In this dossier, we present 10 articles exploring the theme of “Health/ Illness, Biosocialities and Culture”. Addressed to a larger non-Portuguese speaking audience, our aim is to promote the research that has been developed by Brazilian Anthropologists from different generations, academic disciplines and university institutions on a variety of topics associated with this central theme. The articles presented here highlight the diverse ways that medical knowledge and technologies are being constituted by and constitutive of culture, politics, ethics and identity in Brazil. In doing so they extend and bring to bear novel theoretical perspectives in approaching questions of biosocialities, health and illness.

All the articles in this dossier consider the social impact of biomedicine, biotechnologies and public health policies and their role in the definition of new “pathologies”, novel meanings of risk, contemporary social practices and cultural conceptions of ‘life’. A range of ethnographic contexts inform these discussions including clinical or medical settings, non-governmental organizations (NGOs) and patient groups, thereby illuminating the diverse arenas of social practice through which contemporary cultural configurations are being co-produced. Moreover this Vibrant issue presents empirical material that shows not only that there are continuities with global social processes
but also how historical, political and cultural specificities of the Brazilian context inform these developments in unique ways.

In the wake of developments in genetics in the late 1990s, linked to high profile initiatives such as the Human Genome Project, North-American anthropologist Paul Rabinow, extending and transforming the theoretical paths initiated by Michel Foucault on biopower, observed the emergence of a historical context of “post-disciplinary rationality” he termed biosociality (1992; 1996; 1999; and also 2008). Different from either the anatomo-disciplinary practices of the body or the modern regulations of governmentality related to populations, which were mainly privileged by Foucault, the focus on the body and population in the context of biosociality would potentially be a novel configuration. For Rabinow, the questions and problems engendered by contemporary science and biomedicine, exemplified by research on the human genome in the late 1990s, held out the potential for greater transformation of identity and social life because of the capacity to transform and intervene on the biological. Thus in contrast to sociobiology where ‘culture is constructed on the basis of a metaphor of nature’ in biosociality ‘nature will be modeled on culture understood as practice,…known and remade through technique (1996: 99). As a heuristic category, biosociality was therefore primarily conceived to highlight the new hybrid relationship between biology and culture. In this sense, as Rabinow subsequently suggested (2008), it might be thought of as an experimental tool for examining the interface between recent developments in the life sciences, social practices and individual and collective subjectivities. Of particular interest for many social scientists has been the focus on the transformations brought about by developments in genomics and identity (Rose and Novas 2005). Subsequent anthropological research in transnational and comparative arenas has illuminated the variable and diverse manifestations of biosocialities (Gibbon and Novas 2008; Gibbon et al. 2010). This work has highlighted both the limits and scope of transformations in identity, drawing attention to the way that continuities co-exist with novelty and posing new questions about the applicability of a notion of biosociality in particular disease fields and within specific national and transnational contexts (see Lock 2008; Weiner 2010; Raman and Tutton 2010 and Bharadwaj 2008).
The articles in this dossier extend and inform these comparative studies. All the articles compiled here show how in Brazil the practices, social forms and subjectivities that emerge in association with seemingly novel “practices of life” are co-produced at the interface with particular socio-cultural dynamics as much as they are informed by political, ethical and historical specificities. Of particular interest in the discussions outlined in this dossier are the way many of the empirical studies presented highlight the ongoing importance of social vulnerability and inequalities in examining how novel developments in the life and medical sciences inform social and cultural practices. While contemporary so called neo-liberal transformations in subjectivity and citizenship (Rose and Novas 2005) are acknowledged as relevant in many of the articles the impossibility of excluding an ongoing biopolitics of health is also brought to the fore. There is reference to a range of other social science and anthropological work that extends the boundaries of biosociality as defined by Rabinow. This includes differently constituted notions of biological citizenship as outlined in the work of Petryna in her work in post-communist Ukraine (2002) as well as Fassin’s discussion of ‘bi-legitimacy’ (2009). For many contributors questions of political legitimacy and health care inequities directly inform the scope and limits of how the biological and social are being co-configured in the context of developments in the life and medical sciences within Brazil.

In addition the papers presented here illuminate how in Brazil specific historical processes of social differentiation associated with gender, sexuality, race/ethnicity and class play a role in constituting various biosocialities. Of particular note are recent anthropological studies examining the fraught and complex relationship between developments in population and medical genetics and issues of race and ethnicity in Brazil (Santos & Maio 2004). These studies show how the transnational configuration of genetic ancestry and molecularized categories of population difference are dynamically informed by Brazilian histories of racial classification and discrimination, national and nationalizing discourses celebrating race mixture, as well as contemporary attention to multiculturalism in the realm of health and education (Kent et al. 2014). The articles in this dossier focus on diverse categories of social difference, most prominently gender and sexuality (see Rohden), yet show equal attention to historical and cultural specificity.
Similarly in examining how biomedicine and biomedical technologies are central to the ‘making up’ of groups and individual as well as collective identities, these articles highlight the on-going relevance of long standing political controversies and disputes related to abortion in Brazil (Macedo and Luna), the politics of mental health (Maluf), the relevance of Brazilian health policy towards indigenous peoples (Teixeira & Dias da Silva) as well as the particular modes through which health activism has unfolded in Brazil (Fonseca, Aureliano, and Camargo da Silva).

While genomics and developments in genetic medicine have provided the impetus for many anthropologists examining the dynamic relationship between subjectivities and novel biomedical knowledge and technologies, a much wider range of health arenas and interventions are encompassed under this shifting socio-cultural terrain, as testified by this collection. The paper for instance by Rohden illustrates how recent non-genetic health technologies, namely pharmaceuticals and diagnostic testing, inform and are dynamically informed by gendered cultures of activism and identity. Nevertheless a number of genetic technologies are examined in this special edition of Vibrant illuminating aspects that reflect particular socio-cultural issues of relevance in Brazil. While the use of DNA to articulate biogenetic relatedness has been widely explored in diverse cultural arenas beyond Brazil (Rabinow 1999; Finkler 2000) in the articles presented we see how this is both reproduced and questioned by Brazilian adoptees (Allebrandt) and also used in the pursuit of legal repatriation of human rights violations in the historical context of the clinical management of Hansen’s Disease also know as Leprosy (Fonseca). In both cases DNA and genetic testing constitute what Fonseca calls a ‘fragile’ truth subject always to social and cultural mediations within and between kin, health practitioners or scientific researchers or activist organizations and legal processes. The paper by Aureliano sheds further light on how medical genetics is unfolding in the context of ‘rare’ disease in Brazil in an arena where rights to health (and medications) are being increasingly politicized and where moral obligations between kin unfold in ways that are described by Aureliano as constituting a ‘familiarization’ of genetics. DNA, genetic information and technologies far from being totalizing or asocial in their impact are therefore shown in the articles presented here as imbricated with moral and affective meanings, as well as being co-configured within institutionalized settings of the clinic or the judiciary.
The dynamic arena of reproductive technologies has, like genetic medicine and technology, been of intense interest to many anthropologists examining technological interventions on the reproduction of life and the processes of naturalization and de-naturalisation that these practices seem to constitute and bring forth (Franklin 2003, Thompson 2005) While novel techniques such as Human Embryonic Stem Cell research, which now depends upon and should be ‘is productive of reproductive interventions such as IVF, would seem to illustrate the extent of being ‘after nature’ (Strathern, 1992) the instability of the biological and its ongoing ability to signify in both deterministic and non-deterministic ways suggest complex configurations of the natural and the social in these contexts. This is reflected in Luna’s study of how questions of human rights have played out in debates about the use of embryonic stem cell research in Brazil. She shows how the fiercely contested question of abortion informs how sociality and personhood of the embryos are brought to bear on ethical and legal decisions relating to the use of and research with stem cells. The novelty of not necessarily being ‘after nature’ but potentially post-human is explored in the article by Segata. Examining animal-human biosocialities in the context of a diagnosis of depression among pet dogs in Southern Brazil, he shows how a biomedical model of human health is made relevant in relation to animals, including the popular use of psychiatric drugs.

Reflecting the need to account for and attend to the biopolitics and biosocialities of health and illness many authors discuss the implications brought about by changing public health policies in Brazil, particularly in a context where the judicialization of health has become a growing and widespread phenomenon (Biehl and Petryna 2011 and 2013). Here the concrete properties and scope of an emerging politics of recognition have come to the fore where the demands of specific rights, especially rights and justice related to health and illness, are playing out in diverse social, public and personal spheres. A critical perspective on issues of citizenship and rights are explored in many of the articles in this special edition, including the works of Fonseca, Maluf, Aureliano, Teixeira/Dias, and Camargo da Silva.

It is important to recognize how political issues are central to understanding a wide field of research in Brazilian Anthropology. As a specific academic tradition, it has a complex relationship with research exploring
questions and processes of nation-building and citizenship precisely because
it is a process that anthropology has been central to facilitating as well as
researching (Peirano 1991, 1998, 2005). Many Brazilian anthropologists have
historically positioned themselves in the public sphere, dealing with many
different issues related to the rights of traditional communities (indians;
quilombolas - black rural communities; peasants, fishing communities) to
the rights of women, LGBT communities, but also social demands of health
movements and activists; all areas where the Brazilian Anthropological
Association has been politically visible and active also. The articles presented
here continue therefore a long tradition showing how anthropologists
mediate morally polemic topics such as abortion (Naara Luna) or participate
in discussions on governmental policy in relation to indigenous peoples and
health (Teixeira & Dias da Silva).

To conclude, our aim in bringing to fruition this dossier is that the
articles published here will contribute to strengthen the dialogue and the
engagement between different anthropologies within and beyond Brazil and
facilitate critical discussion and engagement with the continuities and trans-
formations in health, illness, identity and culture.

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