

# Research at the intersection of public health and the humanities

19-20 September 2024

University of Southern Denmark



Wellcome Trust grant 222203/Z/20/Z



# Programme

## **Thursday 19 September**

### **9.00-10.30 Panel 1: Health communication**

- Matthis **Krischel** (Heinrich Heine University) - Can the 1926 Great Exhibition for Health Care, Social Welfare and Physical Exercise serve as a resource for health promotion today?
- Cringuta Irina **Pelea** (Titu Maiorescu University) - How the Japanese government successfully uses comics as an official tool in public health education and communication.
- Akinrotimi **Evelyn** & Olakunle **Folami** (Adekunle Ajasin University) - Critical review of narratives: Enhancing public health among elementary school pupils in Ondo State, Nigeria.
- Rasik **Rahman** (Royal Thimphu College) - Music of vaccination: Religious songs and Covid vaccination hesitancy in Malabar Coast, India.

### **10.30-11.00 Break, coffee**

### **11.00-12.30 Panel 2: History and culture**

- Adeyemi **Ademowo** (Afe Babalola University) - The role of Yoruba cultural narratives in addressing mental health stigma in Southwestern Nigeria.
- Victoria **Lupascu** (Université de Montréal) - The effects of public health measures as seen through literature: pandemic writing in China.
- Ryan Robert **Weber** (Geisinger Commonwealth School of Medicine) - Food, flavor, and the fundamentals of sound: A diachronic analysis of music's role in shaping nutrition policies and (Mis)perceptions.
- Jesse **van Amelsvoort** (Universiteit van Amsterdam) - Mission accomplished? Governance, cultural representations, and lived experiences of the AIDS crisis in the Netherlands.

### **12.30-14.00 Lunch**

## **14.00-16.00 Roundtable**

Short provocations from:

- Anna Paldam **Folker** (SDU)
- Martin **Andersen** (SDU)
- Manon **Parry** (Universiteit van Amsterdam)
- Rishabh **Kachroo** (Shiv Nadar University)
- **Park** Young-su (Seoul National University)
- Marie Konge **Nielsen** (SDU)
- Lise **Saffran** (University of Missouri)

Followed by discussion, questions.

## **16.00–17.00 Reception**

**19.00 Conference meal: all speakers are warmly invited to attend.**

## **Friday 20 September**

### **9.00–10.30 Panel 3: Law, policing, and violence**

- Sophie **Franklin** (University College Dublin) - Public health and the ‘violence as contagion’ narrative.
- Berenice **Cerra** (Georgetown University) - The human rights-based approach to promoting a comprehensive nutritional policy to prevent non-communicable diseases (NCDs) in Argentina.
- Venus **Obazuaye** (University of Illinois Chicago) - At the center of the universe: centering black transgender women in the study of structural violence.
- Sarah **Dorrington** (Kings College London) - Health disclosure at work: tensions at the intersection between public health and humanities.

### **10.30-11.00 Break, coffee**

### **11.00–12.30 Panel 4: Public health humanities research at SDU**

- Nina **Nørgaard** (SDU) - “Make it visual!” – but how? A multimodal approach to public sexual health information.
- Cindie **Maagaard** (SDU) - Visible disability as counter-narrative in a sex education campaign: A multimodal approach to representations of youths with disabilities.
- Solveig **Pees** (SDU) - Gender and sexual consent: A multimodal analysis of Danish non-profit organisations’ communication about sexual consent on social media.
- Anita **Wohlmann** (SDU) and Ulla **Kribernegg** (University of Graz) – Healthy aging: approaches from literary and cultural studies.

### **12.30 – 13.30 Lunch**

### **13.30–15.00 Panel 5: Informing Practice**

- Nanna **Ahlmark** (SDU) - Recovery through vulnerability: a qualitative study of the transformations of veteran bodies through body therapy in Denmark.
- Erica **Nelson** (Institute of Development Studies UK) - Taking a 'Development Humanities' Approach to Contemporary Malnutrition and Food Insecurity in Latin America (and beyond?).
- Mette Marie **Kristensen** (SDU) - "You come as a human being...": Exploring sense of equality in arts interventions through an ethnographic study of Shared Reading.
- Cornel **Grey** (Western University) - Black queer desires and public Health policy: An incompatible project
- **Ankita** (Indian Institute of Technology) - Beyond the traditional-modern binary: what can religious sites offer to public healthcare?

### **15.00-15.30 Wrapping up and "next steps"**

**15.30 – *Coffee, cake and goodbyes.***

## Travel

Odense is about 170km (105 miles) west from Copenhagen. If you will be arriving by air, the best way is to fly to **Copenhagen Airport** and take a train via Copenhagen.

If you arrive in Copenhagen by train, you can take a direct train from **Copenhagen Airport (CPH Lufthavn)** to **Odense St.** The trip takes between 1.5-2 hours and trains run once an hour. Alternatively, you can travel via **Copenhagen H (København H, Copenhagen central station)** to **Odense St.** Trains run about every half hour, every day of the week. You can plan your trip or check the latest timetables on [dsb.dk](http://dsb.dk) (in Danish) or [raileurope.com](http://raileurope.com).

If traveling from Copenhagen Airport, exit the airport security area after the baggage claim and walk straight out. You will enter a hall with check-in counters. Toward the end of the hall, on your right, you will see a big sign “DSB,” which indicates the location of the ticket counters. Ticket machines are placed around that area as well. To access the train platform, walk further down the same hall and take the escalators on the left to platform 2.

### Train tickets

You can purchase train tickets online at the ticket counter at the airport, from ticket machines at train stations, or on [dsb.dk](http://dsb.dk) (in Danish) or [raileurope.com](http://raileurope.com). All major credit cards are accepted, but you will need a credit/debit card with a PIN to buy tickets at the ticket counter and at ticket machines. If you have a swipe-only credit card, it may be better to buy the tickets online in advance. Please note that the card you use for an online purchase may be demanded as a form of ID by ticket controllers on the train.

Tickets are valid on any train between the chosen departure and destination on the chosen date. When buying a ticket, you have the option to make a seat reservation (seat ticket). You need to explicitly ask for this option, whether you buy your ticket online, at the ticket counter or from a ticket machine. The seat can be in one of three zones: standard, family zone (child-friendly), or silent zone. The seat reservation, unlike the train ticket, is only valid for the specific train chosen. We recommend reserving a seat, especially if travelling during rush hour, as trains may get crowded.

### Getting to SDU from Odense station

The easiest way to SDU's Odense Campus from the station (or from the city centre in general) is via the tram (*Letbanen*), which runs approximately twice every 15 minutes in each direction. For SDU, take the tram towards **Hjallese St** and get off at **Campus Odense**. The journey takes under 20 minutes and tickets can be bought by scanning the QR code at each stop, or by booking through [Odense Letbane](http://Odense Letbane).

Alternatively, the university is a 45-55-minute walk from the city centre, on Rødegårdsvej.

## Accommodation

We can suggest the following hotels, all of which are close to Odense station and provide easy access by tram to the university:

- [Cablnn](#) – a basic, functional option.
- [Hotel Odeon](#)
- Any of the [Milling](#) hotels – there are several in Odense.
- [Comwell H.C. Andersen](#) Odense

## Venue

All on-campus activities will take place in the **auditorium**, or in the space just outside the auditorium. Note that the campus is mostly one single building, and it is about a kilometre to walk from the north entrance to the south entrance! The campus therefore has no fewer than three tram stops. The stop that you want is **Campus Odense**.

From here, go through the main entrance and follow the long corridor into the main campus. At the **University Book Shop**, turn right. Then follow the corridor to the end.

You will walk down some steps towards a side entrance. Turn left and you will be at the ground floor entrance to the **auditorium**. (Elevators are available at all staircases.)

You can use the website [maps.sdu.dk](https://maps.sdu.dk), which will provide directions to any room on campus.

## Online access

We have planned for all presentations to be delivered in person in Odense. The panels and roundtable will be streamed online for those who wish to watch remotely. The Zoom link for both days will be: <https://syddanskuni.zoom.us/j/66707104888>

# Participants

## **Adeyemi Ademowo (Panel 2)**

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Adeyemi Johnson Ademowo is a professor of social anthropology and cultural studies, at the Afe Babalola University, Ado-Ekiti, Nigeria, with expertise in cultural anthropology, development studies, political sociology, military anthropology, and African philosophy. With a PhD in Development Anthropology from the University of Ibadan, Ademowo has dedicated his career to understanding the complexities of culture, society, and human development. His research explores the intersections of culture, power, non-state actor, and social change, with a particular focus on the cultural dynamics shaping development initiatives in Africa.

## **Nanna Gram Ahlmark (Panel 5)**

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Nanna Gram Ahlmark is a sociologist of religion, PhD, and senior researcher in health and well-being among marginalized groups as well as complementary and alternative treatment approaches. She is part of the research group Social health at the National Institute of Public Health, University of Southern Denmark.

## **Martin Marchman Andersen (Roundtable)**

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Martin Marchman Andersen is an Associate Professor at the University of Southern Denmark and member of the [Center for Philosophy and Ethics of Health](#), with research interests in public health and philosophy, stigmatisation, sustainability, prioritisation, and evidence.

## **Jesse van Amelsvoort (Panel 2)**

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Jesse van Amelsvoort is a lecturer in modern European culture at the University of Amsterdam. Bram Mellink, his co-author, is assistant professor of Dutch history at the University of Amsterdam. Together, they are working on a project on the history of HIV/AIDS in the Netherlands, focusing on the social, cultural, and societal effects of the 1980s epidemic and beyond.



**Ankita (Panel 5)**

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Ankita is a PhD scholar at the Indian Institute of Technology, Delhi. Her research attempts to re-evaluate the “rural”, with deras in Punjab being the entry-point. Questions of changing village sociality, gendered performance of devotion, agrarian distress, and migration inform her research. She has a Bachelor’s degree in Economics from the University of Delhi, and a Master of Arts in Development Studies from Tata Institute of Social Sciences, Mumbai.

**Berenice Cerra (Panel 3)**

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Berenice Cerra is a human rights lawyer from Argentina and recently graduated with an LL.M. in National and Global Health Law at Georgetown University in Washington, DC. Before enrolling at Georgetown Law, she was the advocacy and legal coordinator at the Fundación Interamericana del Corazón Argentina, where she worked on public health and human rights legal research. In addition, she was responsible for developing NCDs, tobacco control, and food advocacy activities.

**Sarah Dorrington (Panel 3)**

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Sarah is a clinical lecturer and psychiatrist at King’s College London, funded by the National Institute for Health and Care Research. She has research training in epidemiology and cultural studies. Her interests include interdisciplinary collaboration; structural inequalities; understandings of psychosis; the impact of trauma and life events on mental health; and access to UK healthcare, work and benefits for people with mental health conditions. Sarah completed a PhD on the epidemiology of sickness absence, with a focus on the fit note. She is now developing an interdisciplinary project examining the process of workplace disclosure of physical and mental health conditions.

**Akinrotimi Evelyn (Panel 1)**

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Akinrotimi Oluwaseun Evelyn is a graduate of English Studies from Adekunle Ajasin University, Akungba Akoko, Ondo State, Nigeria. She is a postgraduate candidate in English Studies. She has collaborated with many academics in health-related topics. She works as Administration and counselling officer with the Immaculate medical diagnostic laboratory, Ondo State, Nigeria.

**Olakunle Folami (Panel 1)**

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Olakunle Michael Folami is an Associate Professor at the Adekunle Ajasin University, Akungba Akoko, Ondo State, Nigeria. He bagged a BSc and a MSc in Sociology and Anthropology from Obafemi Awolowo University, Ile-Ife, Osun State, Nigeria, and a PhD in Social Science from the University of Ulster, Northern Ireland, United Kingdom. His research has won a Distinguished Paper Award at the 2nd Istanbul Conference on Democracy and Global Security. He has also completed a research fellowship on the acceptance of international criminal justice with the Nuremberg International Principles Academy, Germany. He is currently Head of Department of Sociology at the Adekunle Ajasin University, Akungba Akoko, Ondo State, Nigeria.

**Anna Paldam Folker (Roundtable)**

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Anna Paldam Folder is a Professor in the National Institute of Public Health, SDU, and Head of [Human Health](#), SDU's strategic interdisciplinary network on the human aspects of health and disease. Anna holds a PhD in Ethics and Scientific Theory. Her research interests include social and structural factors in the mental health of the population and measures for people with mental health disorders.

**Sophie Franklin (Panel 3)**

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Dr Sophie Franklin is a [DOROTHY COFUND](#) postdoctoral researcher based within the English literature departments at University College Dublin and the University of Reading. Her current project historicises the “violence as contagious” narrative to establish a clearer historicization of the phenomenon and demonstrate how literary strategies can contribute to the ongoing global implementation of public health approaches to violence. She has previously worked at institutions including Nottingham Trent University, the University of Tübingen, and LMU Munich. Her first monograph, *Violence and the Brontës: Language, Reception, Afterlives*, is forthcoming with Edinburgh University Press.

**Cornel Grey (Panel 5)**

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Dr Cornel Grey is an Assistant Professor in the Department of Gender, Sexuality, and Women's Studies at Western University. His research focuses primarily on the health of black queer men. More specifically, he is interested in the ways that black queer men mobilize skin to skin contact as a practice of care. Before joining Western, he completed a postdoctoral fellowship at the Dalla Lana School of Public Health (University of Toronto) where he examined the impact of the COVID-19 pandemic on the social and sexual lives of gay, bisexual, and queer men. His current

projects include a qualitative study examining black queer men's desires for touch and an archival study examining black queer diasporic networks. He was recently a Visiting Fellow at the Sydney Social Sciences and Humanities Advanced Research Centre (University of Sydney).

**Rishabh Kachroo (Roundtable)**

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Rishabh Kachroo is a doctoral scholar in the Department of International Relations and Governance Studies at Shiv Nadar IoE located in Delhi-NCR, India. My doctoral work concerns the study of the public understanding of science and the roles that different actors (technical experts - scientists, multiple publics, and the state) play in the creation and evolution of a discourse surrounding science. Specifically looking at the history of immunisation and the COVID-19 pandemic in India, I work on the creation and evolution of attitudes regarding vaccines and vaccination. Other research interests include Philosophy of Science, Critical International Relations, and Arms Control and Disarmament Studies.

**Ulla Kribernegg (Panel 4)**

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Dr. Ulla Kribernegg is director of the Center for Interdisciplinary Research on Aging and Care (CIRAC) and full professor in Cultural Aging and Care Studies at the University of Graz. She is also an adjunct professor at the Medical University of Graz. Trained in American Studies, her focus is now on Age Studies, Health & Medical Humanities, and North American Cultural and Literary Studies. Ulla is founding member and former president of the European Network of Aging Studies (ENAS) and Associate Editor of *The Gerontologist*. She is a Fellow of the Trent Centre for Aging & Society, Canada, the AgeCap Center of the University of Gothenburg, Sweden, and the Gerontological Society of America. Ulla has led several research projects, taught internationally, and received several teaching and research awards.

**Matthis Krischel (Panel 1)**

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Matthis Krischel is a senior lecturer in history of medicine and medical ethics at Heinrich Heine University in Düsseldorf, Germany, and a member of the clinical ethics committee at University Hospital Düsseldorf. He received an MA in history of science from the University of Oklahoma (USA) and a PhD in history of medicine from Ulm University (Germany). His research focusses on the history of medicine and of the life sciences from the 19<sup>th</sup> to the 21<sup>st</sup> century.

**Mette Marie Kristensen (Panel 5)**

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Mette Marie Kristensen is an anthropologist and PhD-student at the National Institute of Public Health and Human Health at SDU, where she conducts research within the field of mental health promotion as well as cross-disciplinary research branching into the humanities regarding the use of literature and arts as health promotion.

**Victoria Lupascu (Panel 2)**

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Victoria Lupascu is an assistant professor of Comparative Literature and Asian Studies at University of Montréal. Her work explores how writers, directors and artists engage with and produce medical narratives to unveil hidden histories of cultural, economic and social disposability. Her training focuses on 20<sup>th</sup> and 21<sup>st</sup> century Chinese, Romanian and Brazilian literature and film, medical humanities and visual culture, with additional interests in Francophone graphic narratives of postpartum depression and mental ill-health. She has published articles in peer-reviewed journals, such as *Humanities*, *Chinese Literature: Essays, Articles, Reviews (CLEAR)*, and in edited collections such as *The Portrait of an Artist as a Pathographer: On Writing Illnesses and Illnesses in Writing*.

**Cindie Maagaard (Panel 4)**

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Cindie Maagaard, PhD, is Associate Professor in the Department of Culture and Language, University of Southern Denmark and a senior researcher in the VELUX project "Ignorance and Inequality in Sexual Health Addressed from a Multimodal Communicative Perspective." Her chief research interest is in narratives, the ethics of tellership, and the uses of narratives in understanding and communicating about health.

**Gareth Millward (Organiser)**

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Gareth Millward is Assistant Professor at the Danish Institute for Advanced Study and the Department of Culture and Language at the University of Southern Denmark. He is trained as a historian, but has worked in public health, history, sociology, and interdisciplinary humanities departments in the UK and in Denmark. He has previously published in historical and sociological outlets on the topics of disability, vaccination policy, and the interplay between health and social security services. He is particularly interested in how humanities research can inform practice, particularly in the areas of public health research and public health policy.

### **Erica Nelson (Panel 5)**

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Erica Nelson is a historian, ethnographer and participatory research methodologist with a strong background in community engagement, social accountability research, and the politics of public health in Latin America and globally with a focus on dynamics of power, including gender. She has been engaged in qualitative and historical research on/in community-based public health programmes and health policy-making processes for the past two decades. She is a Research Fellow at The Institute of Development Studies with a focus on inclusive research practices in global health, accountability and governance of health systems, and the history and contemporary practices of community-based public health and nutrition interventions. For her PhD in Latin American history from the University of Wisconsin-Madison (2008), she researched the politics of population control, motherhood, and family planning in Bolivia, c1964-2006.

### **Marie Konge Nielsen (Roundtable)**

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Marie Konge Nielsen is trained as an anthropologist at the University of Aarhus (mag. art in 1995 and Ph.D. in 2002). She is a qualitative researcher who has extensive experience in conducting fieldwork, interview studies, document research and evaluations among various stakeholders at home (Denmark) and abroad (Taiwan & China). Her major interests are life course research, generational research, ageing and "the good life".

### **Nina Nørgaard (Panel 4)**

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Nina Nørgaard, Ph.D., dr.phil., is an Associate Professor in the Department of Culture and Language, University of Southern Denmark and PI of the research project "Ignorance and Inequality in Sexual Health Addressed from a Multimodal Communicative Perspective", funded by the VELUX Foundation. She is the editor (with Theo van Leeuwen and Carole Jepsen) of a recent special issue of *Visual Communication* titled *Visuals in Sexual Health Promotion*.

### **Venus Obazuaye (Panel 3)**

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Venus Obazuaye (they/them/theirs) is a second-year undergraduate at the University of Illinois Chicago studying Chemistry and Black Studies. Upon graduation, they plan to pursue a combined M.D./PhD program, pursuing community-based research and health interventions. They are overall interested in Black and queer feminism, food justice, and prison abolition in conversation with healthcare.

### **Park Young-su (Roundtable)**

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Young Su Park is a physician anthropologist trained in the humanistic tradition with an interdisciplinary background that combines Medical Anthropology, Global Health, Humanitarian Studies, Korean Studies, and African Studies. His scholarship speaks to critical approaches to ethics, climate crisis, trauma and mental health, reproductive health, the historicity and temporality of global health, and genealogy of modernities in Africa. He undertook ethnographic fieldworks on historical memory and violence of East Asian modernities and South Korean global health projects in Ethiopia. His past works in public health involves research on healthcare systems for undocumented migrants, the cultural adjustment of North Korean refugee doctors, and illness experiences of Korean Chinese migrant workers in South Korea. Recently he conducted fieldwork in Kiribati for the WHO's climate crisis and health project in the South Pacific. Previously, he was a postdoctoral researcher at Freie Universität Berlin and University College London as well as a tenure-track Assistant Professor in Health Studies at Haverford College. Dr. Park received his PhD in Anthropology (Culture and Society track) at Stanford University.

### **Manon Parry (Roundtable)**

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Manon S. Parry is an historian of medicine and nursing and exhibition curator, specializing in the uses of the humanities for health and wellbeing. Her research focuses on health communication in historical perspective. She is Professor of Medical and Nursing History at VU Amsterdam, and Associate Professor in American Studies and Public History at the University of Amsterdam. She is co-editor of *Women Physicians and the Cultures of Medicine*, winner of the Archivists and Librarians in the History of the Health Sciences Publication Award for Best Print Publication in 2012. She is a member of the World Health Organization's Technical Advisory Group on Behavioural and Cultural Insights, and co-author, with Nancy Tomes, of their first historical report, "Infodemics in Historical Perspective: A WHO Synthesis Report," (Copenhagen: WHO Regional Office for Europe; 2022). She coordinates the MA History: Medical and Health Humanities at VU Amsterdam and directs the PULSE Network for Medical and Health Humanities.

### **Solveig Ilh a Pees (Panel 4)**

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Solveig Ilh a Pees is a PhD candidate at the Department for Culture and Language at the University of Southern Denmark. Her current research is a part of the research project *Ignorance and inequality in sexual health – addressed from a multimodal communicative perspective* funded by the Velux Foundation and applies multimodal critical discourse analysis to explore how Danish organisations and institutions communicate to young Danes about sexual consent.

**Cringuta Irina Pelea (Panel 1)**

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Cringuta Irina Pelea is Lecturer PhD in Communication Sciences at Titu Maiorescu University, Romania. Her primary research interests are Japanese cultural studies, manga, Japanese cultural heritage, and intercultural communication. She is the editor of the volume *Culture-Bound Syndromes in Popular Culture* (Routledge, 2023) and has published widely on Japanese language media and in Japanese language. Her forthcoming chapters on Japan are expected in *Future of Media in Asia* (Routledge, 2025) and *Fashioning the Asian Century: Aesthetics, Sustainability and Popular Culture* (Bloomsbury, 2025).

**Rasik Rahman (Panel 1)**

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Rasik Rahman is a lecturer at Royal Thimphu College Bhutan. Prior to joining RTC, Mr. Rahman was awarded Master of Philosophy from the department of Political Science, Hyderabad Central University. He has done his undergraduate degree in Political Science at Jamia Millia Islamia University, Delhi, and is a recipient of a Junior Research Fellowship awarded by University Grants Commission, Government of India. He is one of the founding members of Health and Religion Research Forum based in Kerala, an initiative by early career social scientists and medical practitioners. His area of research interests are religion and health, soundscape studies and critical infrastructure studies.

**Lise Saffran (Roundtable)**

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Lise Saffran (MPH, MFA) is an Associate Teaching Professor at the University of Missouri in the Department of Public Health (College of Health Sciences) and a writer of fiction and creative nonfiction. The former co-Chair of the Health Humanities Consortium and former Director of the MU MPH Program, Saffran's research focuses on narrative and storytelling in public health and science communication.

**Ryan Robert Weber (Panel 2)**

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Ryan Weber, PhD, is an Associate Professor of Medical Humanities at Geisinger Commonwealth School of Medicine (Pennsylvania, USA). His research interests include eugenics, the social construction of pain, music and medicine, the history of nutrition, disability studies, and global health policy with an emphasis on the Nordic region. He has presented research widely throughout the United States and Europe and is the author of numerous peer-reviewed publications on these topics. Additionally, he serves as an editor for the *International Journal of Music, Health, and Wellbeing*.



**Janet Weston (Organiser)**

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Janet Weston is an Associate Professor at the London School of Hygiene and Tropical Medicine, and Director of the Centre for History in Public Health there. Her research interests include histories of prison healthcare, HIV/AIDS, mental disorder, and public health law in modern Britain. She is the founder of the [Public Health Humanities network](#), which is co-sponsoring this conference.

**Anita Wohlmann (Panel 4)**

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Anita Wohlmann is Associate Professor in Contemporary Anglophone Literature at the University of Southern Denmark, Odense, where she is a member of the [Center for Uses of Literature](#). She teaches in the English and American studies programs as well as in the faculty of health sciences, where she co-coordinates the Narrative Medicine module. She is co-editor with Aagje Swinnen of the journal [Age, Culture, Humanities](#) and a founding member and coordinator of the [German Network for Narrative Medicine](#). Anita's research focuses on metaphors, age and aging, illness narratives, and life writing. Her newest monograph is [Metaphor in Illness Writing: Battle and Fight Reused](#) (2022, open access).



# Abstracts

## **Panel 1: Health communication**

### **Matthis Krischel (Heinrich Heine University) - Can the 1926 Great Exhibition for Health Care, Social Welfare and Physical Exercise serve as a resource for health promotion today?**

In 1926, the largest exhibition in the inter-war period in Germany took place in Düsseldorf with 7.5 million visitors: the “GeSoLei”, i.e. the “Great Exhibition for Health Care, Social Welfare and Physical Exercise [Große Ausstellung für Gesundheitspflege, soziale Fürsorge und Leibesübungen]”. The exhibition offered numerous presentations on the areas of science, industry and art, as well as an extensive entertainment and consumption area. It included displays on different concepts of hygiene, tropical medicine and women’s health. Among the directors were Arthur Schloßmann (1867-1932), professor of pediatrics at the Medical Academy of Düsseldorf and prominent social hygienist, and Marta Fraenkel (1896-1976), a medical doctor who went on to curate the 2nd International Hygiene Exhibition in Dresden and in 1935 fled Germany for the United States.

With the 100th anniversary of the exhibition coming up in 2026, an interdisciplinary research group at Heinrich Heine University in Düsseldorf, consisting of art historians, global historians and historians of medicine, examines the extent to which GeSoLei connected ideas of democracy of the Weimar Republic with concepts of health and welfare: who was included and excluded in the presentation of public health and how were different audiences addressed? With the upcoming anniversary, interest in the exhibition is beginning to stir locally and nationally. The research group has partnered with the City Museum of Düsseldorf to curate an exhibition in the fall of 2026 and has been approached by the city’s health department for cooperation.

As PI for history of medicine in the research project, I want to explore how concept of hygiene, public health and health education from the Weimar era can be used as resources for health promotion today and what can be learned from the historical analysis of the relationship between health and democracy for current questions of equitable access to health care and social welfare. This means that my presentation will be work-in-progress. I will present key aspects of public health promotion presented at GeSoLei and hope to develop in discussions with colleagues from the humanities and from public health connections with current problems and communication strategies.

## **Cringuta Irina Pelea (Titu Maiorescu) - How the Japanese government successfully uses comics as an official tool in public health education and communication.**

As an expressive medium located at the intersection between visual arts, literary media, and cultural studies, comics have been successfully employed throughout public health education in Western contexts. Nonetheless, empirical studies investigating this association in non-Western environments are conspicuously absent. In light of this scholarly gap, the present research aims to examine Japanese comics, also known as *manga*, as an application of Japanese language graphic medicine in public health education and communication initiatives conducted by Japan's government.

It is an understatement that manga has enjoyed flamboyant popularity not only in Japan but also on a global level. Unlike Western comics that target primarily underage audiences, manga presents the distinctive feature of having a well-established adult public and is set apart by particular visual, graphic and narrative conventions that have made the genre easily recognisable as a significant Japanese media cultural product. In addition to the distinctly Japanese cultural values that imbue the manga narratives – the pressure of collective shame, the social obligation of fulfilling one's duty or strictly following the rules – the socio-political background plays its role in determining the usage of manga in various contexts. As such, in the communication and education of public health topics, Japanese national and local authorities produce, distribute and frequently use “manga leaflets” that successfully transmit the message in a friendly and easy-to-remember manner. Manga leaflets generally target a broad spectrum of public categories: children, adults, elders, people with cognitive disabilities, and foreigners. Considering this background, this study closely investigates the following:

- (a) narrative content and specific devices of Japanese-language manga leaflets that address public health topics and are distributed by Japanese authorities (Japanese graphic pathographies);
- (b) production, distribution, mediatization, and reception related aspects;
- (c) cultural and visual particularities of Japanese-language manga and graphic medicine employed in public health communication/education;
- (d) Japanese linguistic repertoire: particularities according to the topic and public.

The analysis builds on the author's personal experience of handling/ receiving/ translating manga leaflets in Japan and her Japanese language proficiency (N1 level, native-like linguistic competence). A particular aspect the author has initially noticed is the “culturalisation” of public health messages: manga leaflets on hikikomori, ijime and karoushi, which are Japanese-specific national health concerns, are frequently distributed and made available in schools as well.

The key contribution of this research is two-folded: (i) it delivers the first study to address the usage of manga in public health education/ communication purposes and, above all, associated with the Japanese national and local authorities; (ii) it includes a language-related dimension and can serve as a model for future research on how authorities can employ arts and humanities in the public health field.

**Akinrotimi Evelyn & Olakunle Folami (Adekunle Ajasin) - Critical review of narratives: Enhancing public health among elementary school pupils in Ondo State, Nigeria.**

Public health is a major concern in Ondo State, Nigeria. The cost of medical care and the loss of qualified medical professionals make public health crucial in Ondo State. Schools have implemented various methods to promote public health among elementary school students and the community. This study focuses on public health among elementary school students in Akure, the capital of Ondo State, Nigeria. The study aims to understand how public health can be promoted through narratives such as poems and songs in schools. Elementary school students learn and memorize health-related poems and songs, which are then shared with the wider society.

The study used Cultural Transmission Theory to explain how narratives such as poems and songs can be shared as mechanisms of public health promotion. The transmission of culture in schools enforces culture both explicitly through the curriculum and implicitly through the hidden curriculum, such as reciting health-related poems and songs. Public health-related poems and songs were found to significantly contribute to the promotion of public health in Ondo State, Nigeria. It was discovered that learning health-related poems and songs provided mechanisms for preventing epidemics and the spread of disease ignorance among students. The study found that knowledge about public health increased significantly among elementary students through narratives such as poems and songs. The health-related poems and songs learned by pupils remain with them throughout their life.

The study differentiated health-related poems and songs from other general poems and songs learned by pupils in elementary schools. The study concluded that health-related poems and songs should be promoted not only among elementary school students but also throughout the entire society. Knowledge about public health through poems and songs would reinforce sanitation, a clean environment, and the overall health of the entire population. Promoting public health through poems and songs will reduce healthcare costs and the scarcity of healthcare professionals.

## **Rasik Rahman (Royal Thimphu College) - Music of vaccination: Religious songs and Covid vaccination hesitancy in Malabar Coast, India.**

With the onset of the covid 19, there has been substantive academic attention, including in medical science and social science, on the the administration and safety of vaccines as well as the policies and the social inequality of vaccination. Nevertheless, there is limited research on the role of music, aesthetics and belief systems that influence the community practices of the vaccination.

Based on fieldwork carried out in the coast of Malabar, Southern India, this paper enquires into the potential of religious and community songs to tackle the vaccine hesitancy. Malabar, predominantly populated by the Mappila Muslim community, has a rich history of religious songs in vernacular Arabi-Malayalam. Thematically, these songs consisted of a wide range of topics from praising the god, anti-colonisation, and even new technological developments.

In this paper, I wish to understand how the Mappila songs were instrumental in building a higher level of awareness about the need of vaccination and the threats of not taking the jabs amongst the community members. This paper also tries contribute to the soundscape of vaccination and public health.

## **Panel 2: History and culture**

### **Adeyemi Ademowo (Afe Babalola University) - The role of Yoruba cultural narratives in addressing mental health stigma in Southwestern Nigeria.**

Mental health stigma remains a significant barrier to effective mental health care in many parts of the world, including Southwestern Nigeria. This research explores how Yoruba cultural narratives—rooted in literature, folklore, and contemporary media—shape perceptions of mental health and contribute to the stigma surrounding mental illness within this region. By examining traditional Yoruba stories, proverbs, and oral traditions, as well as their representations in modern media, this study aims to uncover the deep-seated beliefs and attitudes that influence public perceptions of mental health.

Through a comprehensive analysis of these cultural artifacts, the research highlights the dual role of Yoruba narratives in both perpetuating and mitigating mental health stigma. Case studies of public health campaigns that have successfully integrated Yoruba cultural elements demonstrate the potential for culturally tailored interventions to resonate more effectively with local communities. Interviews with cultural leaders, mental health professionals, and community members provide additional insights into the complex interplay between culture and mental health.

The findings suggest that incorporating cultural narratives into public health messaging can enhance the acceptance and effectiveness of mental health interventions. Recommendations for future initiatives emphasize the need for collaborative efforts between public health professionals and cultural practitioners to develop culturally sensitive strategies that address mental health stigma. The study underscores the importance of understanding and leveraging cultural context in public health to foster more inclusive and effective mental health care in Southwestern Nigeria.

## **Victoria Lupascu (Université de Montréal) - The effects of public health measures as seen through literature: pandemic writing in China.**

On January 23rd 2020, all access to Wuhan metropolitan area grounded to a halt in an unprecedented effort of containing the spread of the novel coronavirus. The Chinese government intended the lockdown to represent, among others, a display of power and efficiency that could definitively erase any persisting imagery portraying China as the “Sick Man of Asia” and the source of the SARS epidemic. Despite tight measures, the new virus’ novelty and complexity challenged every medical community, and rapidly pointed to the diary genre as a mode of humanistic, crowd-sourced mechanism of constructing a better symptomatology.

This presentation focuses on the relationship between the diary as a literary genre, the medical profession, as well as public health measures, and their record-keeping practices during a pandemic. Fang Fang’s Wuhan Diary, alongside blog posts in the form of daily logs of symptoms, offer epistemological avenues to large audiences into the pandemic. Both Fang Fang and the blogs on state-surveilled platforms such as Wechat and Weibo restructure the genre’s literary architecture and propose new aesthetic dimensions, complementary to its long history in Chinese culture. I propose a re-evaluation of the synchronous relationship between the diary as a literary genre, and the humanities by extension, and the existing and expanding public medical records of the pandemic. I argue that the two archives of knowledge evolve in close connection during the lockdown to offer hermeneutical tools for taming an all-encompassing crisis. I hold that the lockdown in Wuhan represents a unique moment when we can clearly witness the collaboration between medicine and the humanities.

**Ryan Robert Weber (Geisinger Commonwealth School of Medicine) - Food, flavor, and the fundamentals of sound: A diachronic analysis of music's role in shaping nutrition policies and (Mis)perceptions.**

Aesthetic critics and scientists alike have long postulated the role that music plays in affecting our personal perceptions of flavor and influencing our public policies on nutrition. Perhaps few thinkers at the turn of the previous century were as outspoken on these topics as the American music critic and polymath Henry T. Finck. In his study *Food and Flavor: A Gastronomic Guide to Health and Good Living* (1913), Finck advocated for a nationwide program of “governmental gastronomy” based upon a “new psychology of eating,” which he developed from his study of Hermann von Helmholtz’s writings on auditory perception. As Nadia Berenstein has observed, Finck believed that the neglect of flavor led to a “national plague” of dyspepsia. Not only that, but he employed these convictions to contest the work of other prominent figures at that time including Harvey Wiley, who helped to craft the Pure Food and Drug Act of 1906 while serving as chief of the USDA.

While the publications of Finck and his contemporaries have fallen into the dustbin of history, new research has recently emerged into the reflexive relationship between nutrition, music, and human perception. The work of Charles Spence at the Department of Experimental Psychology, University of Oxford, represents some of the pioneering studies on this front. His many publications, including *Gastrophysics: The New Science of Eating* (2017) and *Sense Hacking: How to Use the Power of Your Senses for Happier, Healthier Living* (2022), bear an uncanny resemblance to the behavior-based interventions that music critics and theorists proposed a century earlier. Yet few studies have explored the significance of these ties and their implications for contemporary health policy. Therefore, in this paper, I will offer a novel comparative analysis of their approaches beginning with Finck’s development of what I term a “proto-epidemiological triad” and extending to Spence’s current efforts aimed at “optimizing the social aspects of eating and drinking in long-term care communities.” Taken together, this paper will reveal the past pitfalls and future promises of employing sensory experience to shape an individual’s diet and health as well as the public policies that bind these domains.

**Jesse van Amelsvoort (Universiteit van Amsterdam) - Mission accomplished? Governance, cultural representations, and lived experiences of the AIDS crisis in the Netherlands. (Paper co-authored with Bram Mellink)**

The dominant historiography on the Dutch approach to the AIDS epidemic in the 1980s and beyond is built on a positive ground tone. Built on the twin pillars of 'pragmatism and consensus' (Sandfort 1998, 3), the Dutch government is praised for quickly putting gay groups in the lead in combatting the spread of HIV and in the process avoiding additional stigmatization and discrimination of an already socially vulnerable group. In this presentation, we draw on a broad cultural and historical archive to nuance this view and suggest a potential alternative, one in which the mission is not quite accomplished.

Incorporating into public health research oral history interviews with long-term survivors and other witnesses of the epidemic, as well as analyses of cultural representations such as novels, film, and art works, suggests a much more multifaceted and ambiguous legacy of the AIDS epidemic. While Dutch lethality remained within European averages (WHO 2006, also Mooij 2004), a broad societal conversation around AIDS, public health, and sexuality never took off. There are few cultural representations of the pandemic, and even fewer that circulate widely in society, while broad conversations rooted in lived experience have also not become widely known. Consequently, discussions on HIV/AIDS in the Dutch public sphere remain strongly medical-governmental in nature. This lack of social and cultural '*Durcharbeitung*', we suggest, is indicative of a silencing around the topic that shows that, although the Dutch approach was medically effective, other aspects of public health have been ignored or at least fallen to the wayside.

Without studying these other dimensions of and entry points to public health, the claim that the Dutch approach was a success story due to its avoidance of stigmatization and discrimination remains an assumption. Through the Dutch case, we explore what form such a humanities-based approach to public health can take. Ultimately, we arrive at a broader approach to public health research that connects discussions in various domains of the public sphere, thus coming to a more holistic understanding of the aftereffects of the AIDS epidemic.



### **Panel 3: Law, policing, and violence**

#### **Sophie Franklin (University College Dublin) - Public health and the “violence as contagion” narrative.**

Since the WHO’s *World Report on Violence and Health* (2002) declared violence to be a major health burden, the treatment of violence through a public health approach has proliferated globally. Across the UK, for example, there are now 21 Violence Reduction Units in operation, taking an intersectoral public health approach to reduce physical violence in society. Yet the phenomenon of positioning violence as a matter of health and wellbeing is not new. Nineteenth-century Anglophone writers of fiction and nonfiction alike repeatedly aligned violence with disease, at a time when the definitional parameters of violence, contagion, and public health were shifting and coalescing. For instance, in 1857, the physician and educational reformer William A. Alcott asked in his book *The Laws of Health*: ‘if disease is violence, and yet is successful of being prevented, shall it be said that other violence cannot be prevented?’ By placing nineteenth-century literary texts in dialogue with such cultural and scientific discourses, I aim to show how narrative strategies became central to debates around public health, criminal responsibility, and the rise of violence as a cultural problem, with possible implications for ongoing global interventions.

In this talk, I wish to introduce my project, which seeks to historicise, what I call, the “violence as contagious” narrative and reflect on how historical representations of the narrative anticipate and still inform public health approaches to violence today. My talk will discuss my project’s expansion of Ivan Perry’s (2009) ‘public health theory of violence’ into the arts and humanities, in order to help prevent what Malte Riemann (2019) refers to as the ‘medicalization of violence’, which can place undue emphasis on ‘individual pathology’ and may eclipse structures of inequality. While Riemann and Perry highlight the significance of sociological and politico-economic approaches to preventing violence, my talk will show how an interrogation of nineteenth-century narratives of “violence as contagious” can reveal the implications of pathologizing violence, particularly in relation to the reinscription of societal stigmas regarding who is (and is not) deemed violent and therefore, in the context of the narrative, “diseased”.

**Berenice Cerra (Georgetown) - The human rights-based approach to promoting a comprehensive nutritional policy to prevent non-communicable diseases (NCDs) in Argentina.**

In Argentina, NCDs account for 73.4% of deaths, 52% of years of life lost due to premature death, and 76% of disability-adjusted life years. Unhealthy diets and poor nutrition, risk factors of NCDs, are responsible for Argentina being one of the countries with the highest rates of obesity and overweight in Latin America: 66.1% of adults are overweight, while 41.1% of children and adolescents between 5 and 17 years of age are overweight and obese, while in children under five years of age, overweight reaches 13.6% (Ministerio de Salud y Desarrollo Social de la Nación, 2019). At the same time, the pandemic mainly affects the most vulnerable population in the country: adolescents whose mothers/fathers have a lower level of education are 58% more likely to suffer from obesity than those with parents with a higher level (FIC Argentina and UNICEF, 2023).

This context has revealed the need to implement effective public policies based on the best standards of scientific evidence to prevent the epidemic, such as the front-of-package warning label and marketing restrictions, measures recommended by the World Health Organization. In this regard, legal research has demonstrated that the regulatory framework for nutrition promotion in Argentina needed to guarantee consumers access to accurate and concrete information on the content of unhealthy food and beverages to prevent their consumption. Furthermore, the legal analysis demonstrated that the legal framework did not promote the human rights to health and access to food, which are recognized in various international human rights treaties ratified by Argentina.

In 2021, Argentina passed the "Promotion of Healthy Diet Law" which integrated a public health perspective and a broad perspective of protection and promotion of human rights. The political process of sanctioning this norm understood the need for public policies on nutrition and NCDs that respond to the best public health standards and are connected with the state's compliance with its constitutional obligations and the mandates of the International Human Rights Committees. The presentation will analyze the Argentine case and how the normative analysis and the human rights perspective have allowed the framing of the debate on nutrition policy and influencing political decision-making.

**Venus Obazuaye (Illinois Chicago) - At the center of the universe: centering black transgender women in the study of structural violence.**

Many are familiar with a single statistic: the life expectancy of Black transgender women is thirty-five years. With more data and research, the general sentiment on this statistic has changed, but its implications remain the same: the United States is deadly for Black transgender women, with Chicago identified as a localized hotspot of violence.

Though Black transgender communities are aware of the scale of the violence, this information rarely makes more than local news. As part of Dr. Terrion Williamson's larger research on Black women and serial murder, this research study aims to highlight the experiences of missing and murdered Black transgender women. Drawing on frameworks established by Black queer feminists, their stories and struggle will lie in the center of wider analysis on gender-based violence. This study aims to create conversation between community members, activists, and journalists through oral history as the primary source of data collection and understanding—illuminating the public health issues that are entangled with these women's experiences. It secondarily seeks to build a case for understanding the murder of Black transgender women in Chicago as serial murder.

This presentation, will not only discuss what is learned from communities and newspapers, but document commentary on the practice of researching serial murder. Questions will be answered on what it means to be an accountable researcher, what it means to research pain and violence, and understanding and utilizing art as a means of action throughout the experience of pain and grief. This work will aim to see the lives and experiences of these women in full color, through commemorating their personhood, and cementing their experiences as a cornerstone in the academic conversation on Black serial murder.

**Sarah Dorrington (Kings College London) - Health disclosure at work: tensions at the intersection between public health and humanities.**

Despite ongoing political interest in the process of sickness certification and 'sick note culture', experiences of health-related disclosure at work have received very little attention. GDPR protects the rights of individuals to keep personal information confidential, yet disclosure is often assumed to be part of the sickness certification process and can be required in occupational settings - for access to sick leave, occupational support, health care and welfare.

In this paper I'll share examples of attitudes towards disclosure and non-disclosure in the workplace, through a public health and humanities lens. I'll focus on mental health and women's health. I'll describe assumptions made by policy makers about disclosure and the right to privacy during the process of sickness certification.

#### **Panel 4: Public health humanities research at SDU**

##### **Nina Nørgaard (SDU) - “Make it visual!” – but how? A multimodal approach to public sexual health information.**

Public health communication is critical to preventing illness and promoting the health and well-being of populations ([www.who.int](http://www.who.int)). In public health communication, verbal text often works in tandem with different types of visual communication, and in guidelines for effective communication, health communication professionals are no longer simply advised to use “plain language” but also to “make it visual” in order to make information more appealing, easier to understand and to reach people of all levels of literacy and education. Despite the increasing focus on visuals in health communication research and among health communication practitioners, scant attention is devoted in either domain to the semiotics of visuals, i.e., to how, more specifically, visuals make meaning in health information resources.

Additionally, the interaction between visuals and verbal text as well as other meaning-making elements such as colour, typography and layout remains underexplored. In my presentation, I will present a multimodal approach to communication (van Leeuwen 2005, 2008; Kress and van Leeuwen 2021, Machin and Mayr 2023) which specifically addresses such issues. For this, I will use examples from a research project which addresses issues of ignorance and inequality in sexual health in Denmark from a multimodal communicative perspective, focusing on public sexual health information materials. I thereby hope to show how a humanity-based approach can bring new perspectives on a critical health issue.

The presentation is part of the Danish research project “Ignorance and Inequality in Sexual Health Addressed from a Multimodal Communicative Perspective”, funded by the VELUX Foundation.

**Cindie Maagaard (SDU) - Visible disability as counter-narrative in a sex education campaign: A multimodal approach to representations of youths with disabilities.**

This paper springs from the Danish research project “Ignorance and Inequality in Sexual Health Addressed from a Multimodal Communicative Perspective.” Financed by the VELUX foundation, the project employs humanities-based methods to analyze how public health issues of sexuality and reproduction are communicated about by advisory and advocacy organizations, media, and the public. Because language and images not only reflect, but indeed shape people’s understandings of the world (Machin & Mayr, 2023), the project aims to illuminate how materials and campaigns create meanings about people of different demographic groups.

Sex and reproduction are important within public health (WHO), yet even in an ostensibly enlightened society like Denmark, a high degree of ignorance (Nebelong et al., 2020) and a lack of clear information about them exists (Nørgaard & Jepsen, 2023). Misconceptions and stigmas about genders, age, ethnicity, and able-bodiedness proliferate in normative cultural master-narratives about sexuality, perpetuating disparities in sexual health (Bamberg & Andrews, 2004). This paper addresses equality and inclusivity by examining an educational campaign about youths with disabilities, Lige Lyst (Equal desire). Produced by the Danish Association of Youth With Disabilities, it comprises photographs and stories of 13 youths to make disability visible and redress the problem that youths with disabilities are “unseen and unacknowledged as sexual beings” (<https://ligelyst.dk/udstillingen/>).

The paper employs multimodal social semiotics (Kress and Van Leeuwen, 2021) to analyze the words and photographs that realize these youth’s stories. I discuss what this method can contribute to educational campaigns and what this specific campaign teaches us about how youths with disabilities desire to be seen, including how the campaign constitutes a counter-narrative, challenging master-narratives (Curwood & Gibbons, 2010) about bodies and sex.

## **Solveig Pees (SDU) - Gender and sexual consent: A multimodal analysis of Danish non-profit organisations' communication about sexual consent on social media.**

In this paper, I use Instagram posts to investigate how Danish non-profit organisations communicate multimodally, through words and images, to young people about sexual consent. This public health issue, which is also intertwined with the representation of gender roles, is especially relevant since the introduction of new consent-based rape provision. A report by Gregersen et al. (2021) shows that young Danes are eager to learn about the concept but also lack knowledge about how to practice sexual consent. According to a report by Det Kriminalpræventive Råd (2023), a segment of young male Danes have a high acceptance of rape myths paired with a lack of knowledge about how to practice sexual consent. The report also shows that the acceptance rate of rape myths among young Danes has not changed between 2021 and 2023, suggesting that there is still work to be done in dispelling these myths and informing about sexual consent.

Young Danes do in fact use different means to inform themselves about sexual consent, for example by speaking with friends or family, searching on the internet and on social media, or by viewing porn (Gregersen et al., 2021). While young Danes' co-constructed experiences of sexual consent or non-consent have been researched by Johansen et al. (2020) and Knountsen (2023), communication that they receive from authoritative sources, for instance via social media, has not yet been researched in a Danish context. Therefore, this paper employing a Multimodal Critical Discourse Analysis (Ledin & Machin, 2020), examines how Danish organisations communicate multimodally about sexual consent on Instagram.

Multimodal Critical Discourse Analysis is well-suited for analysis of social media data, as it considers both the visual and linguistic aspects of social media posts, as well as the interplay between these aspects (Bouvier, 2022). My analysis focuses in particular on the representation of human participants, as well as the processes they are involved in. This focus allows for a discussion of gender roles in relation to sexual health communication in a Danish context.

While this paper cannot claim to investigate a causal relationship between gender representations in Instagram posts and young Danes' acceptance of rape myths and lack of knowledge about practicing sexual consent, it does draw attention to how the topic is being communicatively established in Danish media and how this communication may in turn influence how young Danes think about and understand sexual consent.

## **Anita Wohlmann (SDU) and Ulla Kriebnerneegg (University of Graz) - Healthy aging: approaches from literary and cultural studies.**

In our presentation, we wish to spotlight examples from humanities-oriented research on age as it is pursued by a field invariably called age studies, literary gerontology or cultural gerontology. The question of what the arts and humanities can contribute to public health policy and practice is central to the interdisciplinary field of age studies, which works at the intersections of geriatrics, sociology, demography, psychology and social work. A key topic is the public perception of age and how this perception is fundamentally shaped by culture. We are, as age critic Margaret Morganroth Gullette has argued in her seminal book of 2004, *Aged by Culture*, by which she means that the way people – including policy makers and researchers – think about aging and older age is significantly impacted by one-sided images, master narratives, stereotypes and socio-economic practices (e.g., “planned obsolescence” in consumer culture). Age studies aims to identify and deconstruct such naturalized conceptualizations of older age, claiming that unquestioned truisms and reductionist views about older age (such as the master narrative of inevitable decline) have a measurable impact on the health of older people which is strongly influenced by intersectional dynamics. Not only do older people, especially women, receive poorer care, which researchers have attributed to biases in health care professionals; but it has also been shown that older people match the stereotypes unconsciously, thus producing self-fulfilling prophecies. If one has learned that one’s health will decline anyway, why care for one’s health? These effects have been shown on the level of psychology, behavior and physiology.

But how exactly does a humanities-oriented field like age studies, with its methodologies derived from literary and cultural studies, make its case? What is the value of close reading and singular case analyses in disciplines that favor measurable outcomes and big data?

In our presentation, we will echo a common argument, namely that the humanities are valuable because they provide nuanced understandings, because they focus on perception and biases and the ways in which our knowledge about older age, just like health, is shaped and mediated by multiple cultural forces, and because they focus on creative practices rather than stable or fixed meanings. While we support these arguments, our experience also shows the challenges: research results from the humanities often remain siloed in their own fields and interdisciplinary endeavors, while applauded from colleagues in geriatrics for example, remain on the level of decor, a nice-to-have and edifying interruption from the “real” science. Far from being pessimistic, we will end with examples that illustrate a social and political impact, such as the Caring Community Project “Caring Living Labs” ([link](#)) and a project on Health Literacy of Older Migrants.



## **Panel 5: Informing Practice**

### **Nanna Ahlmark (SDU) - Recovery through vulnerability: a qualitative study of the transformations of veteran bodies through body therapy in Denmark.**

In this qualitative longitudinal study, we examine the recovery experiences of Danish veterans with PTSD throughout and following treatments of body therapy. The veterans undergo a transformation, which involves new ways of sensing and investing meaning in their body, as well as new bodily practices. Central in these transformations is the veterans' experiences with and interpretations of bodily vulnerability. In the analysis, we are inspired by the anthropologists Trundle, Gibson and Bell's concept of vulnerable articulations and the understanding that vulnerability can be both a destructive and healing force: on the one hand, the veterans' bodies are harmed through trauma and as a consequence their everyday life is disrupted, reflecting a destructive vulnerability of their body. On the other hand, learning to attend to and accept their vulnerability as it manifests in trauma symptoms becomes a pivotal dimension in their ability to self-regulate and recover.

In the study, we are also inspired by the anthropologist Veena Das' research on the everyday as a context that is crucial for transformation and works of anthropologist Keziah Conrad, who builds on but also challenges Das' work in emphasizing the potentials for transformation in a 'transcendent space' different from the everyday. In our study, we explore how the veterans' recovery process take place through the interplay between both these arenas; the therapeutic room as a transcendent space and the everyday, where new bodily meanings and practices are to be integrated. The study builds on 18 in-depth interviews with nine veterans conducted over a total of two years, interviews with their relatives, and participant observations during veteran exchange meetings. Our findings point to the potentials in acknowledging and foregrounding vulnerability as a potent force in recovery processes.

**Erica Nelson (Institute of Development Studies) - Taking a 'Development Humanities' Approach to Contemporary Malnutrition and Food Insecurity in Latin America (and beyond?).**

Latin America faces significant malnutrition challenges, with more than a third of the population in South and Central America facing food insecurity, in addition to high rates of childhood obesity and undernutrition (stunting, wasting, anaemia) (PAHO, 2023). The AHRC-funded network *Remembering and Acting on Malnutrition Phase 1* (RAM1) identified shared patterns in 20<sup>th</sup> century nutrition policy and programmes in Latin America; specifically, the stigmatising and shaming of mothers of malnourished children along the lines of class, geography and race. In a proposed second stage of research, we aim to further develop a humanities-driven alternative that disrupts the failed logic of current nutrition policy, as malnutrition problems worsen, both in Latin America and globally. This current work also builds on a rapid historical review carried out by Nelson (in collaboration with Nick Nisbett and Stuart Gillespie) in 2020-2021 to identify learning of past responses to food crisis in global nutrition relevant to Covid-19.

In this paper I reflect on what a 'development humanities' approach to public health and nutrition challenges in the 'global south' might look like, in order to more effectively speak to debates and 'crises' unfolding at speed. One possibility emerging from the recent work of a Latin American focussed network of humanities, participatory research, public health and anthropology practitioners is a methodology we are calling 'Development Humanities Labs'. These Labs can draw on knowledge produced out of the distinct strands of (historical, anthropological, participatory) inquiry and be used to inform a consultative process of establishing priorities and pilot interventions for public health and nutrition action. Such 'interventions' can be much more imaginatively defined than has been the case in past nutrition approaches – they may be an intervention related to memory work, or 'pedagogical allotments' of the intellectual variety (sowing, harvesting, preparing, and consuming new nutrition knowledge), or using community timelines to inform forecasting exercises. These learnings can then be compiled and shared more widely, to help build the capacity of nutrition actors to incorporate alternative historical perspectives into their work, and to model an experimental, humanities-led approach to development policy change.

In our recent 'Remembering and Acting on Malnutrition Work' we began the preparatory phases of research for Development Humanities Labs, which included trialling new approaches to 'Witness Seminars' that bridge the 'target population' and policy maker divide in state-led nutrition interventions of recent decades. We also tested participatory research methodologies drawing on life histories approaches to develop alternative 'community timelines' of nutrition interventionism. In this paper I will critically assess the challenges of cross-disciplinary working where humanities methods are – in novel ways – taking centre stage.

**Mette Marie Kristensen (SDU) - “You come as a human being...”: Exploring sense of equality in arts interventions through an ethnographic study of Shared Reading.**

Research shows that the arts hold a particular potential for promoting health, well-being, and social inclusion for vulnerable people. However, the use and consumption of the arts tend to be socially skewed in favor of people with high cultural, social, and economic capital. While extensive research has been conducted on how to create equal access to arts activities for vulnerable groups, little research has investigated how to ensure meaningful engagement with the arts by this group.

Shared Reading has had considerable success with engaging vulnerable groups in collective literary practices, and research suggests that this may partly be due to the unique forms of social and literary engagement that the concept fosters. These forms of engagement, we suggest, lay the foundation for a sense of equality among participants that may promote social connectedness and well-being. On this basis, the present study aims to investigate the role of and potential mechanisms for a sense of equality in Shared Reading practices.

The study found that Shared Reading promotes a sense of equality by creating a space where social interaction and relatedness does not hinge on social roles, but rather on lived experiences—and vulnerabilities inherent to these—conveyed through literary texts and shared among participants. However, to promote a sense of equality in Shared Reading, meaningful engagement for all participants must be ensured, making facilitation an essential element of Shared Reading practices and an important focus in arts interventions in general.

We conclude that the potential of SR for the promotion of a sense of equality may also be found in arts interventions more broadly, enabled by the capacity of the arts to connect, empower, and transform people through expressions of human experience. Thus, sense of equality may not only provide a basis for social connectedness, but may also, to a certain extent, challenge notions of inequality and promote social change. Further research is needed on the specific qualities of and potential contexts for the promotion of a sense of equality.

## **Cornel Grey (Western University) - Black queer desires and public Health policy: An incompatible project**

Black queer men have asserted skin-to-skin contact as an important part of their social and sexual lives. Touch, specifically forms of positive contact that are not mediated by prophylactic devices (i.e., condoms, gloves) has been shown to provide health benefits including improved heart and lung function, decreased stress levels and increased capacity for social attachment. Despite this, black queer men have often been pathologized for engaging in intimate practices that involve 'raw' contact.

In the wake of public health crises like HIV, COVID-19 and mpox, this paper examines black queer men's practices of intimacy to better understand strategies for care within marginalized communities. Drawing on black feminist and queer theories, I turn to cultural artefacts (i.e., photos, poems, letters, journals, etc.) produced by black queer writers to highlight models of care that both recognize that 'contact' is both a problem for public health and a basic human need. Historians of Atlantic slavery have demonstrated how the documentation of black life within surgeon's journals led to the development of modern medicine.

This paper argues that the journals and letters of black queer writers living with, and affected by HIV/AIDS, are a productive site from which we can develop more robust and inclusive models of healthcare as well. Furthermore, I suggest that the intimate practices and politics of black queer communities can be (and remain) instructive for contemporary approaches to public health and social welfare.

## **Ankita (Indian Institute of Technology) - Beyond the traditional-modern binary: what can religious sites offer to public healthcare?**

A logic of separation pervades contemporary understanding of health and healthcare systems, particularly when studying the “third world”, where a “modern”, scientific, universal system of healthcare is placed in diametrical opposition to “traditional”, unscientific, localised practices of treatment and healing. While the former derives from western education and thinking and is driven through an organised structure, the latter is steeped in a sacred landscape where rituals and holy powers combine to cure afflictions. Mapped neatly onto this is the opposition of “informed” urban healthcare consumers and “ignorant” rural population dependent on dua (prayers) rather than dawa (medicine).

Through this paper, I seek to unravel this dichotomous understanding through an ethnographic exploration of deras, religious sites associated with living gurus, in the Indian state of Punjab. Rather than an uncomplicated opposition of modern healthcare and traditional healing, the curative economy of a dera may rely on both, although through a hierarchised scale where ritualistic healing mediates the effectiveness of both indigenous and modern medicine.

In conjunction, public health seekers, both in rural and urban areas, may similarly place ritualistic healing through religious-spiritual sites on a higher scale in terms of effectiveness and relief. These sites often turn into providers of relief when everything else, including (and particularly) modern infrastructure of healthcare, fails. This is especially pertinent for communicable diseases like typhoid, chicken-pox, and coronavirus.

In this context, this paper delves into health-seeking behaviour of rural “patients”, and their bodily experiences of treatment and relief. Through participant observation and semi-structured interviews, this paper attempts to redefine what a “legitimate” and “effective” public health intervention can look like and entail for the larger rural population.