

NEWS



A warm welcome to all our new colleagues who have joined or will be joining us this year, Dr Kelly Rose-Clarke, James Fletcher, Dr Amy Hinterberger, Dr Nele Jensen, Dr Rosie Mayston, and Dr David Reubi. I am also delighted to let you know that our Department has once again

been very successful in this year's academic promotions round. Dr Jennifer Dowd and Dr Dominique Béhague were both promoted to Reader this year and Dr Silvia Camporesi to Senior Lecturer. The promotions are in recognition of Jenn's, Dominique's and Silvia's incredible achievements in research, teaching and overall commitment to the Department and to the wider academic community.

This August the Department of Global Health & Social Medicine (GHSM) finally moved into our wonderful new accommodation in Bush House. If you have not visited us yet, I strongly encourage everyone to come and visit the Department in its new space on the third floor of Bush House, North East Wing. I would also like to encourage everyone to have a look at all the facilities available in Bush House including the King's College London Student's Union, the restaurant and café spaces, and the new gym.

GHSM continues with its grant successes. I am delighted to let you know that Dr Amy Hinterberger was awarded a Wellcome Trust Investigator Award in Humanities and Social Science for her project *Biomedical Research and the Politics of the Human*; Dr Ursula Read has successfully obtained a grant as part of the Global Challenges Research Fund; Dr Gabby Samuels was granted a Wellcome Trust Seed award to look at the ethical governance of Artificial Intelligence health research in Higher Education Institutions; Dr Ann Kelly was awarded a GCRF Pump-

Priming Grant to examine new models for community engagement with laboratory-altered mosquito releases; and Professor Mauricio Avendano is part of an Economic and Social Research Council (ESRC) project titled *Poverty reduction, mental health and the chances of young people: understanding mechanisms through analyses from six low- and middle-income countries*.

In addition to the new modules on offer to our undergraduates this year, we have a very active programme of student engagement. Our new Teaching Fellow, James Fletcher, is leading on careers and has kept you informed of many careers-related events. In addition, together with Katya Baker, our Student Engagement Officer, the Department will be organising a number of events including an alumni panel event and a careers talk from Tim Reed, executive director of Health Action International. Please do look out for e-mails from them.

Karen Glaser
Professor of Gerontology
and GHSM Department Head

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JUNKIE. STONER. CRACKHEAD.

On 8 November 2018 Guntars Ermansons took part in a panel discussion at the Science Gallery London, titled *Junkie. Stoner. Crackhead*. Part of the broader series *Hooked*, the discussion addressed issues of stigma, addiction and mental health. The need to address stigma in mental health has only recently been gaining wider public recognition, revealing addiction as a particularly contentious category placed at the intersection of criminal law, public health and moral traditions.

Grant awarded to Dr Ursula Read

Dr Ursula Read, a Research Associate in the Department, together with Dr Erminia Colucci at Middlesex University, has successfully obtained a grant as part of the Global Challenges Research Fund, awarded by the Economic and Social Research Council (ESRC) and the Arts and Humanities Research Council (AHRC).

The project is titled *Using collaborative visual research methods to understand experiences of mental illness, coercion and restraint in Ghana and Indonesia*. Dr Read will lead on the Ghanaian research, building on studies she has conducted on mental health and human rights in the country, including her current project with Dr Hanna Kienzler on social inclusion for persons with experiences of mental illness.

The research is being conducted in collaboration with Dr Joseph Osafo at the University of Ghana and Dr Diana Setiyawati at the University of Gadjah Mada, Indonesia with partners from local mental health advocacy groups and arts organisations. Both Ghana and Indonesia have passed laws banning the use of physical restraints on people with mental health problems, however coercive practices remain commonplace and mental health workers face resource challenges in carrying out community-based interventions.

In addition, despite increased availability of mental health services, in both contexts

ritual and spiritual practices remain highly valued in addressing mental illness. The aim of the project is to use ethnographic film and participatory methods to investigate attempts by mental health workers to establish collaborations with faith-based and traditional healers to prevent the use of coercion and provide care for persons affected by mental illness. Although there have been long-standing calls for such collaboration there has been little investigation of how such relationships would work in practice in specific locations with differing healing traditions and mental health systems. The use of participatory visual methods aims to engage stakeholders, including persons with lived experience of mental illness, across differing socio-economic backgrounds, educational achievement and languages. The project will build a south-to-south network to share experiences and examples of best practice to reduce the use of coercion and restraint and improve access to care for people with mental illness. For further information please contact ursula.read@kcl.ac.uk

Gabrielle Samuel awarded seed grant by the Wellcome Trust



Dr Gabrielle Samuel has received a new themed seed grant from the Wellcome Trust, titled *The ethical governance of Artificial Intelligence health research in Higher Education Institutions*.

Jenn Dowd elected to Board of Directors of the PAA

Dr Jennifer Dowd was recently elected to a three-year term on the Board of Directors of the Population Association of America (PAA), the leading scientific professional association dedicated to the study of research on the individual, societal, and environmental implications of human population changes. PAA members include demographers, sociologists, economists, public health professionals, and other individuals interested in research and education in the population field. Visit populationassociation.org



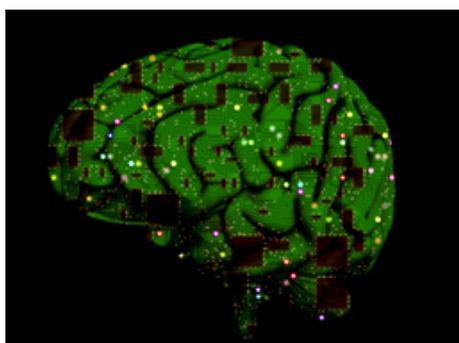
Bronwyn Parry, Gabrielle Samuel, Anne Pollock and Michelle Pentecost attended the 2018 4S Social Studies of Science conference in Sydney, Australia.

Bronwyn Parry organised a session on *Transgressive Markets in Assisted Reproduction: Queering family construction in the 21st century* and presented a paper with Rakhi Ghoshal titled *Perverse Markets: How the expanding ART bioeconomy in India contributes to the infertility-burden*. Gabrielle Samuel presented with G Derrick and T Leeuwen on *The Ethics Ecosystem. Personal ethics and the governance of social media research*. Anne Pollock co-organised the successful Science and Technology Studies (STS) Africa pre-conference event for scholars working on STS in Africa, also attended by Michelle Pentecost. Anne co-organised panels on Biomedicine, Infrastructure and Information Technology with Tolu Odumosu as part of STS Africa events. Michelle Pentecost co-organised a panel on Political Transformations of Developmental Origins of Health and Disease (DOHaD) and Epigenetics in the Global South with Megan Warin, Maurizio Meloni and Fiona Ross, and presented a paper with Thomas Cousins in the panel *Not Global Health (?): Theorizing Biomedical Governance from the South*.

Anthea Tinker and team shortlisted for AHRC Research in Film Award

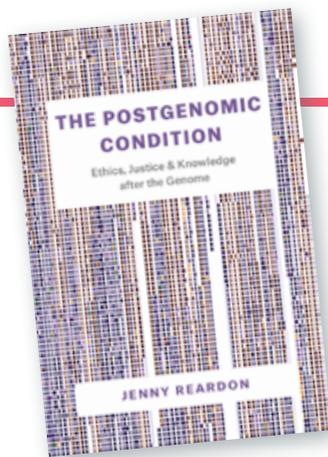
A film made for the EPSRC research project *Mobility, Mood and Place* by Professor Ward Thompson (University of Edinburgh) and the team including Professor Anthea Tinker (co-PI) has been shortlisted for a prestigious national award. The film *Mobility, Mood and Place – key findings* is shortlisted for the Arts and Humanities Research Council's 2018 Research in Film awards, at the home of BAFTA.

The Human Brain Project (HBP) Foresight Lab at King's College London and Ethics Support at De Montfort University co-organised a researcher awareness workshop titled *Dual Use and Neuromorphic Computing* with the SpiNNaker team at the University of Manchester on 18 June 2018.



Organised by Tara Mahfoud, Christine Aicardi and Saheli Datta, the aims of this workshop were to 1) discuss dual use issues with scientists and engineers who are researching and developing neuromorphic computing hardware and software, and 2) feedback the research of the HBP Ethics and Society sub-project into the everyday work of scientists and engineers.

The first session included brief presentations by Tara Mahfoud and Saheli Datta from the HBP Foresight Lab on Responsible Research and Innovation in the HBP and the EU's Dual Use Policies, respectively as well as a presentation by Inga Ulnicane on citizens' and policy-makers' perspectives on HBP and Dual Use. In the second and third sessions 13 senior and early career members of the SpiNNaker team as well as four members of the researcher awareness team of the HBP Ethics and Society sub-project – discussed the scenarios that were included in the programme, which served as frameworks and stimuli for evaluating the possible consequences of neuromorphic computing and the social and ethical implications this technology and research may have. They focused specifically on open science, industry and military partnership, as well as the implications of machine learning enabled by neuromorphic computing.



On 26 June 2018, Professor Jenny Reardon launched her new book at King's College London, *The Postgenomic Condition: Ethics, Justice, and Knowledge after the Genome* (Chicago, 2017).

Jenny is a Professor of Sociology and the Founding Director of the Science and Justice Research Center at the University of California, Santa Cruz, and a Visiting Professor at GHSM. In this pathbreaking new work that spans over a decade of research, she asks: now that we have sequenced the human genome, what does it mean? In answering this question, she critically examines the ten years after the Human Genome Project, and the fundamental questions about meaning, value and justice this landmark achievement left in its wake. Drawing on research in molecular biology labs, commercial start-ups, governmental agencies, and civic spaces – Jenny demonstrates how the extensive efforts to transform genomics from high tech informatics practised by a few to meaningful knowledge beneficial to all, exposed the limits of long-cherished liberal modes of knowing and governing life. Helping to celebrate the launch of the book were two brilliant commentators. Lydia Nicholas is currently a writer for the New Scientist and a PhD Candidate in Human Computer Interaction at University College London. Kim TallBear is a Canada Research Chair in Indigenous Peoples, Technoscience, and Environment and an Associate Professor in the Faculty of Native Studies at the University of Alberta. Chaired and organised by Amy Hinterberger and Nikolas Rose, the event put Lydia, Kim and Jenny into conversation, where together they offered insights on both the past and future of new genomic technologies. (Report by Amy Hinterberger).

The Neuroscience and Society Network organised a workshop on 11–12 July 2018 at the Institute of Psychology, Psychiatry and Neuroscience (IoPPN) at King's College London titled *The Mercurial Life of Drugs: Psychedelics as Models, Risk Factors, and Treatments for Mental Disorders*.

In the workshop, organised by Tara Mahfoud, Johanna Pokorny, Philipp Haueis and Sam McLean, explored what makes psychedelic research unique, different and potent, and how do (or how might) researchers manage this. The workshop consisted of two parts.

In Part 1, participants heard presentations from three speakers: 1) Nicolas Langlitz, an anthropologist from the New School for Social Research, discussed his ethnographic work with two labs involved in the revival of psychedelic drugs research; 2) James Rucker, a clinical scientist at the IoPPN, discussed the psilocybin trials in the treatment of depression that he is conducting at King's; and 3) Rosalind Watts, a clinical psychologist at Imperial College London, detailed the narrative accounts of patients following psilocybin treatment.

In Part 2, participants divided into two working groups to discuss questions organised into three themes: Pathways, Policy, and Narratives. They came together for a plenary session to share ideas from the smaller group discussions and about possible research collaborations. In the wrap-up, we discussed these potential research ideas in more detail, as well as any interdisciplinary insights that emerged over the course of the workshop which might provide pathways forward.

This event formed part of a wider programme of activity by the Neuroscience and Society Network (NSN) to develop and support collaborative exchanges between the neurosciences and the humanities and social sciences. The NSN is funded by King's Together which offers seed-funding for inter- and multi-disciplinary research projects with the aim of developing these into larger research programmes.

Of chicken farms and barber shops: work as social inclusion in Ghana

By **Ursula Read** with **Lionel Sakyi** (University of Ghana) and **Festus Mills**. *November 2018*

Image: Justice Okai Allotey



Three weeks into fieldwork a photograph of baby chickens clustered around new plastic feeders pinged into my WhatsApp chat. An unusual image you might think to represent research on mental illness in Ghana where media articles on the topic are most likely to be accompanied by a photograph of a dishevelled semi-clothed person in chains. 'Breeding the new stock of birds' said the accompanying message. The message was from Festus, a former patient



at Accra's Psychiatric Hospital in Ghana's capital. Festus is in recovery from drug use and psychotic illness, which had led to street homelessness and several hospital admissions. When we met in March 2018 he told me about his chicken farm, which he had recently set up with a loan from his sister. Festus breeds the chickens and sells the eggs. When we met up on my return to Ghana in October he told me his business was progressing and that he was awaiting delivery of a new stock of chicks that he had just purchased from Belgium. Festus takes psychotropic medication and values the support of a Narcotics Anonymous group where he meets with other former drug users. But it is work that is a central part of his sense of self-worth, enabling him to support himself and contribute to his family.

Festus is a member of a participatory research group we are setting up in Ghana as part of an inquiry into the meaning of community inclusion for people with mental illness in Ghana and Palestine. This research forms part of a larger collaborative project on Mental Health and Justice led by Gareth Owen at the Institute of Psychiatry, Psychology and Neuroscience and funded by the Wellcome Trust. Hanna Kienzler, who leads the workstream on community inclusion, is conducting the fieldwork in Palestine. Both Ghana and Palestine have ratified the UN Convention on the Rights of Persons with Disabilities (CRPD), which commits signatory states to enabling people with disabilities, including people affected by mental illness, 'to live independently and in the community with equal choices as others'. In Ghana the research is being conducted in Accra, the capital, and in Kintampo, a rural town in the centre of the country. Participatory group members are being recruited to work alongside the researchers to explore experiences of community participation, available resources, and potential barriers.

Alongside the groups we are conducting observation and interviews with persons with mental illness and family members. As anthropologists these methods enable us to build a picture of what being included in the community means in practice in different contexts. In Ghana, as with Festus, a strong emerging finding is the importance of work for people who have experienced mental illness to be able contribute to their families and communities, and the obstacles that can stand in their way to achieving this. In a country like Ghana persons with a history of mental illness are not alone in finding it difficult to obtain capital to start small businesses such as Festus' chicken farm. Fathers, siblings and other family members help where they can, but many simply do not have the resources to invest. Falls in the value of the currency, stalled economic growth and the rising cost of living mean many struggle to earn a livelihood whatever their mental or physical health. However, people with mental illness face challenges beyond the financial.

We met Julius* at a traditional healer near Kintampo shortly after first meeting Festus in Accra. He has a young wife and child and had been forced to abandon his popular barbershop when his family took him to the shrine for treatment. On returning to Kintampo in October we were pleased to find Julius back at his shop which

was neatly fitted out with large mirrors, comfortable seating, a ceiling fan, posters illustrating various male hairstyles, a steriliser for the hair clippers, and a sound system to entertain his customers. But the shop was empty. While he was at the shrine, Julius complained, all his customers had 'scattered'. What is more, he was at pains not to reveal where he had been and why, simply telling people he had 'travelled'. The reason for this is that Julius, like others we have spoken to, fears that people knowing you have a history of mental illness can prevent them from trading with you or buying your products. As the often-quoted saying in Ghana goes, 'obodamfo ho ato no koraa na enye ne kakra a ode hunahuna mmofra' – 'Even when a madman is healed, there is always a bit remaining which he can use to frighten children'. In other words, no matter how well a person might appear, there is the suspicion that underneath the taint of madness remains, which might erupt into violence or be passed on to others.

Akua, who has experienced several episodes of mental illness over the years I have known her, knows this too well. I met up with her when she passed by the mental health centre in Kintampo. She was carrying a large metal bowl of fish on her head and told me her friend from church had engaged her to help sell her fish. When we interviewed her a few days later, however, Akua told us that people wouldn't buy fish from her and so her friend had asked her to stop selling and do housework for her indoors. Akua has been told her sickness has been caused by spirits (mmotia) which continue to follow her and she believes this prevents people from buying from her in case they too are affected.

Akua and Julius live in Kintampo, a growing town, but one where news travels fast and a person who has experienced mental illness might find it hard to hide this from others. When visiting potential research participants it is often easiest to find the person we seek simply by mentioning that we are looking for someone who was 'mentally sick'. An 'ah' of recognition and the person points the way to the family home affected. For this reason Julius does not want to be part of the participatory group and risk other people in the community discovering his history. For Festus, living and working in the relative anonymity of the capital, this is less of a concern. Festus sells his eggs to women who sell them in their neighbourhood stores. Abena Korkor, a beautiful and charismatic university

graduate who lives in the south of the country, markets fresh fruit juices online and at many entertainment events and has been open about her diagnosis of bipolar affective disorder, speaking on national media and other events. Festus and Abena are both well-educated, articulate and have relatively privileged access to resources within their networks. For someone like Akua, however, who is much less well connected with very little education, her ability to obtain work and advocate for herself is much more difficult.

As this snapshot suggests, meeting the ideals of the CRPD is not only a question of opportunities for employment, though of course this is vital, but also of addressing the ways in which stigma operates to exclude the most disadvantaged in society. In a hierarchical society with widening inequalities interventions which aim to address this stigma may be most successful for the most advantaged, leaving the poorest and least educated further behind. The question for our participatory approach in Accra and Kintampo is how best to engage those who are most marginalised and ensure their voices are also heard.

**Julius and Akua are pseudonyms.*



AN INTERNSHIP IN BRAZIL

Amber Mulcahy and Miranda Weston spent three weeks interning in mental health facilities in Rio de Janeiro, Brazil in June 2018.



We were drawn to this opportunity due to our interest in mental health and our desire to work in this field after graduation. We were also excited because it was advertised as a structured split between hands-on experience in mental health settings and academic learning at the State University of Rio de Janeiro. Additionally, we hoped to expand our language skills. When we arrived, it became clear that we would need some assistance in this area. One of the students offered to be our translator for the time we were there and this was invaluable to our experience.

We had never been to South America and saw this as a great opportunity to spend time in a radically different environment such as Brazil.

When spending time in mental healthcare settings, we were initially confused as to why so much healthcare was provided in primary care settings rather than specialist mental health units. However, the reason for this soon became clear when we were shown the inpatient units. The threshold for treatment at these locations was clearly significantly higher than that in the UK. We also found that a lot of the mental health issues experienced by Brazilian citizens were as a direct result of circumstances that are unique to their locality. We questioned whether these localised mental health issues should be medicalised and/or medicated or whether they are a normal response to an acute stressor. These circumstantial experiences included the violence experienced, such as family members lost due to gun violence, on an almost daily basis by Brazilian citizens.

On our days off, we were privileged to experience the attractions that Rio de Janeiro had to offer. This included Christ the Redeemer, one of the Seven Wonders of the World, which was amazing to see on a clear morning. We also took a cable car to Sugarloaf Mountain, which we found to be the quietest place in Rio! One of the students in the seminars at the university offered to show us the local beaches, including the famous Copacabana Beach. We also spent many hours on Flamengo and Ipanema beaches. In view of the recent election of President Bolsonaro, who is vehemently anti-LGBT rights, we reflect on our time in the gay capital of Latin America in a different light. As members of the LGBT community ourselves, we felt safe at the time to explore the LGBT scene in Rio and be open about our sexuality. However, if we were applying next year we may be more hesitant about our safety.

We found this experience to be invaluable in enriching our skills as researchers. The opportunity to gain access to mental healthcare on the ground, sitting in on mental health consultations and therapy groups, was particularly important in broadening our experience in this field. This brought our class readings to life, now being able to read about Brazil with a lived experience of its culture and everyday life. Having the opportunity to engage with postgraduate seminars at the university enhanced our critical thinking skills. Having academic discussions with postgraduate students and PhD candidates was a wonderful opportunity to challenge our understanding of how mental healthcare should be delivered.

In summary, we are incredibly grateful to the Department here at King's for this opportunity and to those that were so welcoming to us in Rio. We would not have been able to do this without the generous funding and bursary from the Department to cover the flights and additional costs of this trip. Particular thanks goes to our translator, Thais, who stood in at the last minute when we thought our limited language skills may bring the internship to a premature ending and a swift flight home.

Postcard from Maastricht

By Saheli Datta on behalf of the Foresight Lab



The GHSM's Foresight Lab led by Professor Nikolas Rose and Senior Research Fellow Christine Aicardi with Research Associates Tara Mahfoud and Saheli Datta Burton was at the historic city of Maastricht, Netherlands from 15–18 October as part of the HBP Summit 2018.

Held annually, the HBP Summit is a grand annual meet bringing together all researchers, postdocs and doctoral students affiliated with the 100+ 'neuroscience' research institutions and laboratories participating in the European Commission's Horizon 2020 funded Human Brain Project (aka HBP) – a €1 billion flagship research project aimed at 'advancing knowledge in the fields of neuroscience, computing and brain medicine' (www.humanbrainproject.eu).

As in preceding years, the first day of this year's Summit – formally the 'Open Day' – was thrown open to the public and an astonishing 359+ non-HBP visitors turned up to further their understanding of neuroscience and neurobotics. Questions around the ethical, legal and social issues of rapidly advancing research in robotics, supercomputing and artificial intelligence kept the Foresight Lab on its feet throughout the day, although admittedly the HBP's 'robotic' participants like Sheffield Robot's rabbit-like MiRo and child-robot 'Pepper' hogged a serious amount of public attention. This was followed by three days of deep dive

into presentations, debates and discussions of research progress made, strategic collaborative meetings and planning for future research, oodles of networking and hold on – an unforgettable drinks reception in the very hall of the 'Gouverneur's' building on the river Maas where the Maastricht Treaty (officially the Treaty on European Union) was signed on 7 February 1992 by the members of the European Community (photo 1 is from the memorable reception) (photo 2 of Christine and Saheli beside the 'treaty' and in the room where it was signed).

It was a hectic few days filled with back-to-back meetings but exciting with a palpable energy of being part of a group that is likely to change future societies in unprecedented ways. For Foresight Labbers, a truly memorable and immensely fruitful event with several new and exciting collaborative research endeavours with amazing research partners doing cutting-edge research. Until next year tot de volgende keer (in case you didn't know that's Dutch for 'till next time') from Maastricht!



Photo 1: Re-Signing the Maastricht Treaty – Foresight Lab with HBP partners (from left to right): Tara Mahfoud (do we need an intro?), Inga Ulicane (DeMontfort University, UK), Manuel Guerrero (Karolinska Institute, Sweden), Nikolas Rose (seriously?), Simi Akintoye (DeMontfort University, UK), Arleen Salles (Uppsala University.), Christine Aicardi (c'mon?), Saheli Datta Burton (really?).



Photo 2: Christine and Saheli beside the 'treaty' and in the room where it was signed.

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Datta S (2018). Emerging dynamics of evidence and trust in online user-to-user engagement: the case of 'unproven' stem cell therapies. *Critical Public Health* 28(3), 352-362.

Datta S, Aicardi C C R, Mahfoud T and Rose, N S (2018). Understanding Interstate Competitiveness and International Security in European Dual-Use Research. Biomimetic and Biohybrid Systems. Living Machines 2018. Lecture Notes in Computer Science 10928. Springer, Cham.

Aggarwal A, Bernays S, Payne H, van der Meulen J and **Davis C** (2018). Hospital Choice in Cancer Care: A Qualitative Study, *Clinical Oncology* 30(97):e67-e73.

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Tara M, Aicardi C, Datta S and Rose N. The Limits of Dual Use. *Issues in Science and Technology* 34, no. 4 (Summer 2018).

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Samuel G, Ahmed W, Kara H, Jessop C, Quinton S, Sanger S (2018). Commentary. Is it time to re-evaluate the ethical governance of social media research? *Journal of Empirical Research on Human Research Ethics*. <https://doi.org/10.1177/1556264618793773>.

Young A and **Tinker A** (2018). The Baby Boomers of the 1960s: Predicting Future Needs and Preferences. Precision Creative Media and King's College London.

Professor Anthea Tinker has continued to work with students to publish articles based on their dissertations:

Howie S and Tinker A (2018). Are we on the same page? Exploring the role of the geriatrician in the care of the older surgical patient from the perspective of surgeons and geriatricians. *Clinical Medicine, Journal of the Royal College of Physicians*, Vol 18, No 5, 374 – 379.

Patel J, Tinker A and Corna, L (2018). Younger workers' attitudes and perceptions towards older colleagues. *Working with Older People*, vol 22, No, 3, 129 - 138.

And on original research:

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Meet Summer Hawkins, visiting Associate Professor in the department until September 2019

Summer Sherburne Hawkins, PhD, MS

Associate Professor at Boston College in Chestnut Hill, Massachusetts, USA

What's your academic background?

I'm a social epidemiologist and my research focuses on evaluating the impact of policies on disparities in maternal and child health. I've been a faculty member at Boston College for the past six years.

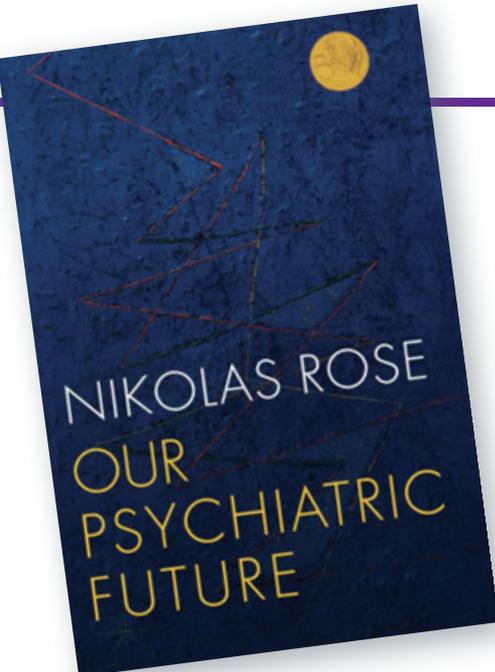
I received my PhD from the Institute of Child Health, University College London, then was a postdoctoral fellow at the Harvard T.H. Chan School of Public Health, in Boston, Massachusetts, USA. I also hold a master's degree in clinical psychology from Drexel University in Philadelphia, Pennsylvania, USA.

What are you working on at the moment?

My current research examines the impact of tobacco control policies on disparities in women's smoking during pregnancy by linking state-level policies to population-level smoking data collected on the US birth certificate. I'm now interested in women's use of e-cigarettes during pregnancy and how country-level policies affect women's decisions to use alternative tobacco products. During my time in GHSM, I'm exploring how policies differ between the US and UK and their influence on prenatal e-cigarette use.

What is your favourite thing about London?

Living in London feels very different now that I have two little girls. I love how you can be almost anywhere in the city and stumble upon a park or green space!


 The book cover for 'Our Psychiatric Future' by Nikolas Rose. It features a dark blue background with a yellow sun in the top right corner and a faint, abstract line drawing of a human figure. The title 'OUR PSYCHIATRIC FUTURE' is written in large, bold, yellow letters, and the author's name 'NIKOLAS ROSE' is in white above it.

NIKOLAS ROSE OUR PSYCHIATRIC FUTURE

Professor Nikolas Rose has recently published his new book, *Our Psychiatric Future* (Polity Press).

Our everyday lives are increasingly intertwined with psychiatry and discussions of mental health. Yet the dominant medical discipline of psychiatry remains surrounded by controversy. Is there an 'epidemic' of mental ill health in contemporary societies? Is mental distress really an illness like any other, treatable by drugs? Can psychiatrists differentiate between mental disorders and normal eccentricities, anxieties or even sadness? Should the power of psychiatrists be challenged by the knowledge of those with lived experience of mental ill health? This book, which arises from decades of engagement with the realities of psychiatry and mental distress, tackles such disputes head on through a rigorous analysis of the evidence, dissecting the part that psychiatry has come to play in the lives of so many across the world, arguing that advances in brain science, however exciting, are making little contribution to our understanding or treatment of mental ill health, and challenging the logic behind Western psychiatry's spread across the globe. It argues that it is imperative for mental health strategies to give a central role to those who have experienced mental distress and to their knowledge of the mental health system. On the basis of compelling recent research on the role of social adversity in producing mental ill health, the book proposes a radically different future for psychiatry, no less evidence-based or rigorous, and indeed far more attuned to the realities of mental health. Ultimately, it argues that as a branch of social medicine that identifies and challenges the social, economic and political determinants of mental ill health, another psychiatry is possible.

DAVID REUBI

1. Name and departmental title

My name is David Reubi and I am a Senior Lecturer in GHSM.

2. Courses

This academic year, I co-convened Key Concepts in Social Medicine together with Guntars Ermansons. I have also guest lectured for Mauricio Avendano on Key Concepts in Global Health.

3. What's your academic background?

My academic background is quite convoluted and very interdisciplinary. I first trained and worked as a lawyer. I did my training in Switzerland at the Universities of Neuchatel and Berne and then worked as a human rights lawyer – in Geneva, with the Association for the Prevention of Torture and in Sarajevo, just after the war, for the Centre for Human Rights at the University of Sarajevo and the United Nation's High Commissioner for Human Rights. These experiences were unsettling and threw up many questions, leading me to retrain in the social sciences. I did a MSc in Social Anthropology and then a PhD in Sociology with Nikolas Rose at the LSE on the genealogy of bioethics in Singapore and the UK. After that, I worked at the Centre for Human Rights at the LSE, the Department of Global Health and Development at the LSHTM, and the School of Global Studies at Sussex before joining King's as a Wellcome Trust Fellow in 2015.

4. What are you working on at the moment?

I am currently writing a book – provisionally entitled *Chronic Africa: The Social Sciences and the Biopolitics of the African Smoking Epidemic* – which draws on my extensive work on global health initiatives to reduce tobacco use in Africa, from the late 1970s to the present. I am also conducting interviews, exploring archives and possible field sites for a new research project – entitled the *Cartographies of Life* – on contemporary global health efforts to map and measure health and disease in Africa.

5. What is your favourite thing about London?

Together with my wife, I love to spend a whole day walking through and discovering new (to us) parts of the city. After 15 years in London, we still find new places to go. The difference, today, is that, with two small boys, we need to break our explorations with regular stops in playgrounds.

6. What do you do for fun?

I love traveling around the world, either for work or with my family. Recently, with my wife and two kids, we rented a car and drove up the Andes in the North of Argentina, close to the border with Bolivia. It was a wonderful, if sometimes a bit scary experience, especially driving mountain passes as high as 4,200 meters with a one-year old!



AMY HINTERBERGER

1. Name and departmental title

My name is Amy Hinterberger, and I am a Reader in GHSM.

2. Courses you teach:

This term I'm convening a module called Foundations in Global Health and Social Medicine. It's a postgraduate module and is team taught across the Department. As a new member of staff, it's been a fantastic way to become familiar with all the cutting-edge interdisciplinary research that happens in this Department.

3. What's your academic background?

I did my MSc and PhD at LSE in the Sociology Department, just across the road from King's. My undergraduate, I did a little farther away – in Political Science at the University of Victoria in Canada (where I'm originally from).

4. What are you working on at the moment?

Broadly, my work draws on sociology and the social studies of science to examine twentieth and twenty-first century life sciences and biomedicine. Recently, I've been studying how researchers make 'humanised animals', or what are more precisely called interspecies mammalian chimera. I'm writing up a series of publications from these studies.

5. What is your favourite thing about London?

There is always something new to discover.

6. What do you do for fun?

Cooking (and eating) with friends and family. I get outside when I can – that's probably the Canadian in me – I like hiking and exploring the UK countryside or even just exploring a new part of London on foot.



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