Personal Reflection: What is the Role of Anthropology in Crisis? Cathryn Klusmeier and Leah Schwartz

On the morning of November 9th, 2016, I did a lot of walking. Oxford, with its winding, crumbling streets and endlessly intricate buildings, lends itself to this sort of thing. Surely, I thought, if I walk long enough surrounded by these old stones that seem to contain a kind of wisdom in itself, the right response to this election would suddenly appear? In the face of what I knew would come following the election in my home country: change, pain, confusion, surely a place so seemingly bound by logic and reason would provide some insight into how one might proceed. To no one's surprise, the old buildings didn't provide any solace, and the longer I walked the more those crumbling streets just seemed like ordinary concrete that needed some work. And the question I had been wrestling with just kept coming back to me: how do I respond? What is the appropriate response of a medical anthropologist to this collective pain that so many seem to feel? Often, in moments of collective crisis, we are moved to action: to organize, to respond, to intervene. The recent election of Donald Trump has been no exception. Where does academia fit in with this propensity for action that so many feel?

I was not trained as an anthropologist in the traditional sense. Rather, my work has always been rooted in writing, in storytelling itself. Part of what drew me into academic anthropology in the first place was to explore another side of storytelling. Indeed, medical anthropologists are not tasked with necessarily identifying solutions but with unearthing complexity. Often operating comfortably at the fringe, they observe intensely and ultimately attempt to explicate what it is they have witnessed; by engaging in work that not only affords but also demands time and space for deep reflection, they are able to offer a degree of nuance most others do not. It's a narrative that occupies a different written space than I'm used to, with often different audiences. I constantly wrestle with anthropology's penchant for operating within the channels of academia. In times of crisis the movement to act sometimes seems at odds with this proclivity to stay within these channels. Is it a strength of anthropology that it embodies the role of the observer? Is this the anthropologist's role in crisis? Or is this notion of 'the anthropologist' as a neutral observer problematic in itself? So many of my classmates bring different backgrounds to anthropology, like myself. And thus their responses to this pain pull from both anthropology and other myriad disciplines. For one classmate who aspires to practice one day as a physician-anthropologist, this election provided fertile ground for reflection upon what she had always understood to be complementary pursuits. In contrast to anthropology, she explained, biomedicine carves out little space for critical reflection. It is messy and it is improvised, and it is often myopic in its understanding of the human body. And yet she remains convinced that, unlike medical anthropologists, physicians possess the essential capacity to intervene in moments of crisis. Like me, she remains sceptical of a strictly anthropological point of view in a moment like this one. But, we wonder, can anthropology operate at the intersection of these disciplines? Can it continue to operate within the traditional channels, yet simultaneously inform the work of individuals increasingly invested in interdisciplinary studies? We wonder if this could be the role of anthropology in crisis: to inform, to couple with other disciplines so as to create a more complex, nuanced response.

Above, Noëlle Rohde's and Sarah Grace Black's essays explore anthropological insights into chronic pain. In particular, they address those aspects of chronic pain where biomedicine has failed to offer meaningful help to sufferers. Indeed, their articulations of these multivalent insights serve as a testament to those areas of inquiry where medical anthropology does offer unique and relevant contributions.

To be sure, these reflections leave more questions than answers, and like all complex issues, the way forward is not a path at all, but a mosaic of interlocking questions. *How does anthropology respond in crisis? Can one operate as both an anthropologist and a medical doctor, simultaneously?* As a new student in anthropology, I continue to wrestle with what my role – and the collective role of anthropologists – is in these moments. Ultimately, I recognize, this may demand a response speaking primarily as an engaged citizen and not necessarily as an anthropologist. However, as I grow within the discipline, I am convinced that there may be utility in recognizing anthropology's capacity for being an interdisciplinary field. In recognizing that an 'anthropologist' could take many forms – medical doctor, writer, academic – anthropology could prove to be a much more fluid discipline than might initially seem. And because of that fluidity, anthropology's strengths – its constant engagement with complexity and an attunement to nuance – can become implicit in the work of other disciplines as well.