Social Science Research on Antimicrobial Resistance

ESRC Workshop #amrchamp

Clifton Zoo Gardens, Bristol
22 April 2016
Anthropology and AMR

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Outline

• Resisting the behaviour box
• Is this the only way to think about AMR?
• How then can anthropologists study AMR?
Resisting the behaviour box

• Expectation for anthropology / social science role to be about behaviour change – especially in relation to overuse of medicines

• Why resist this?
  – Assumes that the ‘problem’ is overuse, and that the responsibility for AMR lies with certain (ignorant?) individuals
  – Anthropology has a lot more to offer
Is this the only way to think about AMR?

• Dominant discourse..
  – AMR is a thing. A bad thing.
  – Antibiotics are miracle drugs.
  – We should preserve these precious drugs.
  – Antimicrobials are used inappropriately/irrationally and this causes resistance
  • If we were prudent/proper antibiotics could fulfil their promise. ‘We’ need to be stewards

• A second look at AMR...
What is AMR?

- Singular or multiple?
  - What does being singular do?
- Fixed or contingent?
- Metaphors
  - ‘resistance’?
- A disease? An infection?
- What does it do...

- Discourse analysis
- Classifications of disease
- Social lives of medicines
- Medicalization
- Pharmaceuticalization
Where is AMR?

- Laboratories
- Policy arenas
- Hospitals
- Global / local
- Nature/culture

- Actor-Network Theory
- Social studies of science
  - Materia medica
  - Socio-spatial practices
  - Political economy
  - Ecosyndemic
When is AMR?

• Older than antimicrobial use
• History of antibiotic use
  – Hospitals
  – Politics
• When does AMR present a problem?
  – Time?

- Social history of biomedicine
- Archaeologies of scientific reason
- Medicalization
Why AMR?

• Relative importance of the problem, now, for whom
• Access / excess
• Interventions – what are they/should they be? What are their consequences? Emphasis on overuse..
Who is AMR relevant for?

- **Who should be concerned?**
  - Particular groups (the poor)?
  - Microbes?

- **Who is responsible?**
  - States
  - Citizens
  - Pharma?
  - Biopolitics
  - Capitalist Realism
  - Multi-species
  - (Moral) economies of care
How can we learn about this?

• Observational research
  – Understanding how these medicines are used now
  – Understanding how AMR is talked about
  – Understanding the intersections between AMR, disease, place, politics, living

• Evaluative research
  – Following particular interventions

• Interventional research
  – Highlighting alternatives
Acknowledgements

• Dr Eleanor Hutchinson, LSHTM
• Dr Coll Hutchison, LSHTM
• LSHTM AMR Interest Group