



The Patient of the New Millennium

An interdisciplinary international conference on medicine, anthropology, and diversity

2-3 July 2018, CEU Conference Center – Budapest

PROGRAMME

2 JULY 2018				
10:00 – 10:15	Welcome speech on behalf of the organisers		Diana Szántó, Artemisszio Foundation, President, Vingender István - Vice Dean, Semmelweis University, Faculty of Health Science	
		I. Block		
		Healthy Diversity - an overview		
10:15 – 10:30	What is Healthy Diversity? And why do we love it?	Presentation of the Healthy Diversity Project	Junaid Hussain, Equality & Inclusion Partnership (EQuIP); Veronika Várhegyi, Elan Interculturel	
10:30 – 10:45	Encountering Healthy Diversity online	How to navigate on the Healthy Diversity webpage?	Alessandra Cannizzo, CESIE	
10:45 – 11:00	What makes a good practice a good practice?	Presentation of Healthy Diversity catalogue of good practices	Margit Helle Thomsen, MhtConsult	
11:00 – 11:20		Break		





	II. Block Medicalisation - Demedicalisation			
11:20 – 11:50	Cultural and structural competence in public health – and what has equity to do with it? Keynote	In this paper I will discuss how diversity and culture are conceptualised in the practice of medicine. My main argument is that the controversial discourse on and demands for more "cultural competence" 1. essentially shows the communication challenges patients and doctors of all "cultures" are facing in medical encounters, and 2. all too often conceals deeply engrained structural and governance challenges in health systems. While as medical anthropologists we are expected to deal with the "cultural" and "behavioural" side of public health encounters, in practice we are often confronted with challenges of poverty, poor governance and inequity.	Ruth Kutalek, Medical University of Vienna, Unit Medical Anthropology and Global Health, Department of Social and Preventive Medicine	
11:50 – 12:20	The culture of medicalisation Keynote	In recent decades, medicalisation has become one of the most important "metabolic processes" between medicine and its socio-cultural environment. It is increasingly apparent that institutions of the contemporary Western culture find it difficult to cope with the so-called "life problems" causing "the feeling of discomfort" at an increasing level. These processes together have increased the importance of medicine and the medical model in treating the "discomforts" of life. Therefore, the negative aspects of life - such as those previously "supervised" by other social institutions - are transferred to the domain of medicine. This trend increases the power of medicine, but is also a source of serious frustrations.	Attila Bánfalvi, Institute of Behavioural Sciences, Debrecen University	
12:20 – 13:30		Lunch break		
13:30 – 13:45	Good practice from the UK: Shaping End of Life Care Services for Diverse Communities	Having conversations about the end of life is very difficult for many communities and families, and often is the case that relatives are guessing how best to meet the wishes of their loved one. Tallied with a lack of understanding of what exactly local palliative care and other support services do, along with diverse cultural and religious requirements, the end of life, before, during and after can be furthermore, an extremely difficult time. An initiative in Warwickshire, UK, sought to bring different sectors together as a means of creating a network of support, information and awareness. The end of life does not need to be a lonely journey!	Junaid Hussain, Equality & Inclusion Partnership (EQuIP) and Maggie O'Rourke, South Warwickshire NHS Foundation Trust	





13:45 – 15:00	The power and the vulnerability of medicine. Roundtable	The topic of the round table discussion was based on Attila Bánfalvi's book titled 'The Power and Vulnerability of Medicine. Nowadays when we talk about medicine, we mostly mean biomedicine, not the whole of the healing systems. This form of healthcare is fundamentally utilitarian, considering the damage/benefit ratio in the course of classification. During the conversation, we discuss the situation of the most critical areas, such as end-of-life care, addictions, especially drug use, and the treatment of people with disabilities. The moral dilemma of personal responsibility and social interest arises in all three areas of concern.	Facilitator: Ágnes Zana, Semmelweis University, Insitute of Behavioral Sciences, Hungarian Hospice-Palliatív Association		
	Participants in the roundtable: Attila Bánfalvi, Institute of Behavioural Sciences, Debrecen University Gurbai Sándor, ELTE, Bárczi Gusztáv Faculty of Special Needs Education, Vice-Dean Zsolt Demetrovics, Director at Institute of Psychology, Eötvös Loránd University Dr. Katalin Várdi, pulmonologist, Chief Medical Officer, Institute of Pulmonology, Törökbálint				
15:00 – 15:15		break			
III. Block Unhealthy societies: health and inequality					
15:15 – 15:30	Inequality is bad for people's health Keynote	Europe has been going through two major steps in its development since 2008: the social and economic crisis that hit mainly Greece, Spain, Portugal and Ireland, as well as a higher number of migrants looking for asylum coming from countries in war and conflicts or where basic human rights aren't ensured. So we are facing impoverished national citizens as well as migrants living in precarious conditions. The social nets are, as a consequence, more important than ever. Analysing the social determinants of health gives us a realistic picture of the respect of human rights and the consequences on people's health, well-being and resilience capacities.	Nathalie Simonnot, General Delegate in charge of Partnerships – Médecins du monde (MdM) – Doctors of the World		





15:30 – 15:45	Good Practice from Italy: Ethno- psychological counseling for migrants in Palermo (Sicily)	The ethnopsychological counseling is a service provided by the clinic of Migration Medicine at the General Hospital "Paolo Giaccone" in Palermo. It combines the disciplinary approaches of anthropology and psychology for a greater understanding and a better support of patients with a migrant background. Within this service a psychologist and an anthropologist work together creating a new professional profile, with the aim of taking into consideration not only different cultural backgrounds but also the different migration experiences of the patients (e.g. forced migration, long-term migration etc.).	Alessandra Cannizzo, CESIE
15:45 – 17:00	Social inequalities in health and healthcare Roundtable	The aim of the discussion is to show that interculturality is not simply about the understanding of others, as differences are incorporated into structures and create real inequalities that affect the health status of some groups, but also affect the health of society as a whole. Throughout the conversation, we will address the health state and the access to adequate health care of the Hungarian society as a whole as well as regarding three particularly disadvantaged groups - Roma communities, people living in poverty and immigrants/refugees.	Facilitator: Éva Tessza Udvarhelyi, cultural anthropologist

Participants in the roundtable:

Katalin Kovács , Hungarian Demographic Research Insitute
József Bonifácz Solymosi, public health expert, health promoter, Bischitz Johanna Integrated Human Service Center
Balázs Váradi, leading researcher, Budapest Insitute
András Kováts, sociologist, Director of Menedék Association





3 JULY 2018					
	I. Block /2 Healthy Diversity - an overview				
9:30 – 9:45	Why a Medical Anthropology Reader and what to do with it?	Presentation of the Medical Anthropology Reader and Medical anthropology's contribution to changing our understanding of health	Diana Szántó, Artemisszió Foundation		
9:45 – 10:00	Critical Incidents in the Health System	Presentation of the Catalogue of Critical Incidents	Clara Malkassian, Vera Várhegyi, Elan Interculturel		
	IV. Block Health and Diversity				
10:00 – 10:30	Cultural Diversity, Health and Health Care – the Challenge keynote	While medicine is often thought of as a science, and its principles universally applicable, there is growing recognition that the situation is actually a great deal more complex. In the UK and USA, it became apparent that different ethnic groups responded differently to some medicines, and also that there were inequalities in health associated with membership of various ethnic groups. However, it is evident that many other aspects of culture, including religion, gender and disability affect health in similar ways.	Mark Johnson, Emeritus Professor of Diversity in Health & Social Care,De Montfort University Leicester		





10:30 – 10:45	Good practice from Denmark: The Migrant Health Clinic	Globalisation and population mobility continue to provide new elements of diversity to local populations. The challenges include clinical issues, administrative matters, practical matters of patient consultation, and issues around the delivery of care at critical points of life. As we recognise issues of 'intersectionality', health care practitioners will need to adjust their thinking to dealing with uncertainty, and engage with a growing evidence base as these issues are explored further in	Margit Helle Thomsen, Mht Consult
10:45 – 12:00	Teaching culture to health professionals Roundtable	This roundtable aims at convincing the skeptical that social sciences have an important role to play in the education of health professionals. In this discussion with some outstanding social scientists who share their professional life between research and teaching future-, and practicing health workers, we will explore the possibilities and the challenges inherent in the encounter between two apparently opposing methods of understanding the world.	Facilitator: Diana Szántó, Artemisszió Foundation

Participants in the roundtable

MARK JOHNSON, Emeritus Professor of Diversity in Health & Social Care, De Montfort University Leicester
Ruth Kutalek, Medical University of Vienna, Unit Medical Anthropology and Global Health, Department of Social and Preventive Medicine
Margret Jaeger, Medical Faculty of Sigmund Freud Private University, Vienna, member of Medical Anthropology Network/EASA
Patricia Hudelson, PhD, Medical Anthropologist, Geneva University Hospitals
Attila Dobos, asst. prof., Semmelweis University

12:00 – 12:20	Learning to deal with diversity	Presentation of Healthy Diversity's training programs	Katharina Resch, University of Vienna; Alessandra Cannizzo, CESIE
12:20 – 12:35		Break	
12:35 – 14:05		Demedicalisation in practice: Practical worksphos	





	I. Make friends with your body	Make friends with your body. Join this demo workshop and explore your relationship with your own body. Learn how to slow down and listen to the somatic sensations, how to get in touch with yourself and with others.	Tihanyi Benedek, MD: researcher of the Adam Gyorgy Lab, Eötvös Loránd University; teacher of theory of Body Psychotherapy at HABP.
	II. Somatodrama	Somatodrama is an excellent and efficient, however infinitely simple and natural method which enhances self-awareness in a ludic way, procures a sense of competence and the feeling that we are related to our body, our symptoms and bodily processes.	Pataki Beáta, Szomatodráma
	III. Body Mapping	A combination of art, diagnostics, healing and empowerment by turning to the body as a location of symbols.	Szántó, Diana Artemisszió; Várhegyi, Veronika Elan Interculturel
14:05	Conclusions and delivery of certificates		













