

## Call for Papers

**Alternate, Virtual, and Augmented Realities: A Postgraduate and Early-Career Medical Humanities Conference, Durham University, 20-21 September 2021**



**‘The profound misapprehension of reality is what, more or less, constitutes the mental state we used to call “madness,” and when the world itself turns unrecognizable, appears to go “mad,” I find myself wondering what the effect is on those who never in the first place experienced a smooth relation between the phenomena of the world and their own minds. Who have always felt an explanatory gap. The schizophrenic. The disassociated. Does it feel like the world has finally, effectively, “come to you”? That what you have been previously told were solely your own personal pathologies and conspiracies have now become general? What is it like to have always seen, in your mind’s eye, apocalypse in the streets of New York, and then one day walk out into those streets and find – just as it is in your personal hellscape – that they are now desolate, empty and silent?’**

**Zadie Smith, *Intimations***

The COVID-19 crisis has made us acutely aware of the precarity of health and wellbeing, and more pressingly for many, the asymmetries in our lived experience. Health is indisputably mediated by structural determinants like race, culture, sex, and class; this in turn structures the ways in which we understand ourselves as situated, embodied subjects. Physical isolation notwithstanding, there is heightened attention to our intimate relationality - now more so than ever in this crisis of health(care). The protracted precarity and uncertainty engendered by this pandemic may have prompted us to critically (re)consider our formalised narratives of health, or perhaps even explore alternative knowledges and temporalities of illness and wellness to more meaningfully grapple with our contemporary condition.

Accommodating the possibilities of alternate, augmented or even virtual realities can productively illuminate the work that we do in the medical and health humanities. We might consider how medical humanities methodologies offer unique insights into the multiplicity of our lived realities and illuminate different ways of being. Central to this is the critical question

of how certain realities or experiences get designated as *alternative* to begin with: who defines the normative parameters of lived experience, how, and why? In a broader sense, centring what is typically designated as alternate, or indeed alternative, might also encourage us to look more closely at – and perhaps augment our understanding of – experiences of health and healthcare that lie outside of biomedical models. How might, for example, complementary and alternative therapies illuminate the clinical encounter of traditional biomedicine? Could illnesses that are deemed ‘medically unexplained’ – where a patient’s disease cannot be rendered visible using presently-available medical technologies – offer a different perspective on the processes and powers of diagnosis? Finally, we might consider illness itself as an alternate reality – as a radically different way of experiencing the body and the world – which can, in turn, augment empathy, sensory experience, and insight.

This conference aims to bring postgraduates and early career researchers together to explore the medical humanities through the lens of these broad themes. We hope to create a collaborative and supportive space in which to share research, discuss ideas, and think towards potential future collaborations. All are welcome, whether based in Durham or far beyond, whether based firmly within the medical humanities or just interested in finding out more about this interdisciplinary field. **The conference will take place online on 20-21 September 2021.**

Presentations given at the conference may address, although need not be limited to, the following broad topics:

- **Illness, trauma, and embodiment**
- **People-centred narratives of health**
- **Medical experiences and approaches through time**
- **Non-biomedical modes of diagnosis and care**
- **Indigenous ontologies and cosmologies**
- **Relationality and care; ethics of care**
- **Complementary, holistic, alternative therapies; spirituality in care and healing**
- **Media and/or the creative arts in healing**
- **Artificial Intelligence (AI) and Virtual Reality (VR) technologies in healthcare**
- **Palliative care**
- **Contemporary image culture and aesthetic medicine**
- **Health-related stigma, shame, embarrassment**
- **Structural inequalities and social determinants in healthcare**
- **Intersectional approaches to medicine**

- Iatrogenic trauma
- Dreams, dreaming, dream-worlds; visions and voice hearing
- Disability studies
- Neurodiverse perspectives on health
- Queer futurity
- Ecocritical Health Humanities

This list is a launching pad to a comprehensive theme; we look forward to hearing your diverse, plural interpretations and interventions. We welcome abstracts from researchers across the arts and humanities, the social sciences, medical and scientific fields, as well as from artists and creative practitioners working with different mediums. Each paper should be 20-minutes long, and we are happy to consider pre-formed panels as well. **Please send abstracts of 250 words plus a short biographical note of no more than 100 words to [pgecr.imh@gmail.com](mailto:pgecr.imh@gmail.com) by 30 June 2021.**