

# NEWS

**Graduation is a wonderful event and a great way to celebrate our student's achievement with family and friends. I look forward to seeing many of you there in July in the Royal Festival Hall!**

This year, we've once again had a very active programme of student engagement. Dr James Fletcher continues to lead on careers – and I hope you've enjoyed and benefited from the activities and events organised by GHSM, including our Careers Talk with Dr Tim Reed from Health Action International.

Be sure to engage with King's Careers & Employability, which is open to all students. Graduating students can activate their graduate access to King's CareerConnect in order to continue using the services. I also encourage graduates to join the King's Alumni Community (see [alumni.kcl.ac.uk](http://alumni.kcl.ac.uk)).

We also have several mobility opportunities for our current students: the Tata Social Internship in India, an internship at the Desmond Tutu TB Centre in South Africa, and our internship programme in Brazil. Last year, Robert Smith and Mohini Samani were the first King's students to participate in the Tata Social Internship in India. Meanwhile, our student, Rachel Morse was awarded an internship at the Desmond Tutu TB Centre in Cape Town, and reports on her experience in this issue. Plus, we place four students to attend the University of Stellenbosch's summer school every year. As per the agreement with King's, the summer school is free (although students will need to cover their accommodation and flights).

For those thinking of continuing onto postgraduate study with the Department of Global Health & Social Medicine (GHSM), we have our three-week undergraduate module on Global Health & Social Justice.

This three-week module is part of King's Undergraduate Summer School and is a great taster for further study (see [kcl.ac.uk/study/undergraduate/courses/undergraduate-summer-school](http://kcl.ac.uk/study/undergraduate/courses/undergraduate-summer-school)).

On the research front, I am delighted to let you know about GHSM's recent grant successes. Dr Carlo Caduff was awarded a Wellcome Trust Investigator Award to investigate cancer care in India. Professor Anne Pollock was awarded an American Council of Learned Society Fellowship for her work on race and biopolitics in the 21st century, and a Wellcome Trust Small Grant award to examine race and biomedicine beyond the lab. Professor Mauricio Avendano, together with colleagues at the LSE and the Institute of Psychiatry, Psychology & Neuroscience, was awarded an ESRC grant to look at poverty reduction and mental health amongst young people from low- and middle-income countries. Together with him, I have also been awarded an ESRC project to examine how varying care systems are associated with inequalities in care and well-being in later life. Meanwhile, as this is part of an Open Area Research call, we will be working with colleagues at Vrije Vrije Universiteit Amsterdam in the Netherlands, Technical University of Dortmund in Germany and Keio University in Japan.

Finally, I want to thank our students for completing the NSS, PTES and PRES surveys, which provide us with valuable feedback.



**Karen Glaser**  
Professor of Gerontology  
and GHSM Department Head

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## The CMP Writing Retreat

For the fourth year now, the CMP research group has enjoyed the coastal village of Walberswick as the place to run the annual writing retreat. The village offers a nice surprise every year to those of us who join for the retreat for the first time. The retreat offered time for our own writing and various creative writing exercises, pushing us out of our writing routines and allowing us to flex our writing muscles in different and novel ways. A side-effect of the exercises was the sharing and reflection over writing tips and challenges between all of us. The time spent together allowed us to get better acquainted during break times, meals and walks by the sea. The retreat will hopefully continue yearly, as an opportunity for new and returning participants to engage again in the rich conversations, and the exercises that the retreat offers.

# CARE SYSTEMS AND INEQUALITIES IN CARE AND WELLBEING IN LATER LIFE

**Currently, together with Professor Mauricio Avendano, Professor Karen Glaser is leading an ESRC funded project investigating how varying care systems are associated with inequalities in care and wellbeing in later life.**

The first project meeting was held early in April this year. This is part of a larger Open Research Area (ORA) funded project led by the Vrije Universiteit Amsterdam, in the Netherlands, and with the Technical University of Dortmund, in Germany, and Keio University in Japan.

Our research examines if and how LTC (long-term care) reforms exacerbate existing social disparities in care and in caregiver and care recipient wellbeing. It investigates (a) how different long-term care systems and recent long-term care reforms are associated with socioeconomic inequalities in care among older adults, and (b) the consequences of these inequalities for the

wellbeing of older care recipients and their caregivers. A better understanding of the consequences of different care policies for inequalities in care, and caregiver and care recipient wellbeing, will inform debate on the potential impact of future policy decisions.

The project team combines expertise on LTC arrangements, informal care, and cross-national analyses from demographic, sociological, gerontological, epidemiological and health economic perspectives. Team members include Dr Ludovico Carrino, Research Fellow, and Ginevra Floridi, our recently appointed Research Associate. A Research Assistant will also soon be joining the project.



## Emerging biotechnologies for global health? A BIOS workshop

On 20-21 February, the Biotechnology & Society (BIOS) research group held a two-day workshop at Coin Street Neighbourhood Centre, addressing the question 'Emerging biotechnologies for global health?' The workshop brought together members of BIOS and close collaborators to draw out common threads of research interest focused on emerging biotechnologies within a global health context, and on issues of value. Questions explored during the workshop included:

- Can emerging biotechnologies contribute to global health, and if so how?
- What is a 'valuable' emerging biotechnology, and what makes it valuable in different global and local contexts?
- What do we mean by 'innovation' in relation to emerging biotechnologies, and are definitions of innovation identical across the globe?
- What are the key debates which shape stakeholder engagement in the politics of emerging biotechnologies?

The workshop demonstrated the diversity of perspectives present in BIOS and their potential complementarity, as they ranged across topics of emerging technologies in healthcare, procreation and reproductive technologies, contemporary solidarity and its many identities in healthcare, the sociology and politics of pharmaceutical innovation, responsible practices in research and innovation, and global mental health and society.

## New Research Group: Mental Health and Society

The department's new research group are interdisciplinary researchers focussed on the socio-political dimensions of mental health and illness in the Global North and South. The group focuses on the social conditions that contribute to mental distress in urban, community and conflict settings, and on exploring the most appropriate responses. This group is working across the social sciences and humanities, and across disciplinary interfaces from neuroscience to political economy.

MHS will work closely with stakeholders such as mental health service users and urban policy makers. This research aims to have academic impacts, developing theories and concepts, and practical impacts on the lives of those experiencing mental distress. MHS will work closely with other research groups in the Department, as questions of mental health relate to issues of ageing, culture, medicine and power, and to emerging biotechnologies and neurotechnologies.



## UNAM-KCL workshop in Mexico City: A GHSM delegation travelled to Mexico on 1–2 April for a bilateral workshop with the UNAM University

King's College London and UNAM (Universidad Nacional Autónoma de México) held a joint research workshop entitled 'Challenges for Public Policy in the 21st Century: Mental Health, Ageing and Megacities'.

The joint workshop was organised by Mauricio Avendano Pabon at GHSM in collaboration with Veronica Montes de Oca at UNAM Centre for Social Research, with the support of the King's Global Engagement office and UNAM's Principal office.

The workshop featured presentations by Nik Rose, Dominique Behague, Karen Glaser, Wei Yang, Ludovico Carrino and Mauricio Avendano from GHSM, as well as presentations by the King's Institute of Psychiatry, Psychology & Neuroscience's academics Ricardo Araya (Director of King's Centre for Global Mental Health) and Sara Evans-Lacko.

The workshop enabled an opportunity to share research findings and discuss potential future collaborations between UNAM and King's. The workshop was open to the public, and more than 100 people attended the event including academics, practitioners and policy makers interested in ageing, cities and mental health.

The event was organised to coincide with a visit to Mexico from King's Principal Edward Byrne to renew an agreement with UNAM's Principal Enrique Graue Wiechers to forge relationships and promote academic mobility between the two Universities.

## Symptomspeak goes live

Hanna Kienzler's new Blog *Symptomspeak* draws on the intimate testimonies of women survivors of the Kosovo War and she reveals how the experience of living through one of the darkest moments in this country's history has impacted on their lives. These unique and powerful stories tell of mass atrocities, expulsion and loss, of violence, hardship and horror, and of adversity, survival and hope. They don't simply tell us what we already know or repeat commonly held notions of national history.

Instead, these women bravely question these dominant framings by bringing to light hidden or even jettisoned versions of their country's past, of a fragile political system and of a possible future as an independent State. The stories are grouped into three distinct categories to highlight the women's memories of violence and hardship, embodied expressions of distress and what it takes to heal the inner wounds of war.

## Public engagement: bioethics in the media

Silvia Camporesi was interviewed by **Al Jazeera** for Inside Story, as well as by Vanessa Feltz for BBC London Radio about Caster Semenya and the IAAF ruling on her case, and has had her work on this topic quoted in the press, including **Vice magazine**. She was also interviewed by Adam Rutherford for **BBC Inside Science** on 18 April 2019 on the ethical implications of the experiment carried out at Yale University on reanimating severed pigs' heads.

Access the blog here: [symptomspeak.com](http://symptomspeak.com)

LIKE it on Facebook: [facebook.com/SymptomSpeak2018](https://facebook.com/SymptomSpeak2018)

Follow it on twitter: [@symptomspeak](https://twitter.com/symptomspeak)



# Wellcome Trust Investigator Award for Research on Cancer Care in India

**Dr Carlo Caduff has recently received a Wellcome Trust Investigator Award to continue his research in India over the next five years. The project seeks to work in conjunction with local oncologists to improve cancer care for patients.**

India is reported to have over one million new cancer patients each year. This number is expected to almost double by 2035, with cancer set to become one of the country's biggest public health challenges. In 2012, India's flagship cancer hospital, Tata Memorial in Mumbai responded to the rapidly growing number of patients and launched a network of cancer centres. The National Cancer Grid of India was established to decentralise, standardise and digitalise oncology, and to develop new forms of treatment relevant for low- and middle-income countries. 'I will be leading a team of researchers to analyse the emergence of the grid as a powerful new actor that seeks to redraw the map of cancer care,' said Dr Caduff. 'We'll use social science research methods to show how a new agenda for global oncology is taking shape today in India.'

Previously, Dr Caduff researched the history of cancer in order to address the challenges of the non-communicable disease in the Global South. His work, also funded by the Wellcome Trust, examined the accessibility and affordability of oncology care in two cancer centres. By chance, he came upon a local India street photographer,

**Soumyendra Saha** and introduced him to a cancer centre in Kolkata. The result was 80 black and white photographs, capturing the life of the wards. Despite their struggle to survive, the people in the photographs are shown to be waiting, thinking, reading and watching – showing the everydayness behind the deadly disease. 'Cancer often comes with voyeuristic images of shock and horror. In this project, we wanted to show another image. If there's an intensity in the pictures, it comes from the people and their faces; from the ways in which they face the disease,' said Dr Caduff.

24 stills from the collection were exhibited at The Exchange, King's College London. They can be seen online: [instagram.com/24\\_stills](https://www.instagram.com/24_stills)

'The photographs invite you to inhabit the reality of the people in the cancer centre,' said Professor Bronwyn Parry, Head of the School of Global Affairs, who opened the exhibition in February. 'It provides you with an opportunity to connect, viscerally, with their and your feelings about their experience of health and disease, and to reflect on how that is shaped by social and economic circumstance – in often profound ways.'

## Michelle Pentecost awarded two small grants by the British Academy

Michelle Pentecost attended an event jointly run by the British Academy and the Academy of Science in South Africa in Johannesburg in February 2019, where she submitted two applications for collaborative work with partners in South Africa, both of which have been successful. The first, titled 'New Perspectives on Urban Childhoods in Africa' will fund an interdisciplinary workshop in South Africa in August 2019 that will aim to historicise and contextualise experiences and understandings of early childhood development, childhood and adolescence in Southern Africa. The second, titled 'Health, health care and urban spaces: perspectives from the law and medical humanities' funds a collaboration with scholars at the Centre for Human Rights at the University of the Free State and builds on Michelle's work in the field of medical humanities in Africa.

# TEACHING RESEARCH METHODS



Hanna Kienzler, Nancy Tamimi and Mathias Regent from GHSM, together with researchers from Birzeit University in Palestine and Hacettepe University in Turkey, delivered this international training course at Hacettepe University from 15–18 April 2019. The aim was to equip course participants with up-to-date qualitative research skills and insight into how to adapt these methods to particularly vulnerable populations. Participants involved a group of 29 researchers, health workers and students with specialities related to public health, psychiatry, demography, social work, medical ethics and paediatrics, and oncology. The course was funded by the UK Research and Innovation 'GCRF RESEARCH FOR HEALTH IN CONFLICT' (R4HC-MENA); developing capability, partnerships and research in the Middle and Near East (MENA) ES/P010962/1.

## Prizes

**Nancy Tamimi** and **Hanna Kienzler** won the prize for best poster at the Lancet Palestinian Health Alliance Conference, titled *Capacity building in research methods for mental health in war and conflict: Needs assessment and training course development in the West Bank*.



**Penelope Quinton** won first prize in the 2019 King's College London English department's annual Cosmo Davenport Hines poetry competition. This

year's competition invited students to submit up to 40 lines on the theme of discovery. As part of the prize awarded, Pennie's poem *Imperial voyages of discovery* was published in the Summer edition of the London Library Magazine on 14 June.



# Vienna calling A new era of exchange?

Professor Barbara Prainsack launches her Centre for the Study of Contemporary Solidarity (CeSCoS) at the University of Vienna

by **Saheli Datta Burton** (Visiting Fellow, CeSCoS) and **Katharina Kieslich** (Research Fellow, CeSCoS)

Professor Barbara Prainsack launched her Centre for the Study of Contemporary Solidarity (CeSCoS) in Vienna on the 15 November 2018. CeSCoS is the newest addition to the Department of Political Science at the University of Vienna and has already gathered an impressive team of early-career scholars and PhD students from internationally renowned institutions committed to advancing the contemporary understanding and relevance of the concept of Solidarity in research and practice (including two former King's colleagues, Dr Katharina Kieslich, School of Population Health and Environmental Sciences, and Dr Lukas Schlögl, Department of International Development). The aim of the group is to take the dust off this seemingly outdated concept and fill it with new life; the group believes that solidarity has much to offer to address some of our most pressing societal challenges. The day-long launch event on 15 November showcased this through talks by members of CeSCoS and by renowned international scholars on CeSCoS' advisory board.

The event – aptly titled *Solidarity in research and practice – why now?*, aimed to reinvigorate a discussion on the use of the concept of solidarity in contemporary politics, policy, and other domains of practice. This was highlighted by Professors Barbara Prainsack's and her close collaborator Alena Buyx's (University of Munich) introductory speech which argued that solidarity could give concrete guidance for policy and practice. If defined clearly and

distinguished from other types of prosocial practice, the speakers argued, solidarity could serve as 'an organising principle for policies and institutions, to address key societal challenges such as the reform of healthcare systems and the increase of social disparities'. Barbara then gave concrete examples such as the use of solidarity-based governance in the context of digital data governance. The organisers of the event also encouraged discussion and debate around CeSCoS' conceptualisation of solidarity particularly, in relation to the world within which it was situated, to concepts and issues of social justice, reciprocity, altruism, relational autonomy and so forth. This in turn, set the tone for the day and for the group's take on solidarity studies to explore its relationship and relevance to society through multidisciplinary perspectives, in particular, the ability of its spirit and concept to shape policy, institutions and infrastructures that embed solidaristic practices in society.

The morning and afternoon sessions (09.30-16.00) featured multidisciplinary talks on the human rights (or its lack of) implications of the multi-layered interpretations and tensions of solidarity at transnational level (**Professor Carol Gould**, City University NY), the need for greater state intervention to enhance distributive and social justice (**Professor Linsey McGoe**, University of Essex), solidarity in the current patient rights paradigm (**Professor David Townsend**, Maastricht University), and enactments of solidarity in real-life contexts (**Bernard Dichek**, filmmaker, Israel).

A panel discussion on *Why do we need Solidarity?* chaired by Dr Katharina Kieslich (University of Vienna) unleashed a lively and controversial debate around the possibility of a solidarity for all of humanity. The second part of the day, which took place in German to be accessible also to a local audience, began with a welcome address by the Vice Rector of the University of Vienna, Professor Christa Schnabl followed by an inspirational keynote speech from Dr Auma Obama, Founder and Director of the Sauti Kuu Foundation. Sauti Kuu seeks to give a voice to financially and socially disadvantaged children and youth in Kenya and other countries on the African continent. Finally, Peter Dabrock, Professor at the Friedrich-Alexander-University Erlangen-Nuremberg, and Chairperson of the German Ethics Council, rounded up the day by speaking about the role of solidarity in the digital age. The ensuing discussion focused on the role of conflict in promoting, or hindering, solidaristic practice in the 21st century.

But, what does this mean for GHSM? A new era of exchange between Vienna and London? For those attending the insightful launch event and came face to face with the inspiring and dynamic persona of Barbara Prainsack, it's a no brainer – of course, we want to collaborate with CeSCoS! Opportunities for fruitful collaboration between GHSM and CeSCoS are clearly apparent – especially around the area of global health and global justice, digital societies, and biopolitics.



# Colonial Lineages of Global Fertility Chains

Conference report: **Sigrid Vertommen, Bronwyn Parry and Michal Nahman**



**On 28 and 29 March, Bronwyn Parry (King's College London), Michal Nahman (UWE), Edgar Ruiz Lopez and Sigrid Vertommen organised an international workshop on the Colonial Lineages of Global Fertility Chains at King's College London, as part of a small Wellcome Trust Grant on the political economy of assisted reproductive technologies (ARTs).**



During this intensive two-day workshop, a superb group of early career and senior ART-researchers from around the world reflected on the on-going her/histories of colonialism and biocapitalism in-and-through assisted reproductive technologies, practices and infrastructures.

The starting point for unpacking these repro-stories in much of the social scientific scholarship on ARTs, was 1978, when the first IVF baby Louise Brown was born, and who has since been followed by more than five million ‘miracle babies’ worldwide. IVF has indeed created many socio-technical changes. It has fostered the fragmentation of the reproductive body into mobile body tissues that can be moved within and across national borders, and from one body to another, depending on their reproductive potential. This has resulted in the emergence of a global industry with new expansive markets and political economies – what we have termed global fertility chains – in which women, overwhelmingly from the Global South, are increasingly commodifying their reproductive biologies and capacities, working as oocyte vendors, surrogate carriers and tissue providers to fulfil the reproductive needs of intended parents, who are overwhelmingly from the Global North.

In the medical realm, IVF has served as a platform technology for the development of related reproductive techniques and practices such as intracytoplasmic sperm injection, pre-implantation genetic diagnosis,

surrogacy, egg donation as well as scientific research on stem cells, tissue cultures and regenerative medicine.

For the social sciences and humanities, IVF and ARTs constituted an important epistemological turning point. Each catalysed fresh and exciting waves of scholarly debate on the complex ways in which the biological and the social are co-produced. STS scholars have been studying the wide array of ‘novelties’ and changes that assisted reproductive technologies (ARTs) invoked including new forms of family and kinship structures for people who were previously excluded from having genetically related children, and the new objects and materialities, properties, markets and economies, novel identities and subjectivities that such practices bought into being.<sup>1</sup>

Notwithstanding the novelty of these techno-scientific innovations, our interdisciplinary workshop sought to shed light on the older, yet ongoing histories and geographies of power that have shaped these supposedly new reproductive markets.

This meant considering the (settler) colonial, biocapitalist and heteropatriarchal genealogies of global fertility chains with their highly gendered and racialised modes of production, social reproduction, labour organisation and population control. It meant not only looking at the biopolitical and enabling side of these ‘frontier’ reproductive technologies’ and the ways they make, enhance and (re)produce life, babies and families, but also taking into account their necropolitical histories of breaking families

and unmaking life, which are often present and ongoing. We called this ART’s colonial present.

Building further on the inspirational connections that scholars have been making between political economy, feminist studies, STS and postcolonial studies, we reflected on the colonial present of various global fertility chains, including surrogacy, egg cell provision, sperm smuggling, transnational adoption, slavery and motherhood, and scrutinised the ongoing colonial relations between capital accumulation, the exploitation of reproductive labour and the extraction of reproductive life.

In doing so we posed a number of key questions: how have infrastructures, technologies and practices of reproduction, fertility and mothering travelled from the Caribbean sugar plantations to British and American kitchens and bedrooms? How are Indian surrogates and Spanish egg donors made ‘available’ as cheap sources of reproductive labour and bodily extraction? How are settler imaginaries and practices of demographic settlement shaping ‘pronatalist’ agendas and demands in global fertility chains? Are reproductive technologies developed and governed through imperial or sub-imperial logics? What are the legacies and afterlives of slavery and genocide in shaping the racialised and gendered divisions of labour now evident in global fertility chains?

These were just some of the questions that were raised during the workshop, and which will be further developed in a special issue for *Science as Culture*. So stay tuned!

1. This argument has been developed earlier in Vertommen, Sigrid. *Assisted Reproductive Technologies at the Frontier: Towards a Decolonial Approach*. *Science as Culture* 24(4): pp. 532-537



# Reflections on Global Health Research in Cape Town



by Rachel Morse

**This past summer, I travelled to Cape Town, South Africa to conduct an internship at the Desmond Tutu Tuberculosis (TB) Centre.**

I was given the chance to work with the social science team at the Centre on a variety of qualitative research projects about child TB in South Africa. It was the summer before my final year at King's which also gave me the unique opportunity to undertake my dissertation research throughout the internship.

My experience during this internship was invaluable. First, throughout my time in South Africa, I had the chance to observe, experience and learn about the complex circumstances contributing to South Africa's high TB burden. This was an opportunity that brought my studies to life. I spent the first two years of my degree learning about the myriad cultural, social, political and historical aspects contributing to health and wellbeing. In South Africa, I saw first-hand how all of these aspects consistently interact and contribute to the complexity of eradicating diseases like TB. In addition to this, I had the opportunity to conduct research and work alongside an experienced, knowledgeable team of social science researchers.

The team was extremely welcoming and consistently provided invaluable advice. I was their colleague and their mentee, allowing me to join in discussions and contribute to the research but also allowing me to ask questions and explore my interests. While working with this team, I gained an insight into a variety of paediatric TB studies. For instance, I conducted interviews for a project studying children's and caregivers' experiences of acceptability (including palatability) of TB drug regimens. During the project, we spoke with children who had had TB at some point in their lives to learn about how they view the experience. As part of the interviews, we asked the children to be chefs and tell us how they would make the perfect TB medication, asking questions along the lines of the following: what flavour would the medication be or how would you design a box for the medicine? All of this provided an insight into their experience as TB patients including the difficulty of taking TB medication due to its terrible taste and long list of side effects.

It was clear that the children's TB treatment is extremely difficult for both the child and their caregiver, and as such, the research was rewarding and evidently important for improving the treatment experience for children and their caregivers.

Working on these projects provided me with an in depth understanding of the complexities of treating TB in children in a way that was both challenging and rewarding. The interdisciplinary nature of this internship complimented and contributed to my studies and passion for improving global health. Through work with the social science team at the Desmond Tutu TB Centre, I had the opportunity to transform my lecture-based learning into real world experience. Overall, working with the social science team at the Desmond Tutu TB Centre enhanced and expanded my knowledge while also providing a unique opportunity to work alongside professionals, problem solve and begin to lay the foundation for a future career in Global Health.







# Postcard from Geneva

**Nikolas Rose** reports on The Urban Brain Lab: Mental Health, Migration and the Megacity (M3) project from the Brocher Foundation, January 2019.

**In the fabulous, snowy and sunny environment of the Brocher Foundation, on the banks of Lac Léman just outside Geneva, our M3 teams from Shanghai, São Paulo and Toronto gathered, together with key urban mental health researchers from several other groups, to assess the current state of our joint work on urban mental health.**

In addition to several presentations from each group, we were joined by colleagues from Urban Transformations, and from three of the innovative ‘Thrive’ partnerships who are developing policies and practices for supporting mentally healthy cities – in New York (ThriveNYC), London (ThriveLDN) and Toronto (ThriveTO). Our aim was to share findings and methods, and explore pathways for durable impact – how might one build on research on urban mental health to shape policies and practices for mental health friendly cities<sup>2</sup>.

Of course, when it comes to mental life and mental health, to speak of ‘a city’ immediately threatens to mislead analysis. Although there is an increasing literature on ‘urbanicity’ effects on mental health, the blanket idea of ‘the urban’ homogenises a multitude of different ‘environments’ experienced by those who inhabit them (Manning, King’s College London; Fitzgerald, Cardiff). Presentations using deep ethnography coupled with interviews

showed some of this complexity (de Souza Santos, Oxford; Hatch, King’s, London), in some cases combining these with scales and other measures of mental health, and linking these to the mapping of migration and urban space (Andrade and Carvalho, São Paulo; Mackenzie and Roche, Wellesley, Toronto). Several groups at the workshop – notably those from London (Rose, King’s College London), Berlin (Bister, Bieler, Niewöhner, Humboldt) and Lausanne (Söderström, Neuchâtel) – were seeking alternative ways to conceptualise the urban at a more appropriate scale and form for our focus on mental health and lived experience. In particular, presentations from these groups sought to build on James Gibson’s reconceptualization of environment-animal relations in terms of ‘affordances’ that make certain ways of acting possible, together with ideas from human geography, notably those of ‘ecological niches’. In thinking of niches, these groups drew on a range of ideas to explore not only ‘urban stress’ but also

spaces and tactics of urban solace. These included Jacob von Uexküll’s conception of the Umwelt, approaches from cognitive ecology and notions of ‘the extended’ and ‘embodied’ mind, and work on the ‘image’ of the city, from the classic papers by Kevin Lynch to Stanley Milgram’s mental maps. The niche that individuals inhabit is not only shaped materially by the organization of space, buildings, streets, parks, shops and cafes, not only characterised by a specific set of exposures to noise, pollutants and bugs, and not only lived through connections and transactions with multiple others, but imbued with – perhaps even constituted by – meanings, memories and affects. What research methods might enable these concepts to be put to work in exploring the shaping of mental life and mental health – we explored the possibilities of ‘go alongs’ or walking interviews, video diaries, linking those to trajectories through space, time and interactions with mental states, perhaps through wearables, or apps enabling

2. A number of papers from the Urban Brain programme on Mental Health, Migration and Megacities are forthcoming in a special supplement of the journal *International Health* in 2019.

momentary assessment of mental states and their contexts (notably the Urban Mind app, Mechelli, King's College London) – these offered many new research possibilities that our groups were exploring.

The workshop also marked the fact that our three years of research in Shanghai on mental health, migration and the megacity was drawing to a close. What had our group learned? We had discovered quite a lot about how mental disorder is patterned in cities like Shanghai, and especially how that pattern is affected by recent dynamics of migration (Manning, King's College London, London; Li, King's College London, London). The literature provides mixed evidence as to whether migrants have worse mental health, but does convincingly demonstrate that migrants are socially excluded, and this is associated with worse mental health. However ethnographic work by Lisa Richaud (Fudan School of Public Health), working closely with Ash Amin (Cambridge), suggests that migrants have many strategies for managing the stress that is inherent in their precarious life situations, even, for example, when the very factories that employ them are razed to the ground as Chinese cities seek to 'move up the value chain'. While many migrants who experience mental distress may simply return to their home villages, these ways of managing stress may explain the relative lack of apparent mental ill health among many living in those situations. Strategies include the use of minor diversions for managing 'dead' time; the acceptance of city interventions to clear out illegal dwellings and factories; a persistent psychological orientation to home villages, for example paying only cheap rents so that they can save to send money to their home villages,

their use of affordances in the city, such as libraries and bookshops as public space for personal rejuvenation. While Richaud found a complex mix of aspirations and hope in the coffee shops, where young migrants fear that they will become 'salted fish', with few hopes for the future, her overall observation is the migrants do have difficult lives, but that they are very good at developing strategies of 'endurance.'

Nevertheless, there is evidence of mental ill health in other domains. For example, research by our colleagues at Fudan University's School of Public Health (Fu, Dai, Gao, Wang) found small but significant differences between migrants and locals in the prevalence of common mental disorders, with older migrants showing strikingly higher levels of depression measures on standardised scales. And while relatively few migrants present themselves for support at out-patient mental health clinics, our colleagues at the Shanghai Mental Health Centre (He, Zeng, SMHC) presented suggestive findings from those that do present themselves to mental health professionals – who tend to be younger and better educated than the average among migrants – indicating, not surprisingly, that they report high levels of dissatisfaction with income and jobs, together with disappointed dreams.

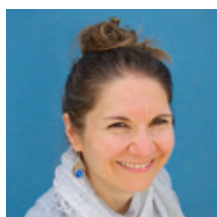
It is also clear that government policies intersect with the experience of mental disorder in the city on many ways (Shao, SMHC). First, of course, social exclusion is intensified by the hukou system, which deprives those who have rural status from accessing some health and social benefits while they live in the city, and has consequences for housing, for secure employment, and for children's education.

While the plans arising from China's new Mental Health Law focus on the development of community services and have many good ideas in principle, but (in common with cities in many parts of the world) there has been little concrete action to develop these. For example, there have been attempts to establish community services, and those that there are – such as a weekly clinic for people who experience mental health problems at one community hospital – are little used. Indeed in some cities outside Shanghai, such as Hangzhou, rather than an expansion of community services, new psychiatric hospitals are being built.

Despite migrants making up around one third of the population of Shanghai, their mental health was not a policy priority when our research commenced. Three possibilities for transforming this situation emerged in discussion. The first would entail increasing access from migrants to the booming on-line 'psy complex' that is currently largely utilised by Shanghai's more affluent residents. Second, to address structural issues of exclusion, it is necessary to address the policies that mean that migrants are not treated as full citizens of the cities where they work, for the hukou system sustains dynamics of social exclusion that are not conducive to mental health. Third, in the light of presentations from colleagues in Thrives (Belkin and Peterman, Thrive NYC; Griffiths, ThriveLDN; Acco-Weston, ThriveTO), there was a strong case for mega-cities like Shanghai to join with the new international policy discussions as to how to make these cities 'thrive', so that the challenges of mental health are fully integrated within projects to develop 'healthy cities'.

## OBITUARY

### Alessandra Pigni



It is with great sadness that we report that Alessandra Pigni passed away on 26 December 2018. Alessandra was about to submit

her PhD thesis at the Department of War Studies and the Department of Global Health and Social Medicine. She struggled with a long illness during which she bravely and defiantly continued to write up her

thesis entitled *A Bad Manager is Worse than War? Investigating the Mental Health of Aid Workers Online And in the Field* which she was to submit in July 2019. For her thesis preparations, Alessandra drew on her rich experience as a practitioner in humanitarian aid, her scholarly background, and her great sense of compassion. Based on her work as a humanitarian psychologist and her field experience in Palestine and China, she recently published the well-acclaimed book *The Idealist's Survival Kit. 75 Simple Ways to Avoid Burnout*.

As her joint supervisors, we are filled with grief. We will miss Alessandra as our PhD student, as a scholar, and as a warm-hearted young woman who never lost her sense of courage and humor and who, with selfless vigor, wanted to draw attention to the plight of her colleagues as they provided assistance to others in need in the most difficult circumstances. Our thoughts are with her family and friends who suffer a tremendous loss.

Dr Hanna Kienzler / Dr Reinoud Leenders



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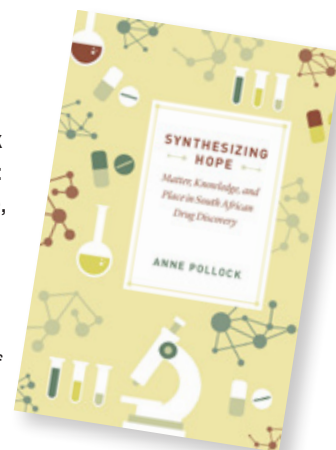
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## Launch of Anne Pollock's *Synthesizing Hope*



The Global Launch of Professor Anne Pollock's new book *Synthesizing Hope: Matter, Knowledge, and Place in South African Drug Discovery* took place on 9th May at the University of the Witwatersrand ('Wits') in

Johannesburg. The event was organized and chaired by the head of the Wits Department of Anthropology, Julia Hornberger, and co-sponsored by the Wits Institute for Social and Economic Research.

Pollock gave a short overview of the book, which opens up the material and social worlds of pharmaceuticals by focusing on an unexpected place: iThemba Pharmaceuticals – a name is Zulu for hope. The company's specific aspirations – finding new drugs for TB, HIV, and malaria – were unfulfilled, and the company closed its doors in 2015. Nevertheless, iThemba provides an intriguing entry point for exploring how the location of scientific knowledge production matters.

Three invited respondents kicked off a highly engaged discussion their reflections on the book: Themba Waetjen (University of Johannesburg, Historical Studies); Richard Rottenburg (Wits Institute for Social and Economic Research); Glen Ncube (University of Pretoria, Historical and Heritage Studies). Key themes explored included the incompatibility of contemporary capitalist business models and pharmaceutical science in the service of the people, the difficulty of building truly transformative projects at the national level, and what 'hope' offers as a narrative and a practice.

The London Launch on 28th May was chaired by Ann Kelly and featured invited responses from Jenny Reardon (University of California-Santa Cruz, Sociology); Jarita Holbrook (University of the Western Cape, Physics); and Ann Kelly (King's College London, Global Health and Social Medicine).



## Kelly Rose-Clarke

### 1. Departmental title

Lecturer in Global Mental Health.

### 2. Courses

Introduction to Global Health 1 (undergraduate)

Designing qualitative research for social science and health (postgraduate)

### 3. What's your academic background?

At UCL I studied neuroscience as an undergraduate, then did a medical degree with an integrated PhD in global mental health. My main research goal is to understand and test ways to improve young people's mental health in resource-constrained settings. I'm an advocate of mixed methods research.

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

I am co-leading an MRC-funded project in Nepal with Mark Jordans from the IOPPN, in partnership with TPO Nepal, an NGO in Nepal. We aim to adapt and pilot a group psychological intervention for adolescents with depression in rural Nepal.

### 5. What is your favourite thing about London?

Having been here since 2003, London is my home. The best thing about the city is that I share it with my closest friends and family.

### 6. What do you do for fun?

Playing hide and seek with my 18 month-old daughter Clemency is extreme.



## Rosie Mayston

### 1. Departmental title

Lecturer in Global Health.

### 2. Courses you teach:

I am the module leader for Global Mental Health, offered to BSc Psychology students for the last two years, this will be open to BA/BSc Global Health students for the first time in 2019–20 as an optional module

### 3. What's your academic background?

I originally trained in anthropology at UCL, before doing a Masters in Demography at London School of Hygiene and Tropical Medicine. My PhD was in psychiatric epidemiology at King's – at the Institute of Psychiatry Psychology and Neuroscience.

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

My work focuses on chronic physical illness and mental health. I have a particular interest in co-morbid HIV and depression and the health of older people. I'm a mixed methods researcher, currently working on a number of different global health projects – the design of a brief intervention for depression among people living with HIV in India (funded by the Psychiatry Research Trust); IDEAS (Improving Detection of Depression in sub-Saharan Africa) led by Dr Abebaw Fekadu in Ethiopia; ASSET (Health Systems Strengthening in sub-Saharan Africa) led by Professor Martin Prince (King's). I am leading the development of the doctoral curriculum for King's Global Health Institute PhD students.

### 5. What is your favourite thing about London?

Finding new stuff to do, even after living here for many years. And the green spaces.

### 6. What do you do for fun?

I started painting last year. Also yoga and running..



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