

Synergies

The Edinburgh Centre for Medical Anthropology,
MAT, and a Shared Vision

MAT Editorial Collective

First seeded between departments in Geneva and Amsterdam, moving to Edinburgh and expanding to a model with an editorial collective and an International Advisory Board drawn from across the world, today *MAT* is a global project indeed. But the journal also has a collegial, intellectual and editorial home at the [Edinburgh Centre for Medical Anthropology \(EdCMA\)](#), of which the journal's Editorial Collective are all members. Since its establishment in 2015, EdCMA has grown in membership and built a profile as a world-leading academic unit for the anthropological study of the body, health, illness and medicine. As the midpoint of the year approaches, this editorial is an opportunity to highlight EdCMA's achievements in building a community of medical anthropology researchers within and beyond the University of Edinburgh, a wider intellectual environment which enriches and supports the work of *MAT*. We will also announce and explain our decision to transition *MAT* to a rolling publication model.

EdCMA runs an MSc taught programme in Medical Anthropology and an intercalated degree programme in Anthropology and Sociology of Medicine for medical students. There is also an annual lecture, given by an emerging or established scholar in medical anthropology and hosted by the centre, and a continuous programme of seminars and workshops with invited speakers throughout the year. The centre also supports Students of Medical Anthropology

(SoMA), a student-led group whose events involve students and faculty from all over the UK.

The Centre has so far held two international conferences, bringing together medical anthropologists and practitioners from a range of disciplines to advance their research and build collaborative networks. The first of these, on 'Valuing Health', took place in 2018 before *MAT* moved to Edinburgh, and the most recent, on 'Pluralizing Global Mental Health: Care, Crisis and Critique', took place in June 2022. For this occasion, *MAT* editors Ian Harper and Cristina Moreno Lozano compiled an [online archive of *MAT* articles](#) relating to the conference's theme, which continues to be relied upon for teaching and research purposes. Besides, there is a growing interest among the centre's membership in global health challenges which stem from environmental degradation and climate change; inspired by this theme, EdCMA is collaborating with colleagues at Durham University to co-host a two-part conference on Health, Environment and Anthropology (HEAt) over the next two years.

Many of the Centre's members have years of expertise and fieldwork in the Global South or with marginalised populations. There is a wide range of topic-specific and regional expertise, including on anthropology as applied to mental health, global health, infectious disease, hospitals, pharmaceuticals, medical enhancement technologies, gender and reproduction, health and migration, health and environment, and human-animal relationships. This expertise deepens as our membership expands with new appointments at the university: EdCMA recently welcomed new members Marlee Tichenor, Nichola Khan and Lioba Hirsch. EdCMA members Rebecca Marsland and Sumeet Jain are editors of the journals *Medical Anthropology* and *Anthropology & Medicine* respectively, enhancing EdCMA's contribution to intellectual leadership in medical anthropology beyond *MAT*.

The EdCMA community has hosted *MAT* for five years, turning it into a fully indexed Diamond open access journal. We provide permanent, free access to published work for readers across the globe and charge no fees from readers nor authors or their institutions. This has been made possible by the voluntary labour of the *MAT* Editorial Collective and valuable support from the School of Social and Political Science at the University of Edinburgh and the Edinburgh University Library. Despite this institutional support, the challenges of open access publishing are ongoing, and we continue to pursue ways to support the journal and its publishing model that are sustainable and based on ethical labour practices. From this issue onwards, we will be moving to a rolling publication model, which means that accepted material will be published as and when it is ready rather than being held back for publication in our regular April or September issues. Pieces published

between November and April will be included in the April issue, and those published between June and September will be included in the September issue. We hope this will speed up the publication process for our authors, and provide a more dynamic interface for our readers, bringing *MAT* in line with many other journals in the social sciences and humanities and beyond.

The issue

This issue includes five Research Articles, a Position Piece, two Field Notes pieces, and two Review essays. The first three Research Articles all take the reader to institutional settings of healthcare provision, but go on to tackle very different questions. Irons' article explores 'Diversity amongst Decision Makers' in England's National Health Service (NHS) across various tiers of governance, and analyses the under-representation of Black and other racially minoritised people in the top tiers of management of the health service as 'the afterlife of colonialism'. Van Voorst's article focuses on what she calls 'medical tech facilitators' in the Dutch healthcare system; she argues that the emergence of this category of medical professionals collaborating with technology startups is both a reaction to what they experience as a frustratingly inefficient healthcare system, and a means by which these problems are reproduced. Robertson's article examines the role of humour in the uniquely queer environment of an anal cancer prevention clinic in Chicago, USA, and argues that (especially in the context of stigmatised disease in a taboo body part) it has a palliative effect on patients and should be considered a form of care.

Next, the article by Ghafoerkhan and colleagues tackles the concept of 'neglect' in global health in relation to the prioritisation of mental health interventions in protracted displacement conditions. Drawing on interviews with professional experts and those with lived experience of displacement, the article makes a series of proposals addressing various differing contexts and expressions of distress experienced by displaced people. Docot and Go's article traces the inherited colonial logics of the Philippines' response to COVID-19, especially in relation to treatment of the dead, and its reverberations with colonial notions of virality and unruliness.

The following Position Piece, by Turk, uses the example of a recent Mongolian state-sponsored event promoting mindfulness to influencers (at which she presented) to explore the changing associations of the concept of *setgel* (loosely translated as 'mind') in Mongolian society. It goes on to reflect on how anthropologists, as generators of 'cultural' knowledge, attend to the expectations of our institutional hosts in the field while also maintaining fidelity to historical change in our work.

Field Notes contributions in this issue are from India and Senegal. Ganguly explores the ethics of working in mental health care in the context of non-profit counselling organisation in Bengaluru, India. Wood explores the invocation of Senegalese cultural tropes of mutualism and solidarity in its version of Universal Health Care (UHC), in combination with 'African values and morality' in Senegal's post-colonial developmentalist visions.

The issue ends with two Review essays: one by Davies which seeks to anthropologically interrogate cancer as category, and the other by Douglas and Pieta, which discusses three pieces of work on the role of research ethics committees in biomedical and medical anthropological research. We hope that you enjoy reading this issue.

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