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## Preface

Hermes is the protector of travellers, of those who are on the road and have to cross boundaries, the patron, in other words, of those who find themselves in liminal spaces. In addition, he is the messenger of the gods, the only one in the Greek pantheon capable of moving between the divine realm, the world of humans, and the underworld. In the latter half of her professional life, Annemiek Richters has focused on work in post-conflict societies, Rwanda, Bosnia, South Africa among many others. She often travels between the experiential hells that people live in during collective violence and in devastated communities afterwards; and back to the world of those capable of helping to relieve or mitigate the suffering of the people she has met. In doing so, she has tirelessly dedicated her considerable efforts in search of techniques and methodologies to help people find their footing on the road back to life.

The central theme of Annemiek's work of the last decade is about boundaries, protective walls that shelter and defend, and foster a feeling of belonging; and prohibitive barriers that violate and reject, and generate a sense of exclusion. Along with her, the essays in this book all explore aspects around the theme of connection: the pain of disconnection; the necessity of reconnection; all the myriad of ways people are connected to each other: through love and shared suffering; or through common history or language or beliefs or customs; or hope. But being a member of a group can also bring with it its own ambivalences: the comfort of knowing your place, but also the proscription against stepping out of assigned roles. Some essays therefore explore how new paradigms can be used to get a better view on possible obstructive practices and constrictive boundaries within groups.

There are stories within stories in this book. Stories can help us to gain insight into the impediments that continue to obstruct the way to well-being. Storytelling never creates only an individual personal meaning but is always a matter of intersubjectivity between the narrator and the listener, where a multitude of private and public interests play a complicating role in this web of human relationships in which people tell stories. Myths, stories that have been handed down for hundreds of generations, can help us to

understand the power roles and what is at stake within a society and the social and cultural consequences. Blood, for example, that life-energy that flows through every human's veins, can draw the help of healers but can also serve as a reason to exclude. Individual experiences are carefully refashioned so they match the dominant narratives and thus can be recognised by others. As anthropologists it is our challenge to capture the whole story, with all its exposed and hidden levels of experiences and of influences.

A number of the contributions emphasise the transformative power of communication between people. Some articles focus on the actual dialogue and its multitude of meanings, which, when understood can create a shared transitional space. Another article points out the importance of or simply what happens when people come together as human beings with bodies.

Many contributions discuss the contradictory dynamics in their research field. If conditions are reified and insights become static – that is: assumed to be true in themselves instead of in relation to a context – they can hinder seeing what is at stake for a person, what might be harmful or helpful, and when. One such example is the use, in the Dutch multicultural mental health system, of the 'cultural interview' conceived to help connect people by bridging the culture gap between a psychiatrist and a patient. But when it is used as a tool of culture, it can put boundaries around a person by culturalising his or her problems, or inventing new diagnoses disconnected from the social-political milieu in which either, or both, the doctor and the patient live.

Using the seemingly incontrovertible premise that social capital and social ties are crucial conditions for health and well-being, can blind us to the power issues and other negative aspects of being embedded in a social group. These might include: being responsible for others, judged or gossiped about, forced into roles and actions that are inimical to the body (such as female genital mutilation) or personal autonomy (such as forced marriage), or being expelled from the group. Such dangers may loom especially large when the smaller group one belongs to, whether it is a minority ethnic group or a traumatic family, is inward-looking and insufficiently embedded in a larger social context.

The intricate web of power relations in societies can be conceived of as a partly hidden, partly visible systems of communicating vessels. People have different roles and each of these roles include aspects of control, privileges, duties, commitments and responsibilities. The subjective perception and the intersubjective space between people are informed and influenced by a complex amalgam of biological, cultural, social, symbolic, political, economic and historical aspects of a community. These positions are not only

reflected in the interpersonal encounters, but can also be visualized or performed in matters such as food, or in reaction to information derived from new medical technologies and research.

How to bring this rich sometime contradictory complexity into our research and analytical frameworks is the focus of several instructive and constructive articles. What might be in the best interest for the whole of a person? Intersectionality is one of the approaches that provides a very useful framework for integrating all the various tools in our medical-anthropological analytic toolbox. Only then the workings of contradictory or complementary forces can become visible, for instance, how some people at the same time can be in power and powerless. Exploring the newly visible linkages can lead to new answers or solutions. Nonetheless, these new answers do not automatically lead to different social policies or political action. Several articles raise the question of how to communicate information that flows from new medical technology, because without context it does not necessarily or automatically improve the quality of people's lives.

This volume is dedicated to Annemiek Richters, and her life and her work. By contributing to this book we all demonstrate our connection to her, in friendship and in respect. Her dissertation, *The Medical Anthropologist as a narrator and translator*. Travelling with Hermes to the land of False deities,<sup>1</sup> both meticulous and sweeping, has been one of the cornerstones in critical medical anthropology in the Netherlands. It was, however, not only her books and articles that influenced our anthropological view, it has also been Annemiek herself. Towards her students, there has been a precise, critical, but always respectful eye, coupled with a passion and tireless dedication to nudge them towards expressing the best that is in them.

But it is more, as several contributors have noted. She has been able to transform her pain and outrage at the injustices she has seen and of the suffering she has heard into a quiet activism: 'she has made the effort to spread the word.' As a result of her travels, extensive knowledge and experience and her international web of contacts, Annemiek brings the everyday reality of many people to centre stage in her teaching – no matter what form that teaching may take.

Due to a number of unrelated reasons, including that conundrum of academic publishing, finding funding, we started this book very late, near the end of the academic year. The financial generosity of many people, especially Eduard Bonsel, as well as a number of organisations, allowed us to make this volume a reality. We asked people to turn in – in six weeks – a professional article around the following general theme:

The importance for the individual to have access to, or to be part of a group or culture. How it can be the cause of suffering or even disease if that access is missing or obstructed and how that culture or group the individual feels part of, can lead to health (or at least productive functioning). This theme is just as relevant at international level as on the home front (patients, refugees, migrants, vulnerable groups and so on).

To our pleased astonishment, 31 people were able to respond, many of them making final polishing changes just before or even during their vacation. A note of regret about people who do not appear in the book. Some had to bow out with pain in their hearts because our deadline was punishingly tight and they had previous commitments; others were not even asked because of our oversight, or our unawareness of their connection to Annemiek, or simply because we did not have the right contact data.

A number of authors wanted to weave into their articles personal tributes to Annemiek and her work. We asked them not to, because, knowing Annemiek, we thought we would make her happier with a book that may—hopefully—be used as a professional tool for inspiration. We made two exceptions. Just after this preface there are two more personal accounts spotlighting Annemiek's spirit of restless inquiry and perseverance. All the other papers are intended to contribute to the debates in medical anthropology and in health care in general. One special addition, also in the beginning, is the only English-language review of Annemiek's dissertation, published in *Social Science & Medicine*, by the late Dr. T.W. Maretzki. It gives a comprehensive overview of her dissertation for people who do not speak Dutch.

As for the structure of the book, we prevaricated endlessly on how to organise it along thematic lines, but each time we tried, two things happened: we realised most articles could be in many different categories, depending on where one thought the emphasis was, and that our emphasis might not be that of the author's; and, we were left with several articles that were excellent but defied categorization. In the end, also for reasons of time, we decided that discretion was the better part of valour (Shakespeare) and chose the straightforward alphabetical route. We hope that a happy by-product of this decision might be that the reader finds unforeseen patterns and cross-fertilizations because of unexpected juxtapositions.

We would like to express our deep appreciation to all the authors in the book for their prompt and professional responses to our queries and suggestions. A particular thanks to Lianne Holten, whose perspicacious reading

of most of the first drafts and her succinct comments and recommendations helped us immeasurably in shaping the book.

This book is testimony to the fact that the intangible connective qualities of affection and respect can result in a material product that we hope may continue to motivate and encourage others.

*Marianne Vysma & Marian Tankink*

4 September 2011