teletherapy* (MIT Press, 2021). Responding to the common scripts of critique that sees technologically-supported care as mediated, disembodied and lacking the therapeutic frame or Freud's psychoanalytical practice (physical presence, a room, money exchange), she argued that they do not recognize that in-person psychotherapy is also always already mediated. The emergence of telecare over distances, such as radio therapies after the second world war, suicide or rape support hotlines, and today's AI driven mental health apps, she showed, do change the kind of mediations that take place in care, often by removing money from the equation through free services, and how they re-configured the relationship between scale and depth of care. Anything, she argues, can travel across the screen – empathy, violence, or trust.



Historian Harry Wu

In May, historian Harry Wu presented *Mad by the Millions. Mental Disorders and the Early Years of the World Health Organization* (MIT Press, 2021), detailing the changing politics of universality from the period after World War II to today. Internationalism and universality then were aspirational projects undertaken in the name of emancipation and decolonization. WHO's first director, Canadian psychiatrist Brock Chisholm, coined the idea of 'world citizenship,' which conceived of all humans as one race to be treated equally and universally. Creating standards, and technical knowledge across countries in international collaboration then was a utopia against the backdrop of a divided, wounded world after the war. This contrasts with today critiques of Global Mental Health, for example, which views WHO itself and its practices of international evidence-based standardization as oppressive, colonial forms of knowledge that disregard cultural diversity and self-determination. Harry's tracing of the changing historical contingencies and conditions of possibility of WHO's knowledge production led to a vivid discussion how we view social psychiatry and psychiatric epidemiology today. ■

# Reimagining global social medicine

by **Alice Hilborn** and **Michelle Pentecost** on behalf of the Wellcome Trust Global Social Medicine Network

**The Global Social Medicine Network brings together scholars from all regions who are committed to a vision of social medicine as a vital intersection of social sciences, medical practice and policy.**

Funded by a Wellcome Trust grant and launched at an international conference in London in 2018, our global network links, supports and builds upon existing interdisciplinary programs from social medicine centres across the world. As a co-host of the Global Social Medicine network, GHSM has co-organised a number of network events and publications in 2021, including a mini-conference on ‘Social Medicine from the South’, which took place virtually 26–29 March 2021; an online workshop in May 2021 that focused on capacity-building for early career researchers in Latin America who are working in the fields of social medicine/collective health and are interested in publishing in English-language journals; and a recently published Lancet series on Revitalising Global Social Medicine. Several GHSM academics and affiliates have participated in the network’s activities this year. The workshop was organised by Carlo Caduff, along with Vincanne Adams, Dörte Bemme, Jeremy Greene, David Jones, Anne Pollock and Nikolas Rose, among them current/former editors of the journals *BioSocieties*, *Economy and Society*, *Medical Anthropology Quarterly*, *Transcultural Psychiatry* and the *Bulletin of the History of Medicine*. The participating editors drew on their diverse expertise in order to suggest appropriate social science and biomedical journals to early-career scholars and give multi-stage guidance for how to pursue publishing in them.

The Lancet series was co-edited by Michelle Pentecost, Vincanne Adams, Rama Baru, Carlo Caduff, Jeremy Greene, Helena Hansen, David Jones, Francisco Ortega and Junko Kitanaka (read about the series on the newsletter’s publications page). The conference organising team included Michelle Pentecost, Helena Hansen, David Jones, Junko Kitanaka, Francisco Ortega, and Jeremy Greene (Johns Hopkins University).

**Two questions formed the provocations for the conference: What would it mean to make the so-called ‘South’ the location from which we enter a conversation about social medicine? And, conversely, what would it mean to make social medicine the location from which we enter a conversation about the ‘South’?**

In the first panel, Tinashe Goronga (Centre for Health Equity Zimbabwe) observed that the traditional understanding of the ‘South’ is steeped in ideas of colonialism,

noting that knowledge production has been focused in the North, whilst the South is assumed to be ‘where the data is’. Building on this idea, Mindy Fullilove (The New School) spoke of the so called ‘Fourth World’ – where pockets of the South live within the North. Experiences for these individuals mirror those seen abroad due to imperialism, including the stealing of land, trashing of communities, demeaning customs and denying the intelligence of black people. She pointed to the pivotal study by McCord and Freeman (1990) demonstrating that mortality up to age 65 for black men in Harlem was higher than in Bangladesh. Rama Baru (Jawaharlal Nehru University) posited that the global South is a transnational idea rather than a nation state and should be thought about as a set of attitudes and practices rather than a specific geography. This idea was mirrored by Wen-Hua Kuo (National Yang Ming Chiao Tung University) who asserted that the South was a ‘process’ in social medicine, located in relations between public health, health policy and science diplomacy, inviting capital, agents and actors to be productive. The South can also be thought of as a ‘method’ for social medicine – helping to make visible what is missing in the promise of health on a global scale. Rather than pigeon-holing the ‘South’ as one particular place, it is important that we recognise the ‘South’ is everywhere and take key learnings from this way of thinking about social medicine.





In Panel 2, Kenneth Camargo (Rio de Janeiro State University) gave a detailed history of the development of collective health in Brazil, which he described as a complex field comprising the production of knowledge and direct intervention in health matters, encompassing health policy, planning and management, epidemiology and social science and humanities in health, with an emphasis on critical thinking. Zhiying Ma (University of Chicago) explored mental health care in China. Using this example, she argued for acknowledging the material impact and symbolic legacies of world-historical processes, such as the idea of the Chinese family, as well as incorporating theories of health, illness and disability from the South into research. Positioning research from the South means translating and transforming global discourses, including recognising and rethinking power dynamics and knowledge production in academia. Zhiying notes that the face of the South is in constant flux, and it is important that scholars understand the 'variegated ways in which citizenship is imagined, granted, achieved or denied' in their research setting. Omar Dewachi

(Rutgers University) gave a detailed description of conflict medicine in the Middle East. He noted that the Middle East has often been absent, and even silenced, in global discourses and histories of social medicine, despite having an important contribution to share. He attested to war being a global health crisis and the need for it to be recognised as such. War and conflict medicine is social medicine and cannot be excluded from discussions about the 'South'.

Many questions raised in panel one related to how to apply social medicine learnings to medical education. Tinashe Goronga suggested a number of ways a foundation in social medicine makes him a better doctor, including unlearning the idea of supremacy, listening to communities to reveal one's own biases, and the ability and willingness to critique institutions and neo-liberal structures and to be explicit about colonialism.

Omar Dewachi and Mindy Fullilove tackled the medical curriculum itself. Omar Dewachi reported that there has been a stagnation in learning, with colonial adaptation and the neo-colonial culture of

accreditation failing to reflect the needs of the environment, especially in war zones like the Middle East. The curriculum must be tailored to the realities of place. Mindy Fullilove described a method for connecting medical students with their environment and community by performing a 'Stroll 'n' Scroll' as outlined in her book, *Main Street* (Fullilove, 2020). This involves walking a main street within their neighbourhood and reflecting on what they have seen by creating a 'scroll' including writings and illustrations or photographs. This simple exercise can contribute to a deeper understanding both personally and to those who read the scroll of the issues facing the community and how to support others. Key to these suggestions of changes to medical education is giving people the chance to connect to their community and better understand their place within it.

Cristian Montenegro (Pontificia Universidad Católica de Chile) outlined the Platform for Social Research on Mental Health in Latin America (PLASMA). The platform was set up by a group of PhD students with projects on mental health in Latin America. The group noticed





that Latin America was not part of the conversation on global mental health, and there were very few researchers from this region included in publications. This led to a notional gap in global mental health, where the realities of only a limited number of places had been considered. Social scientists had also only had a very limited role in the field, contributing to a lack of contextual depth to research. PLASMA offers a space to consider global mental health from the perspective of social medicine, opening up this field to scholars from more geographies and disciplines. Eugene Raikhel (University of Chicago) brought forward a similar experiment in scholarly infrastructures and social medicine from the global South. Somatosphere is breaking down barriers to academic publishing. It shares its values with the open access movement, with a dedication to ‘fostering respect and care for divergent communities of scholars’ and paying attention to the ‘inequalities that are fundamental to disciplinary lineages, material conditions... and the economies of citation, prestige and affiliation’ that continue to make social sciences of health

and medicine hierarchical and exclusionary (Appleton et al, 2018).

Language was a topic many of the audience were keen to discuss, including whether English was the appropriate language for Southern scholars to pursue publishing in, or if this was a concession to neo-colonialism. Eugene Raikhel pointed to Somatosphere’s reviews of books published in languages other than English. In Asia, Wen-Hua Kuo has established the journal *East Asian Science, Technology and Society: An International Journal (EASTS)*. This publication champions social medicine from an East Asian perspective and publishes abstracts in both East Asian languages and English. The first issue of the journal included a debate on why the journal was published in English, noting that using English enables scholarship to cross the boundaries between different countries in East Asia. Cristian Montenegro advocated publishing literature reviews in English of social medicine research originally published in other languages to achieve greater recognition of the contribution non-English traditions have to the field.

‘Social Medicine from the South’ provided a wonderful platform to explore different ways of doing social medicine around the globe, and how we can all learn from one another to re-imagine the future of social medicine to create a more equitable world. Doing social medicine from the ‘South’ means going out into communities to hear what health means to them, it means breaking down the hierarchies that have for too long made academia an exclusionary place, and it means embracing collaboration between scholars from different regions and different disciplines to build a better world.

Click [here](#) for more information about the Global Social Medicine network, and follow on twitter [@glosocmed](#). ■

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Lachman A, Berg A, Ross F, **Pentecost M** (2021). Infant mental health in southern Africa – nurturing a field. *The Lancet*, [https://doi.org/10.1016/S0140-6736\(21\)00998-3](https://doi.org/10.1016/S0140-6736(21)00998-3)

## Public outreach

Kienzler H and Prainsack B. Policy Lunch: 'The EU and solidarity in global health cooperation: Lessons from the corona pandemic', webinar organised by the Development and Peace Foundation in Brussels (May)

Kienzler H. 'Shedinar – capacity and independence in crisis situations' in conversation with Alex Ruck Keene (April) [www.mentalcapacitylawandpolicy.org.uk/shedinar-capacity-and-independence-in-crisis-situations-in-conversation-with-hanna-kienzler/](http://www.mentalcapacitylawandpolicy.org.uk/shedinar-capacity-and-independence-in-crisis-situations-in-conversation-with-hanna-kienzler/)

Kienzler H. 'Beyond the physical: Mental health and trauma in the OPT,' interview for the *A Life Lived in Conflict Podcast* with Mona Jebriil (January). <https://soundcloud.com/monajebriil/episode3>

# Wellcome Trust Global Social Medicine Network launches Lancet series: **Revitalising Global Social Medicine**

**What is global social medicine? This collection of essays, arising from collaborations between social medicine programmes and practitioners around the world, seeks to revitalise the field of social medicine as a way to affirm a health agenda that promotes human rights and social justice.**

**B**ehague and Ortega investigate the COVID-19 pandemic in the Brazilian favelas, exploring the importance of mutual aid in coordinating a response following neglect from President Jair Bolsonaro's government. **Adams, Garcia and Jones** argue for an environment-focused global social medicine approach to climate change disasters, including recognising the uneven distribution of risk, paying direct attention to caregiving, expanding the

conceptual timeframe of disaster response, and the need for physicians to connect with local organisations. An exploration of different ways in which the origins, rise and treatment of depression are framed in the specific sociopolitical contexts of China, Myanmar and Japan form the basis of **Kitanaka, Ecks and Wu's** essay. Mobile health (mHealth) has been a focus of global health recently, **Sawadogo, Sanou, Greene and Duclos** consider mHealth's promises and perils in

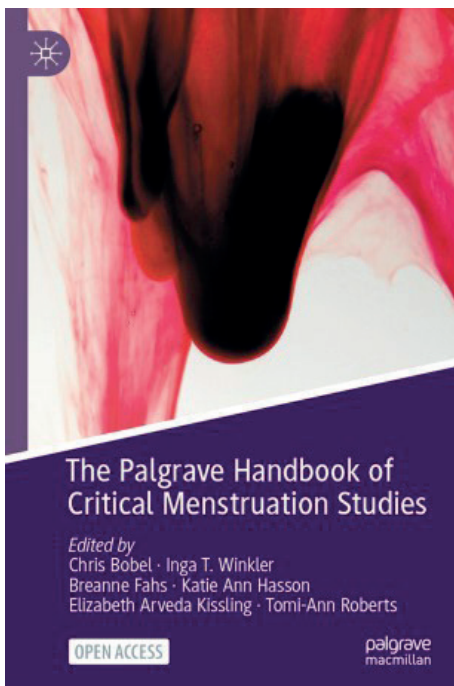
Burkina Faso, and how such technology-based approaches to remedy structural health inequalities can be overhyped. Finally, **Lachman, Berg, Ross and Pentecost** examine the nascent field of infant mental health (IMH) in southern Africa, noting that there is a need to rethink models developed for high-income countries to better reflect the contextual factors at play in other regions. ■



# Using open access academic book chapters to bridge the academic/public impact divide

by **Sally King**, final year PhD candidate in GHSM

The ‘taboo’ topic of menstrual health often falls through the gaps regarding clinical and academic disciplinary ownership, making it tricky to find journal editors willing to include what is mistakenly assumed to be a ‘niche’ topic (despite affecting half of the global population!)



At the same time, public audiences are hungry for more information on this topic. For these reasons, I felt I had to be part of the first ever (free to access online and download) academic handbook on ‘critical menstruation studies’. On top of being an incredibly comprehensive peer-reviewed resource, its free availability has clearly contributed to the nearly 800K global downloads – with my chapter [premenstrual syndrome and the myth of the irrational female](#) – being downloaded on its own a further 12K times. The handbook’s success has attracted decent media coverage, raising my profile through association with ‘big name’ contributors, such as Gloria Steinem, Jane Ussher, and Chris Bobel. Several media outlets have been in touch for interviews and my position within global menstrual health research and activist networks has been boosted. In short, writing a book chapter for the right (open-access) publication can provide exceptional reach and public engagement opportunities in comparison with those provided by paywall-protected academic journals.

The second book chapter was about ‘menstrual leave’ – a typically well-intentioned Labour policy that has dark origins and surprisingly negative impacts on menstrual health and gender

equality in the workplace – [Menstrual leave; good intention, poor solution](#). The peer-reviewed book *Aligning Perspectives in Gender Mainstreaming: Gender, Health, Safety and Wellbeing* is not open-access and part of a very niche series relating to occupational health. However, from my perspective it was useful to formally publish existing original research in a form that was reasonably accessible (albeit via a paywall £25 per chapter) to journalists, occupational health, and Human Resources professionals considering ‘menstrual leave’ as a potential news story or workplace policy intervention. While not attracting much media coverage, the chapter is already the main reference used in the Wikipedia entry for menstrual leave (not written by me, I promise!), which means that my research now has a good public platform, too. The main purpose of this chapter was to add credibility and authority to a more evidence-based perspective on this topic, which I feel the Wikipedia entry demonstrates fairly well...

The main downsides to writing academic book chapters compared to journal articles is that they take longer to write and longer to be published. Still, as demonstrated they can be useful and impactful! ■

## Dr Nancy Tamimi Lecturer in Global Health & Social Medicine



### Courses you teach

Since joining the Department in 2017, I have been teaching the undergraduate modules *Introduction to Global Health 1* and *Qualitative Research Methods: Analysing Data* and the postgraduate module *Designing Qualitative Research for Social Science & Health*.

### What is your academic background?

I have a Bachelor's Degree in Dentistry from the University of Aleppo, Syrian Arab Republic; a Master of Science Degree in Dental Public Health from the University of London-Queen Mary & Westfield College; and I hold a PhD in Medical Sociology from Brunel London University.

### What are you working on at the moment?

I am working on a Global Challenge Research Fund project called *Research for Health in Conflict (R4HC – MENA)* that aims at developing capability, partnerships, and research in the Middle East and North Africa. Part of my work was to co-design and co-teach the course *Qualitative Research Methods for Mental Health in Conflict* to health professionals. The course was delivered in the occupied Palestinian territories and Turkey. I also co-designed and co-taught on a Future Learn online course called *Qualitative Research Methods for Mental Health in Conflict*. Currently, I am

finalising the revision of two papers that analyse the findings of delivering these courses through the lens of decolonisation. I am also working with other authors on a scoping review that explores the association between uncertainty and mental health in war and disaster.

### What is your favourite thing about working in London?

I like walking across the River Thames, the parks and the range of architecture, from ancient to modern. I like the diversity of the population, the theatres, museums and the numerous places to eat and discover different cuisines.

### When you're not working, what do you like to do with your time?

I like travelling to new places, walking in nature, spending time with family and friends, reading fiction, oil painting, and experimenting with new cooking recipes. ■

## Dr Lucy van de Wiel Lecturer in Global Health & Social Medicine



### What is your academic background?

A long time ago, on a dark Amsterdam night, I asked a wise historian friend how to live my life. She told me to spend each year doing what would teach me the most. My academic background reflects her advice; I have studied across the disciplines, lived across the world, created games, books, exhibitions. Over the last six years I have worked at the Reproductive Sociology Research Group (**ReproSoc**) at the University of Cambridge researching reproductive technologies, reproductive politics and reproductive justice. I have published a book, *Freezing Fertility: Oocyte Cryopreservation and the Gender Politics of Ageing*. This was based on my PhD, at the Amsterdam School for Cultural Analysis (ASCA), University of Amsterdam. Prior to that, I went to the London Film School; studied Cultural Analysis, English and Educational Sciences at the University of

Amsterdam; did a Fulbright year in Rhetoric at the University of California, Berkeley; was a visiting researcher on the history of menopause at the Science Museum, London; and worked at an NGO in UNESCO, Paris.

### What are you working on at the moment?

I am part of a 16-country, 29-scholar Wellcome-funded collaborative research project called **Changing In/fertilities**. I am currently working on publications about company-sponsored egg freezing insurance, transnational egg banks, medical directors' views about the expansion of the IVF cycle with 'add-on' technologies and the relation between the reproductive politics of egg freezing and medical abortion. Together with Professor Sarah Franklin, I have also led a public engagement programme called *Life in Glass*. Some of the projects I currently produce include **Dish Life**, a free mobile game about the sociality of stem cell science, and *Transpositions*, an animated short film about the work of plant scientist Barbara McClintock. The Dutch documentary series **Backlight** is making a feature-length documentary based on my research into the changing meanings of fertility in the 21st century.

### What are you most looking forward to in your new role?

I am looking forward to meeting my new colleagues and students. I am a social person and love collaborating with people on interesting projects. Over the summer I will have some Zoom coffees with my new colleagues so we can get to know each other. Do e-mail me if you would like to schedule a chat.

### When you're not working, what do you like to do with your time?

I long for the days that we can meet one another again and traverse London's nightlife without concern about aerosols or hand hygiene. I enjoy documentaries, such as Diana Whitten's **Vessel**, which shows how the **Women on Waves** organisation uses boats and maritime law to provide access to abortion across the world.

Artists such as PJ Harvey, Thom Yorke, Tori Amos, Veda Hille, Portishead and Ex:Re provide the soundtrack to my life. My partner is a drum and bass **DJ** and I enjoy joining her for parties on the London Acid Techno underground. ■



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