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Action and the urgency of anthropological voice

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ABSTRACT

In the spirit of the Bronislaw Malinowski Lectures, I trace how the context in which I trained, and the areas in which I worked, drew me into applied anthropology. This has fostered my concern with anthropology's role in addressing vital global and planetary issues. The pandemic exploited and exacerbated social and political schisms across settings and fields of interest. For applied anthropologists, this was no surprise. Applied anthropologists have particular capacity, working with others, to interrogate and develop approaches, policies and programs that can address contemporary and emerging social and economic chronicities, political and environmental violence, and social, political, environmental and health crises. But while these efforts might be concentrated, we share responsibility to draw attention to wider contemporary precarities and risks locally and globally. Because anthropology attends to the ecology of social life within and between societies, including in relation to war, refugees and flight, structural violence, collapsing rural and urban life systems, and climate change, anthropological voices are urgently needed in political and policy arenas.

KEYWORDS

Social inequality; ethics; public anthropology; political engagement

I began writing the Bronislaw Malinowski Lecture in Hogsback, in the Amatole Mountain Range of Eastern Cape Province, South Africa. Here in 1931, Monica Wilson, then Hunter, had headed off on horseback for 14 months of fieldwork in Pondoland (Wilson 1936). This was when anthropologists did such disappearing acts, armed with notebooks and pencils so to keep fieldnotes even in the rain.

I was in Hogsback with colleagues, members of an interdisciplinary team concerned with the social precarities of water, energy and food. We worked in the house – Hunterstoun – that Monica Wilson had built, where she lived and died. Her library freestands across from the main house. It's a treasure trove of books, an archive of the footings of anthropology—Meyer-Fortes, Evans-Pritchard, Lucy Mair, Audrey Richards, and Malinowski. Monica Wilson was one of Malinowski's students; so was her husband Godfrey Wilson. She was inspired by Malinowski and his contemporaries, early ethnographers including women who Louise Lamphere (2018) honored in her own Malinowski Lecture.

I had earlier worked in the faint shadows of Malinowski at the Australian National University (ANU), where many anthropologists who had earned their ethnographer guild signs in Papua New Guinea were employed. Academics from elsewhere, en route to conduct research with Papua New Guinea's diverse peoples, languages and ecologies, routinely called in to give seminars and meet up with their Australian-based colleagues. Malinowski's work was well familiar to them.

I read *Coral Gardens* (Malinowski 1935) later when, stimulated by 1980s' interests in nutritional anthropology and questions of food production, dietary choice, commensality, hunger and the impacts of colonialism, I edited *Shared Wealth and Symbol* (Manderson 1986). Some 25 years later again, working briefly on Guadacanal, Solomon Islands, I was a boat trip away from the Trobriands, now known as the Kiriwina archipelago. Malinowski was regularly in my peripheral vision. For this reason, among others, I am deeply honoured and proud to receive this award.

While I read Malinowski's tomes over time, they were not part of my training. Neither sociology nor anthropology undergraduate departments existed at the ANU when I began tertiary studies – they were established in 1972 and 1974 respectively – and so I trained in what was at the time (without embarassment) known as the Department of Oriental Civilisations, in what became the Faculty of Asian Studies. I took interdisciplinary courses in history, anthropology, language and literature, mainly on

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Southeast Asia and especially the Malayo-Indonesian world, but with a wider somewhat arcane engagement with West, East and South Asia also. These courses, and the interests of those who taught them, focused on lifeways and politics only until the early 20th century, mostly centuries earlier. Many of the Faculty's senior academics had been recruited from the School of Oriental and African Studies (SOAS) in London, and the intellectual climate to which fellow students and I were exposed was shaped by colonial relations, not (only) with respect to those with whom we might conduct research, but also in terms of our own positioning. Capsuling center-periphery relations, their hierarchy of knowledge and assumptions of capability, the standard question to any Australian academic was whether one had trained in the US or UK, at Cambridge or Cornell. Local education was regarded as inferior; so was female gender. I was both. I hardened my marginality by undertaking my doctorate at the same university, on women—a subject matter at the time variously treated with indifference, suspicion or disdain.

My university education, particularly as an undergraduate, occurred during a period of turbulence locally and worldwide, in the aftermath of the French student uprising and the short-lived Prague "spring," when Apartheid was seemingly intractable, immediately prior to the Stone Wall riots, and as second-wave feminism gained momentum. In Australia, we were multiply exercised too by the structural inequalities and everyday violences that shaped Indigenous Australian lives, by the challenges of decolonization of Papua New Guinea, and by the conscription of Australians to fight the American War in Vietnam. It was a time of lively intellectual engagement and radical street action, informed by a flow of popular publications on colonialism, commodity capitalism, population control and environmental degradation (e.g. Carson 1962; Ehrlich 1968; Friedan 1963; Meadows et al. 1972, for the Club of Rome; Packard 1960). For academics and their students, European theoretical and epistemological interventions, such as by Fanon (1952, 1963), Foucault (1972, 1978, 1979), Habermas (1973) and Berger and Luckmann (1966), were already (re)shaping how we thought. And Australian students were increasingly involved in local political change, joining growing movements to defend the rights of Indigenous peoples, gay people, Black people, women, and workers. Feminism, black power movements, Indigenous land rights, and class and student protests all challenged local and global order.

In Appendix II of *Coral Gardens* (1935, 457 ff), Malinowski shares his "confessions of ignorance and failure," what today we might include in a limitations section of an article—traps, gaps, blind alleys, sidesteps, technical ignorance, neglect, impatience, one-sided accounts, bias, and errors from applying inappropriate theory. But he also highlights the importance of theory, for, he argues, "without theory there can be no fruitful research" (465). He highlights "the most unpardonable (error)… the feeling that tomorrow is also a day" (461); this refers to failures of follow-up when interlocutors have "nothing to say" in response to a particular query (452). I wish to extend the idea of "nothing to say" also to trouble the reticence of anthropologists to voice their opinions, and to claim public space for anthropological input in contemporary debates. While silence through occlusion or elision may sometimes be purposeful and protective (Manderson et al. 2015), other silences in action and speaking out are also political – that is, the failure to speak in response to injustice, abuse and gross inequality is a political act, whether of neglect or complicity. Notwithstanding questions of positionality and voice, we have a responsibility to speak to social and global injustices and wrongs that affect those with whom we work and that affect human populations and societies worldwide.

The colonial encounter

In *Anthropology & the Colonial Encounter*, Talal Asad criticized UK anthropologists and others who worked with colonial governments and postcolonial entities, generating information that maximized exploitation (1973, 16). He was critical of anthropologists also for their failure to *take a stand*. Asad saw anthropology as embedded in a network of "profound contradictions and ambiguities" with "the potentialities for transcending itself" by taking to task power relations of center and periphery (18–19). In this same volume, Wendy James (1973) reflects on anthropology as a profession and our lack of purchase, noting that while doctors and engineers under colonialism were paid to advise, anthropologists were rarely consulted, and they straddled the contradictions and tensions that emerged in their work. Little has changed in these respects.

Malinowski had already identified the tensions experiemced by anthropologists working in colonial settings in his articles "Practical Anthropology" (1929) and "The Rationalization of Anthropology and Administration" (1930). The practical anthropology he

imagined challenged colonial, missionary and mercenary constructions of local social organization and governance. He saw anthropology as vital and relevant, and necessarily political and radical, to address societal problems. This is a powerful directive to anthropology today.

Colonial chronicity

My doctoral and subsequent research was largely undertaken in Peninsular Malaysia, and elsewhere in Southeast and East Asia, until the 2000s. I draw on this to reflect on the historical basis of global and local inequalities. Contemporary Malaysia is constructed from the colonies of British Malaya – the Straits Settlements (trading ports) and Sultanates on the island of Borneo and the peninsula below Thailand; only Singapore broke lose at independence. Britain established jurisdiction from local Sultans and Dutch colonists from 1819 onwards; by 1870, the peninsula had become a center of extractive and plantation economies and strategic interests. In this context, infection control was critical. Infectious disease entered the ports of the Straits Settlements, and from there spread to the colonial military and administrators, then to indentured laborers, migrants, farmers and fisherman.

Ill health and high death rates drain profit, and given this, supplementing quarantine, from the late 19th century, soon after public health interventions were rolled out in Britain, they were implemented in British Malaya and other British colonies in Asia and Africa. Accordingly, microbiological and parasitological research led to improved treatment and other methods of prevention and control. Water, sanitation and food safety regulations reduced the transmission of water-related diseases including cholera and typhoid; building regulations reduced tuberculosis transmission; environmental measures aimed to reduce insect breeding sites (Manderson 1996; for East Africa, see Vaughan 1991). Aseptic conditions increased survival from surgery; antenatal and postnatal care, hospital-based deliveries, and infant health check-ups reduced maternal and infant mortality, so increasing the likelihood of infants reaching maturity and joining the labor force.

Interventions to prevent disease transmission and reduce the incidence and severity of infection, and to ensure survival to adulthood, were shaped by a colonial economic logic. The discrepant distribution of clinical services in urban and rural areas, for example, reflected a primary motivation to provide care to colonial administrators and the military, and the entrepreneurs and merchants with whom they interacted most. From the latter part of the 19th century in Malaya, for example, women's registration as prostitutes, regular compulsory physical inspections, and their confinement if infected in Lock Hospitals, were intended to protect colonial troops and others. Women always, through twisted logic, were framed as vectors (Manderson 1996). Local peasant farmers on the margins of the colonial economy received limited health care, and were largely left to their own resources to seek treatment from traditional healers. Whether and how people lived and died, and the provision, accessibility and nature of medical and health interventions, were calibrated according to the relevance of particular people to the colony and their distance from its economic centers. This prioritization of care, goods and services holds true to the present. As Achille Mbembe (2019) illustrates, those living on the periphery of colonial, neocolonial and other contemporary states are regarded as of little count, and their disproportionate death rates are signs of neglect as much as heightened risk of disease and death.

Conditions of neglect

Although from the 1970s much of my research was applied, this expanded when, in 1988, I was appointed professor to a new Tropical Health Program (University of Queensland, Australia). My everyday tasks included, in addition to research, co-convening and teaching into a master's degree program focusing on health systems, services, and fiscal challenges in low and middle income settings. By the end of that year, through this position, I was also collaborating with TDR (Special Programme in Research and Training in Tropical Disease, UNICEF/UNDP/World Bank/WHO), and subsequently, with the Global Programme for AIDS (later UNAIDS), with WHO departments concerned with diarrhoeal disease and acute respiratory infection (iwith Gretel Pelto, 2008), and with other multilateral, regional and national organizations. In these varying contexts, I was charged with enhancing knowledge of the social factors impacting disease risk, distribution, transmission and impact. Often grouped as social, economic and behavioral issues, these were later captured under a social determinants umbrella. To be effective, my peers and I needed a level of literacy to ensure our credibility: depending on infection, transmission, pathogenesis and clinical course, we needed to understand dimensions of the disease which included some appreciation

of parasitology, ecology, virology, microbiology, immunology, vaccinology, epidemiology, biostatistics, engineering and technical innovation. My colleagues from the life sciences were less convinced of their need to gain literacy of anthropology or cognate disciplines. Likewise, across areas of interest, applied anthropologists necessarily acquire impressive, often vast, literacy of other fields and methods without convincing their collaborators of the value of reciprocal literacy.

The transmission of many potentially lethal infections and the course of both communicable and non-communicable diseases have been interrupted or effectively managed with targeted vaccines and a sophisticated array of drugs, the majority both available and affordable particularly in high income, high technology countries (Dumit 2012). Field trials of drugs, on the other hand, take place under diverse conditions, in countries where therapies remain elusive for common infections. It is these infections that continue to contribute to population mortality rates and erode people's health, household economies and everyday lives.

In my work on neglected diseases of poverty, I have supported research and training initiatives. This work has highlighted for me what anthropology brings to policy arenas and has sharpened my appreciation of the logic of neglect and, borrowing from Achille Mbembe (2019), the necropolitics at play. "Neglected diseases of poverty," as a term, points to the neglect of these conditions by universities and pharmaceutical company research and development. They are neglected as of little interest etiologically and in drug development programs because they are prevalent among poor populations in poor countries, and so are unlikely to yield profit. Within countries, they are neglected because they are diseases of marginalized and poor peoples, often living in inaccessible areas and in an ambiguous relationship to the state. Neglected diseases – including sexually transmitted infections, intestinal helminths and arboviruses – index personal and state poverty and social exclusion.

Everywhere, then and now, people struggle to make lives in states of extreme poverty, precarious employment, and inequality, condictions that are artefacts of colonialism and postcolonialism, poor governance, corruption, structural violence (Farmer 2004) and structural vulnerability (Quesada, Hart, and Bourgois 2011). The margins between life and death are thin, and the challenges of health systems and local economies to address these are obvious in much of the world. In 1993, I was in western China for a review of UNICEF-supported programs. Endemic goitre and congenital hypothyroidism could be prevented with an iodine supplement, but most villagers could not afford the greater cost of iodized salt compared with local rock salt—2–3 yuan (around 20 cents) per kilogram. In the Philippines, Rifampicin, still a first line treatment for tuberculosis in most countries despite growing resistance, leaked out of community health centers and, past its use-by date, was sold over-the-counter in *sari-sari* stores as an everyday antibiotic. Indoor insecticide spraying continued at the insistence of malaria control program staff, despite its limited efficacy and people's strong resistance to it, to maintain the jobs of the sprayers. Out-of-date vaccinations for H1N1 were forcibly administered in Malawi in 2008–9, the vaccinators motivated by remuneration not public health efficacy (Sambala and Manderson 2017). And while then and still, people willingly adopt public health interventions that make sense, there was and is always sharp resistance to those that do not. Further, agencies often employed anthropologists, as a minority to epidemiologists, doctors, economists and others, to replicate social and behavioral research for which the answers were already known, albeit for a different pathogen and commissioned by a different, but proximate, agency.

Working with TDR, and still with DNDi (Drugs for Neglected Diseases initiative), I continue to see how disease transmission and poor health track social structure and structural violence, exploit the damaging economic gaps within and between nations, and aggravate unequal life circumstances, health risks and outcomes. But my scope is wide. Anthropology's elasticity methodologically, theoretically and across subjects of enquiry allows us to move to contemporary questions of urgency: of planetary and population health, economic and social wellbeing, unequal governance and power.

And then, Covid

South Africa, where I have worked for 20 years, as my second home since 2014, gave me space to contribute and sharpen my ideas of the role of anthropologists and anthropological thought. As measured by Gini coefficient, South Africa has the greatest population inequality in the world; one of the highest rates of intimate partner violence; the largest number of people living with HIV worldwide and one of the largest populations infected proportionally. Millions of people live in abject poverty in informal settlements, without employment, with inadequate health, education and social services, with local governments crumbling from

incompetence and corruption. Countrywide, South Africa has up to 10 hours of load shedding (power cuts) per day, endemic water shortages from a lethal mix of drought and infrastructural collapse, growing problems in food insecurity and skewed food markets, and rising costs of living. It is a country in deep trouble, yet vital and exciting. Here, I see my work partly to train people best able to work with communities and to advocate at national and global levels to help steer policies and programs. My focus remains on poverty and its intersections, and with the "poorest people at the end of the road," which is how TDR often characterizes its concern. Being in South Africa has allowed me to draw on a "long skein of interdisciplinary interests" (Bateson 1972, 2) and anthropological theory to make sense of past and present, and to anticipate how the future might unfold.

COVID-19 was a unique test of anthropology's analytic and anticipatory tools. I was in South Africa when the pandemic was declared, as infections spread and government controls unfolded. WHO declared SARS-CoV-2 a pandemic on 11 March 2020; that weekend, Susan Levine and I wrote a commentary for *Medical Anthropology* foreshadowing the pandemic's discriminatory impact (Manderson and Levine 2020).

On Monday 16 March, I was on prime time television discussing the initial primary interventions – social isolation and personal hygiene – and the impossibility of adhering to these for poor people. How do six to ten people living in a one room shack maintain social distance? How do they wash their hands when 500 people share one tap, and where none can afford soap? How do they maintain hygiene when 20 or more households may need to share a chemical porta-loo, and where women and children are at high risk of rape and violence if they seek to use the facilities alone and in the dark? And how do they manage to survive when they lose employment, or lose the opportunity to generate an income informally, such as through waste collection, or the sale of small quantities of food, or via the illegal sale of sex and drugs? And how do people survive if, because of lack of identity papers, they are not entitled to state support, once such support was introduced and despite its very small amount?

On Thursday 19 March, I had an early morning 90 minute Q&A organized by the South African Institute of Plumbers. Imagine 100s of plumbers' workshops, garages and sheds around the country, each with a core of tradies huddled around the office computer seeking reassurance that, with hand-washing, they were unlikely to be infected with COVID-19 by touching toilet seats or taps. These people, not only clinicians, were first line health workers in a pandemic when the primary prevention was hygiene.

In our first article on COVID-19, Susan Levine and I foreshadowed that the infection would exploit and amplify existing social fissures, create new schisms, expand inequalities. The pandemic provided us with a perfect opportunity to exploit anthropological theory, and many of us (me included) wrote from the sidelines, feeding in our ideas and offering advice, commenting but not interferring with the urgent work of infection management and medical care. Susan Levine, my major collaborator, was more involved, as a volunteer in the Phase 3 clinial trial of the J&J Covid vaccine (Levine & Manderson 2023; Manderson & Levine 2023). She was, I should note, one of the few people for whom the goods and services that compensated participation was less important than having a front seat to watch science at work.

We were not writing uniquely of South Africa. Worldwide, people live under bridges, in public parks, storm-water drains and railway tunnels, on the steps of churches, and near police and fire stations. They live in home-built shacks of cardboard boxes, plastic sheets, scrap metals, wooden planks, grocery carts, rubbish bags and discarded tyres. They live in empty hotels and "hijacked" condemned office buildings, in grossly overcrowded and delapitated spaces, in decayed city centers and on city edges. Cairo, Rome, Paris, Nairobi, New York, Mumbai, Manila, Mexico City and Melbourne are all cities in which numbers of people lack shelter, food and access to care, whose lives are so carelessly regarded.

Across the continent of Africa, Pandemic Preparedness Plans had been discussed, drafted and supported in 2009 in response to the H1N1 pandemic of 2009–2010. While these plans were not necessarily revised, the swift implementation of control measures for COVID-19 reflected that many countries were well familiar with major pandemics and epidemics (this century, prior to COVID-19, including H1N1, SARS, HIV, TB, MERSA and Ebola). National measures aimed to save lives and livelihoods by streamlining health systems responses, and through grants, supporting people to weather unemployment as seasonal labor contracted with strict lockdown. But this was short-term, and partial.

Human rights are always shaky. In many cases, COVID-19 prevention measures provided a cloak of legitimacy to discrimination and violence, across Africa and elsewhere (as elaborated in Manderson, Burke, and Wahlberg 2021). Military personnel,

empowered to enforce social isolation, in countries such as South Africa, Uganda, China, Sri Lanka, South Korea, France, Argentina and Brazil (Manderson and Levine 2022; Parker et al. 2022; Acacio, Passos, and Pion-Berlin 2023), took advantage of this to pursue other agendas against marginalized and vulnerable groups. Priyanka Jayakodi (2024) describes this in relation to the disproportionate deployment of troops in north and east Sri Lanka, where the civil war waged between the Sinhalese-dominated Sri Lankan government and the Liberation Tigers of Tamil Eelam (LTTE) from 1983–2009. But everywhere, the rhythms of everyday life were constrained as the military took control of public health measures, with gratuitous violence reinforcing structural violence to contain, control and silence particular communities.

In South Africa, police, private security personnel and defence forces strong-armed, arrested and removed people in their efforts to enforce COVID-19 regulations. The Cape Flats is a network of townships and informal settlements originally established under the Apartheid government, where people classified black or coloured were resettled or chose to live. Home to around 1.5 million people, the area, or sections of it, are reputedly among the most violent places in the country. Here lockdown was enforced by defence forces in combat uniform. Armed men actively tore down illegal structures, and shot and killed people unable to adhere to curfew regulations or to find legal shelter. Stories of shootings were common: a young mother shot in the breast while sitting on her front step, nursing; an elderly man shot with a taser. On 1 July 2020, Bulelani Qolani was dragged naked from his shack, which the police ripped apart before his eyes (Stent 2020); we watched this on national television. Similar events unfolded in Alexandra, Johannesburg, an easy walk to wealthy Sandton and home to a population of estimates varying from c 200,000 to 800,000. On 10 April 2020 – two weeks after the beginning of lockdown – Khosa Collins was allegedly approached in his houseyard, strangled, slammed against a cement wall and a steel gate, and hit with the butt of the machine gun (Manderson and Levine 2022). Soldiers were exonerated of his death.

Government support to mitigate hardship in South Africa and elsewhere was (and is) largely determined by the law, and people without identity papers, whether or not born to parents who were nationals, had little or no access to services, resources and support. Others had migrated to countries without permission and so lacked papers, and were ignored or simply herded into quarantine holds for the short-term. Others – people with disabilities, for instance – received financial support (assuming their prior entitlement), but with no thought to how the pandemic might impact their lives, interrupting home-visits from informal care providers, for instance. Others – drug users and dealers, sex workers, released prisoners, people with mental health conditions, sexual minorities—lacked entitlement to cash and care, or were so badly treated to discourage their claims and access. These were populations that colleagues and I, working for the Academy of Science of Africa, identified as vulnerable, continent-wide, for structural, legal and economic reasons (Manderson et al. 2022).

In our work of scoping and foresighting, we identified various community interventions, which point not so much to "resilience" as to people's creativity in face of catastrophe. Two examples come to mind. One, established in 2020, was a "community recycling and surplus-based swop shop" providing food to inner city residents in Johannesburg who lacked legal identity papers and so lacked entitlement and access to the support available to citizens. The People's Pantry (TPP) continues to distribute packages of food that would otherwise be treated as waste, and to work with community women to encourage food preservation. The second example is a methadone maintenance program in Durban, established for opiate-using homeless youth through the collaboration of municipal government, university, and civil society actors. At the beginning of lockdown, they provided methadone maintenance for some 260 people, and shelter, health care and food for an estimated 500 people. As lockdown eased, the municipality allocated an unused government building so the program could continue (Stowe et al. 2020). Neither project involved anthropologists, although some actors had social science training, but that is not my point. Rather, the elasticity in both non-profit and government entities, notwithstanding the lean towards bureaucratization in the name of accountability, enabled innovations.

To other urgencies

And so we — many anthropologists, worldwide — gleaned and analyzed information at local and national levels and beyond in relation to the pandemic, and exploited anthropological theory to anticipate and explain its fallout. At the same time, we were deeply troubled by other eruptions and looming crises. Anthropology offered me – offers us all – the

conceptual tools to explain schisms within and between communities and nations. It was increasingly apparent to us all that class, race, ethnicity, sexuality, gender and ability carve social and economic divisions, magnifying other structural divisions more readily linked to culture (religion, for instance).

The core interest of early applied anthropology was to understand cultural difference. "Culture" was largely an idiom for the other (as it still is), and anthropologists were called on to find ways to "educate" populations, or to (simply and simplistically) find the right lexicon, as was already being done within colonial offices (Manderson 1996). Anthropological engagement often followed rather than drove community consultation, and anthropological influence was often of limited significance in this context.

A subsequent core interest of applied anthropology, as I see it, occurred as we stepped away from "culture" as an explanatory model for difference, and with other social scientists, we focused on the social, political and economic structures that explained schisms within and between communities and nations. As noted above, multiple social movements questioned the local order(and global) distribution of power. Anthropologists were not in the lead in these 20th century movements, although we were involved. Certainly we made a mark in the literature.

But what we failed to anticipate – how could we have? – was the perdurability of these structures and the tenuousness of changes aimed at loosening, even breaking structures of oppression. The exposure of racism during the pandemic's urgent early months, including the murders of George Floyd and Khosa Collins, reminded us that COVID-19 was not (in political rhetoric) the only battle to win, and that racism continues to shape policy, policing, government, and the everyday. The rescinding of reproductive freedom in the US as much as countries like Iran, and the continued repeal of freedom of sexuality and gender, are further reminders that culture changes slowly. Meanwhile, while the pandemic forced a narrow focus on global relations, still civil wars and other forms of violence continued across the Middle East, Africa and Latin America; people everywhere continued to be forced from or fled their homelands, and sought and were consistently denied refuge. The wars of Russia/Ukraine and Israel/Gaza, the rhetoric of hate against immigrants in the US, and assaults on lives and human rights, are only further instances in this frightening descent.

Many of these assaults to human dignity, lives and livelihoods will only worsen with continuing planetary crisis. The third phase in anthropology—our concern with planetary connections—has forced us to step change. Although some anthropologists have contributed significantly to our understanding of global insecurity and climate change (e.g. Oliver-Smith and Hoffman 1999; Boyer 2019; Howe 2019), as a professional community we have relatively lately joined the call to address how human activity impacts on other life forms, and what to do about this. But if anthropology has taught us anything, it has been to attend to the long standing and far reaching structures that unsettle our world in ways that sustain inequality. A world that is warming and melting, shaped by seas swelling and crops failing, is a world that provokes anger and despair. Our disciplinary capacity to see interconnections (of the material, virtual/communicative, of different life forms) provides us with insight to contribute to the work of preventing, minimizing or redressing damage, and to protect this world. We have the social and intellectual capital, and over a century of research and thought, of how social life unfolds at local levels, within societies, with other humans, and with other life forms and landscapes. Being late to the table – of politics and global action – is not a reason to stay away. Anthropology's task and responsibility now is to work in hand with other players to avert the worst possible scenarios.

Anthropologists work especially effectively at community level; certainly this is our public face. But others of us temperamentally, maybe especially in our later careers, are most interested in anthropology's capacity to scan and harvest information at national levels and beyond; our professional eclecticism and broad interests allow us to bring together the multiple threads of context, institutions, value systems and webs of power—planetary assemblages. This is urgent in the present.

Anthropologists as activists

I became an anthropologist through the backdoor. Some of my training was anthropological; I taught anthropology; my colleagues claimed me to be one. And anthropology provided me with the skills and theories and gave me permission to follow what interested me, in ways that made sense. Anthropology gave me the theoretical armory to question and describe that which captured my imagination, which I felt to be important. The characteristic openness of the discipline brought many contemporary anthropologists into anthropology and its fields of application.

Anthropologists have unique skills to work with others to address these and newer global problems. In this professional society, we still distinguish in discourse between anthropologists in government, industry, and the private and not-for-profit sectors as "practicing",

and faculty as theoretically inclined. These are artificial distinctions. Reconfiguring our work and reshaping SfAA, including to dispense with these barriers, is critical to sustaining our discipline, to produce job-ready graduates, to strengthen our authority and capacity to speak and be heard, and so to play a powerful role with others to address escalating and converging global crises.

I have argued that anthropologists have no option but to act for ethical and intellectual reasons: finding ways through the muddiness of global circumstances demands a global approach that involves us all. I have quoted Malinowski on procrastination, silence and neglect (461). He was referring to enquiry, but this extends to failures to speak out. Our very (planetary) existence depends on our shared efforts, and our willingness to research, publish, advise and speak out at many different levels. This requires a shift in attention for some, although less so for applied anthropologists, and changes in how we communicate our work. In *Argonauts* (1922, 517), Malinowski referred to "the desire to turn (anthropological) knowledge into wisdom." We have the urgent responsibility to realize and communicate this, and to work across disciplines, fields and institutions to ensure changes both locally and globally.

We need to ensure that as many voices are heard as possible, including those of our colleagues in countries which, at times, are disparagingly bundled together as the 'global south'. We continue to venerate knowledge produced in the global north, minimize the value of others (as 'local'), and partake in a meritocracy that privileges such knowledge and power. We cite far too few anthropologists and others—from any walk of life—from low and middle income countries, and we fail to draw on their insights to further knowledge making, translation to practice, and change. The politics of research, its funding, flow of data, appropriation of knowledge, and acknowledgement, varies across disciplines, but clearly we can do better. The limits to our communication practices inhibit this. "Necropolitics" (Mbembe 2019) does not only include the inequalities that reflect ideas of who deserves to live and who might die, but also the tacit neglect of those marginalized.

In Iliya Trojanow's book *The Lamentations of Zeno* (2016), the protagonist – a glaciologist called Zeno – calls for urgent action on climate change by "experts" – when even they are surprised by the "terrible speed of the demise" (of climate change) but when their interventions might still work, as "everyone else harkens to the rotten call of comfort and convenience." While climate scientists and others worry now that it is very late, we – anthropologists, within and outside of the academy – have to ensure that our work makes a difference, and that we share the responsibility to divert from a trajectory of disaster. Zeno continues: "Hell is not a place. It's the sum of all our lapses and failures." We create hell if we have "nothing to say" – that is, if we fail to speak out, fail to elbow our way into decision-making fora, and fail to ensure that we are heard on issues that affect us all. This work, the politics of survival, is critical.

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References

Acacio, I., A. M. Passos, and D. Pion-Berlin. 2023. "Military Responses to the COVID-19 Pandemic Crisis in Latin America: Military Presence, Autonomy, and Human Rights Violations." *Armed Forces & Society* 49 (2): 372–394. https://doi.org/10.1177/0095327X211070035.

Asad, Talal. ed. 1973. *Anthropology and the Colonial Encounter*. Reading, UK: Ithaca Press.

Bateson, Mary Catherine. 1972. *Our Own Metaphor. A personal account of a conference on the effects of conscious purpose of human adaptation*. New York: Knopf.

Berger, Peter L., and Thomas Luckmann. 1966. *The Social Construction of Reality: A treatise in the sociology of knowledge*. New York: Anchor Books.
Boyer, Dominic. 2019. *Energopolitics: Wind and Power in the Anthropocene*. Durham, NC and London: Duke University Press.
Carson, Rachel. 1962. *Silent Spring*. New York: Houghton Mifflin Company.
Dumit, Joseph. 2012. *How Pharmaceutical Companies Define Our Health*. Durham, NC: Duke University Press.
Ehrlich, Paul R. 1968. *The Population Bomb*. New York: Ballantine Books.
Fanon, Frantz. 1952 1986. *Black Skin, White Masks* (trans. Charles Lam Markmann). London: Pluto Press.
Fanon, Frantz. 1963. *The Wretched of the Earth* (trans. Constance Farrington). New York: Grove Weidenfeld.
Friedan, Betty. 1963. *The Feminine Mystique*. New York: W.W. Norton.
Foucault, Michel. 1972. *The Archaeology of Knowledge & the Discourse on Language* (trans. A. M. Sheridan Smith). New York: Pantheon Books.
Foucault, Michel. 1978. *The History of Sexuality*. Vol. 1: Introduction (trans. Robert Hurley). New York: Pantheon Books.
Foucault, Michel. 1979. *Discipline and Publish: The Birth of the Prison* (trans. Alan Sheridan). New York: Vintage Books.
Gough, Kathleen. 1968. "New Proposals for Anthropologists." *Current Anthropology* 9 (5, Part 1): 403–435. https://doi.org/10.1086/200925.
Habermas, Jürgen. 1975 1973. *Legitimation Crisis (trans.Thomas McCarthy)*. Boston, MA: Beacon Press.
Howe, Cymene. 2019. *Ecologics: Wind and Power in the Anthropocene*. Durham, NC and London: Duke University Press.
James, Wendy. 1973. "The Anthropologist as Reluctant Imperialist." In *Anthropology and the Colonial Encounter*, edited by Talad Asad, 41–69. Reading, UK: Ithaca Press.
Jayakodi, Priyanka. 2024. *The Chronicity of Militarism: Exploring Sri Lanka's Response to the COVID-19 Pandemic*. Unpublished manuscript, Department of Anthropology, Michigan State University.
Lamphere, Louise. 2018. "The Transformation of Ethnography: From Malinowki's Tent to the Practice of Collaborative/ Activist Anthropology." *Human Organization* 77 (1): 64–76. https://doi.org/10.17730/1938-3525.77.1.64.
Levine, Susan, and Lenore Manderson. 2023. "Unblinding: Politics, Care, and the J&J Vaccine Trial in South Africa." In *Racial Logics and the Politics of the Biomedical Science*, edited by J. Jansen, and J. Auerbach, 201–214. Dordrecht and New York: Springer.
Malinowski, Bronislaw. 1922. *Argonauts of the Western Pacific: An Account of Native Enterprise and Adventure in the Archipelagoes of Melanesian New Guinea*. London: Routledge and Kegan Paul.
Malinowski, Bronislaw. 1929. "Practical Anthropology." *Africa* 2 (1): 22–38. https://doi.org/10.2307/1155162.
Malinowski, Bronislaw. 1930. "The Rationalization of Anthropology and Administration." *Africa* 3 (4): 405–430. https://doi.org/10.2307/1155193.
Malinowski, Bronislaw. 1935. *Coral Gardens and their Magic*. London: Allen & Unwin.
Manderson, Lenore. 1996. *Sickness and the State. Health and Illness in Colonial Malaya, 1870-1940*. Cambridge, UK and Melbourne, Australia: Cambridge University Press.
Manderson, Lenore. ed. 1986. *Shared Wealth and Symbol: Food, Culture and Society in Oceania and Southeast Asia*. New York: Cambridge University Press.
Manderson, Lenore, Nancy J. Burke and Ayo Wahlberg, eds. 2021. *Viral Loads: Anthropologies of Urgency in the Time of COVID-19*. London: University College London Press.
Manderson, Lenore, Diego Chavarro, Blessings N. Kaunda-Khangamwa, Alexander Kagaha, and Henry Zakumumpa. 2022. "Containing COVID-19: Anticipating the Social Costs on Human Rights in African Countries." *Humanities & Social Sciences Communications* 9 (1): 347. https://doi.org/10.1057/s41599-022-01357-4.
Manderson, Lenore, Mark Davis, Chip Colwell, and Tanja Ahlin. 2015. "On Secrecy, Disclosure, the Public and the Private in Anthropology." *Current Anthropology* 56 (S12): S183–S190. https://doi.org/10.1086/683302.
Manderson, Lenore, and Susan Levine. 2020. "COVID-19, Risk, Fear, and Fall-out." *Medical Anthropology* 39 (5): 367–370. https://doi.org/10.1080/01459740.2020.1746301.
Manderson, Lenore, and Susan Levine. 2022. "Climate Change and a Plea for Social Justice in South Africa." *Wits Journal of Clinical Medicine* 4 (3): 191–194. https://doi.org/10.18772/26180197.2022.v4n3a11.
Manderson, Lenore, and Susan Levine. 2023. "COVID-19 Research and Science Infrastructure in South Africa." *SAJS, South African Journal of Science* 119: 7–8. https://doi.org/10.17159/sajs.2023/16294.
Mbembe, Achille. 2019. *Necropolitics* (trans. S. Corcoran). Durham, NC: Duke University Press.
Meadows, Donella H., Dennis L. Meadows, Jørgen Randers, and William Behrens. III.1972. *The Limits to Growth; A Report for the Club of Rome's Project on the Predicament of Mankind*. New York: Universe Books.
Oliver-Smith, Anthony and Susanna Hoffman. eds. 1999. *The Angry Earth: Disaster in Anthropological Perspective*. New Tork: Routledge.
Packard, Vance. 1960. *The Waste Makers*. New York: David McKay.
Parker, Melissa, Moses Baluku, Bono E. Ozunga, Bob Okello, Peter Kermundu, Grace Akello, Hayley MacGregor, Melissa Leach, and Tim Allen. 2022. "Epidemics and the Military: Responding to COVID-19 in Uganda." *Social Science & Medicine (1982)*314: 115482. https://doi.org/10.1016/j.socscimed.2022.115482.
Pelto, Gretel. 2008. "Taking Care of Children: Applying Anthropology in Maternal and Child Nutrition and Health." *Human Organization* 67 (3): 237–243. https://doi.org/10.17730/humo.67.3.a061k11413627467.
Quesada, James, Laurie K. Hart, and Philippe Bourgois, 2011. "Structural Vulnerability and Health: Latino Migrant Laborers in the United States." *Medical Anthropology* 30 (4): 339–362. https://doi.org/10.1080/014 5 9740.2011.576725.
Sambala, Evanson Z., and Lenore Manderson. 2017. "Anticipation and Response: pandemic Influenza in Malawi, 2009." *Global Health Action* 10 (1): 1341225. https://doi.org/10.1080/16549716.2017.1341225.

Stent, James. 2020. "'I was in my room washing. Then they threw me outside'. Bulelani Qolani describes how he was dragged naked from his shack." *GroundUp*, July 2. https://groundup.org.za/article/i-was-in-my-room-washing-then-they-threw-me-outside-bulelani-qolani-describes-how-he-was-dragged-naked-from-his-shack/

Stowe, M. J., A. Scheibe, S. Shelly, and M. Marks. 2020. "COVID-19 Restrictions and Increased Risk of Overdose for Street-Based People with Opioid Dependence in South Africa." *South African Medical Journal = Suid-Afrikaanse Tydskrif Vir Geneeskunde* 110 (6): 12939. https://doi.org/10.7196/SAMJ.2020.v110i6.14832.

Trojanow, Iliya. 2016. *The Lamentations of Zeno* (translated by Phillip Boehm). London: Verso Books.

Vaughan, Megan. 1991. *Curing Their Ills: Colonial Power and African Illness*. Palo Alto, CA: Stanford University Press.

Wilson, Monica. 1936. *Reaction to Conquest: Effects of Contact with Europeans on the Pondo of South Africa*. Oxford, UK: International Institute of African Languages and Cultures, Oxford University Press.