

Summary:

„The Body in the Archive“, and can be summarized thus:

In transatlantic dialogue, new concepts of the human body and scientific representation emerge at the interface between culture, society and science within the intellectual public of the New England states between 1846 and 1898. The existence and exigencies of this particular milieu as an epistemic culture illustrate and support the claim that the prerequisites we deem typical of our present condition of the global information society and digital knowledge economies are present in the 19th century already; that is to say, they are not the result of digitalization, instead, they are conditions that make social acceptance of the digital media of our present global epistemic information culture possible. The goal is to recover and analyze these enabling conditions in the problematizations of the human body, applying a heterotopological method developed from discourse and cultural analysis, operationalized and continually revised with regard to effectivity and robustness. It applies the Foucault-Deleuzian notion of the event empirically to produce a genealogical series of mini-ethnographies which will help us understand the creative scope and dissemination of concepts and their integration into scientific practices: This process is, in the usual theoretical vocabulary, denoted as „the production of an epistemic culture and its epistemic object“, however, the advantage of heterotopology lies in the expansion of the historical scope, intensifying the appraisal of agency and decision-making, and accounting for theoretical dynamics and social inertia in accepting that innovative practices and concepts cannot obtain without apriori structures of social acceptance. Besides this project's merits in the history and sociology of science, its publics and transatlantic dialogue, my work with archives and international research networks will continue the integration of a robust paradigm of medical humanities and the social study of science&technology.

1.1. Research/technological quality, including any interdisciplinary and multidisciplinary aspects of the proposal

Research and research training parts of this IOF project are closely interconnected by a key problem in the interdisciplinary cluster of medicine studies: *Body culture studies*. This project will investigate the historic prerequisite conditions leading to the development of the modern concept of the human body. The goal is the validation of the hypothesis that the structure of modern knowledge society, *biopolitical* epistemic culture and the *virtualization* of biomedical research and clinical practice are enabled by the historic apriori of the concept of the body and not merely the result of a major *epistemic rupture*. The outstanding character of this project is reflected by its cutting edge design of training, competence and career development programs for the researcher embedded in an interdisciplinary cluster, covering the humanities context as much as the cross-disciplinary practices of biomedicine and community health.

This project is an **investigation of the hypothesis based on the idea that the current concept of the human body in biomedicine is a metaphorical/phantasmagorical¹ requisite of the transatlantic dialogue.** In the 19th century, its practices and representations emerge at the interface between culture, society and (biomedical) science in the USA, in particular within the intellectual public of the New England states between 1846 and 1898. The existence and exigencies of this specific milieu as an epistemic culture illustrates that the prerequisites, considered typical for our present human condition in a global information society and digital knowledge economies² – the motifs and figurations *virtualization* and *fragmentation*³ –, were present and blossoming in the 19th century already. Thus, they are

¹Deleuze, Gilles. Phantasm and Modern Literature. In: Deleuze, Gilles. Logic of Sense. Columbia UP, 1990.

²Knorr Cetina, Karin Culture in Global Knowledge Societies. *Interdisciplinary Science Reviews* Vol.32/4, 2007;

³Mol, Annemarie, The body multiple. Duke UP, 2002; Delanda, Manuel Virtual Environments and the Emergence of Synthetic Reason. In: Mark Dery (ed), Flame Wars: The Discourse of Cyberculture: *South Atlantic Quarterly*, Vol 92 (4) 1993: 793-815; Pietraß, Manuela, Rüdiger Funiok, Hrsg. Mensch und Medien – Beiträge zu einer Anthropologie des 'homo medialis', VGS, 2010; Meillassoux, Quentin Potentiality and Virtuality. In: *Collapse 2* „Speculative Realism“, 2007; Pearson, Keith Ansell Bergson and Deleuze on the Reality of the Virtual', *Modern Language Notes*, volume 120, no. 5, 2006: 1112-1127

not the result of digitalization but, indeed, the very conditions enabling social acceptance of the digital media of our present global epistemic information culture. The recovery and analysis of these *enabling* conditions is the descriptive goal of this study in the form of the application of the idea of *heterotopological* investigation of the problematization of the human body (Foucault). Besides health and illness, and, of course, *life itself*, the body is the conceptual key to the discourse of biomedical practice and research. As a consequence, the research will be premised by the following set of questions, while expanding both the geographic scope and, in combining methods from history, philosophy, sociology, and anthropology, overcoming methodological constraints that recent research by historians of continental science, technology and medicine (for example Stefan Rieger or Philipp Sarasin) was subject to:

- **What is “*the body*”?**
- **What does it mean to *have* a body?**
- **What does it mean that somebody has the epistemic authority over the statements “This is my/your body” and “I am/you are healthy/ill/normal”?**

The researcher's original and robust set of methods – a combination of semiotics, conceptual analysis and cultural analysis – builds upon recent developments in qualitative methodology: the philosophical concept *event* will be empirically applied on the (trans-)local level in a genealogical study to produce mini-ethnographies for a *series* of events, in order to understand how concepts and their scope of meaning were created and disseminated that (often subliminally) shape a public's understanding and the integration of (biomedical) scientific practices, quite frequently until today: This process is, elsewhere, defined as *the production of an epistemic culture and its epistemic object*.

In this case, epistemic culture empirically refers a) historico-locally to New England's 19th century epistemic community of the intellectuals, and b) to the members of 21st century global knowledge society as health care consumers; whereas epistemic objects refer to *ad a*) the human body as a heterotopia (Foucault) or multiplicity (Deleuze), or as the object emerging in the conceptualization of controlled internal displacement, and *ad b*) the human body as a *body multiple*, aka its parts are represented through abstracted and highly fragmented data-packages and managed in predetermined care-pathways. The advantage of this methodological approach is the expansion of the historical scope, the inclusion of theories narrative agency and decision-making, and dynamic systems theory in accepting that innovative practices and concepts cannot be obtained without structures of social acceptance, cultural *and* biological difference. Respectively, this project has two objectives defined between research and training:

- α. **Developing a social history based on the emergence of the modern concept of the human body in the 19th century as a master narrative for medicine and its publics** (description follows in below paragraphs).
- β. Training and collaboration with researchers in fields related to *medicine studies* in order to achieve an immersion of the researcher into this epistemic community, based on the premise that investigating conceptualizations of the body, health and illness will enable the researcher to gain a comparative perspective on research ethics and the social production of an epistemic culture of research practice that will yield in contemporary and future potentials for European-American research and development.

This agenda aims to illustrate that the body is not just a given but is in a crucial regard relative to analysable biological, social, and cultural prerequisites. Accordingly, it will be argued that those epistemological transformations, which seem to be separating the epistemic culture of today's health care practitioners from earlier health practitioners and researchers, did not emerge in the twentieth century. Instead, they were constituted much earlier: The (medical) epistemic culture of today rests on

historic apriori or social prerequisites that were hatched in the nineteenth century, which made possible and socially acceptable⁴ any technological and structural advances and transformations that we consider wholly modern, from the notion of case management to the use of medical imaging technology. The mid-twentieth century digital revolution in technology, inclusive of medical technologies, would not have occurred if it had not beforehand been “made acceptable”, “intelligible” and “connectable” by nineteenth century scholarship and public discourse.

Today's ready acceptance of “how we became posthuman”⁵ is not the promise of 20th century science fiction or cybernetics, but a conceptual framework of metaphors from the 19th century. Evidently, this involves medical practice, social policies and *epistemic cultures* (and concrete *publics* and *epistemic communities*⁶). Early 20th century sociologists of medicine declared that key to understanding medicine and health care was the so-called sick-role in dyadic interaction system of doctor and patient. More recently, medical sociologists suggested that – in introducing *biopolitics*, *medicalization*, and *governmentality*⁷ – we have to come to terms with the demise of the “sick role” and accept “novel ideas” into our social criticisms: the problem of the “managed case” and of “environmental health”. However, looking deeper into the history of medicine, one can see that *environment* as a health factor is not a novel idea (it was self-evident for William James⁸) nor is the *managed case*. These concepts can be found in text-books and lectures for medical practitioners in training as early as the 1850s. **Therefore, the question suggests itself:**

What is processed and managed in “a case” in 1861 and 2011 other than a human body?

The researcher's investigation and training will follow this up in the form of a negotiation of boundaries for biomedical science and its publics in the following set of testable/robust theoretical premises, and practical, and historical hypotheses⁹:

I. Theoretical Premises

- There is a transformation process that inherently describes the development of contemporary global epistemic culture as a digitalized information society.
- This process can be understood through the concept of *Virtualization*
- *Virtualization* consists of two diametrically opposite yet strangely complementary processes: *Hyperuniversalization* and *hyperdifferentiation*.
- Differentiating the social and the cultural as distinct yet interloping and interdependent environments, it can be said: These complementary (social) processes rest on two *phantasms*: The phantasm of total control and the phantasm of (interior) regionalization.

II. Hypotheses regarding contemporary medicine and society (i.e. health care)

⁴Giesecke, Michael. Der Buchdruck in der frühen Neuzeit. Suhrkamp, 1991. Giesecke, Michael Die Entdeckung der Kommunikativen Welt. Suhrkamp, 2007; Esposito, Elena Soziales Vergessen. Suhrkamp, 2004.

⁵Hayles, N. Katherine. How we became Posthuman. Chicago UP, 1999.

⁶*Epistemic communities* broadly construed: Eyles, John, et al. An epistemic community comes and goes? Local and national expressions of heart health promotion in Canada. BMC Health Services Research, Vol.9, 2009; Haas, Peter Introduction *International Organization* Vol. 46(1): 1992: 1 – 35; Fleck, Ludwik Genesis and Development of a Scientific Fact. Chicago UP, 1979.

⁷May, Carl. The clinical encounter and the problem of context. *Sociology* Vol. 41, 2007:29-45; Rose, Nikolas. The Politics of Life Itself. Princeton UP, 2006.

⁸Richardson, Robert D. William James in the maelstrom of American Modernism. Mariner Books, 2006; Bordogna, Francesca. William James at the Boundaries. Chicago UP, 2009.

⁹Serres, Michel. Variations sur le corps, Le Pommier, Paris, 1999. Rodgers, Daniel T. Atlantic Crossings. Harvard UP, 1998; Starr, Paul. The Social Transformation of American Medicine. Basic Books, 1982; Starr, Paul. Social Categories and Claims in the Liberal State. In: *Social Research* Vol.59, 1992: 263 – 295; Starr, Paul Professionalization and Public Health. *J Public Health Management Practice* Nov. Suppl. 2009: 26 – 30; Levine, Donald The Powers of the Mind. Chicago UP, 2006.; Rieger, Stefan. Die Individualität der Medien. Suhrkamp, 2000; Rieger, Stefan. Die Ästhetik des Menschen, Suhrkamp, 2001; Putzi, Jennifer. Identifying Marks: Race, Gender, and the Body in 19th Century America. Georgia UP, 2006; Rabinbach, Anson. The Human Motor, California UP, 1990; Rabinow, Paul. Anthropos Today. Princeton UP, 2003; Rheinberger, Hans-Jörg. Towards a History of Epistemic Things. Stanford UP, 1997. Barilan, Y. Michael The story of the body and the story of the person: Towards an ethics of representing human bodies and body-parts. In: *Medicine, Health Care and Philosophy* Vol.8, 2005: 193 – 205.

- The (human) body of each patient or research subject is becoming increasingly digitalized, fragmented, and virtual through hyperdifferentiation of medical technologies and hyperspecialization into ever more expert cultures.
- Therapeutic and diagnostic regimes that involve the human body become increasingly path-dependent through hyperuniversalizing case-management systems, computed (imaging) data, patient careers and lifestyle trajectories.
- In other words: While each individual person seems to have “multiple bodies” now, at the same time, these bodies are increasingly becoming subject to universal categories that constitute somatic norms and normalization procedures through disciplining.

III. Hypotheses for research in cultural and science history

- The phantasms of control and regionalization originate in the 19th century
- Virtualization of the body is a product of 19th century American science and society
- This can be identified in the American public’s construction of both the concept of the human body and the concept of the science of the body (aka the construction of the body as an epistemic object) in early *American Realism*.
- If this (prior point) is validated in the confines of this project, it can be legitimately argued that the 19th century obtains the prerequisites of the same epistemic culture that are generally considered to be a product of the latter half of the 20th century.
- In conclusion:
 - a. The virtualized body and the conceptual discontents of contemporary medicine and health care originate in science and public culture of the 19th century.
 - b. The notion that modern digital technology resulted in a social transformation beginning in the mid-20th century (“myth of a *digital revolution*”) is misleading. Quite on the contrary, systems and complexity theory suggest that information technology (IT/ICT) would not have been acceptable in post-1950 society, if the social and cultural prerequisites had not existed and been widely disseminated as the result of *longue durée* processes.
 - c. The concept, representations and practices of the human body are the best example for this fact, namely, how and why people think of bodies, organisms and life as something that is normal, healthy or acceptable, or not, and act accordingly towards themselves and others in the form of normalizing and disciplining practices.

A review of recent research on the history of the body shows distinct areas that require further investigation: While there is profound research on the history of the body concept in continental Europe and its pre-digital forms and phantasms of *virtualization*, research on the history of the body in the US and in transatlantic exchange has not explored these phantasms¹⁰ and narratives, despite a widely shared acceptance that transnational exchange of ideas and the emergence of a transatlantic epistemic culture “somehow” led to the rise of modern medicine and its publics in the 19th century. In other words, to understand the mutual influence of European and American cultures and the emergence of prevailing *master narratives* in biomedical practice adequately, a robust reconstruction of the human body in literature, art, society, politics *and* science must ask critical questions about the conditions of possible experience: In what way were nineteenth century Americans enabled to say “I have a body” or “This is your body”? Recent historical studies too often reify and ontologize current *master narratives*¹¹ and political categories from discourses about justice, politics, and social integration.

¹⁰Zižek, Slavoj. *Organs without Bodies: Deleuze and Consequences*. Routledge, 2003; Bath, Corinna Every Technology is socially and culturally shaped. 2009 Interview with Semantic Web, retrieved at Semantic-web.at, Jan 28th, 2010 Bath, Corinna, Jutta Weber, et al Hrsg. *Materialität denken*. Studien zur technologischen Verkörperung. Transcript, 2005

¹¹Bennet, Mark, Vanessa Dickerson, eds. *Recovering the female black body*. Rutgers UP, 2000; Dekkers, Wim. *The lived body as an aesthetic object*

However, gendering or ethnification of a body requires some *historic a priori* experience of the body: A body needs to be marked as *a biological body* – however: without essentialism (!)¹² - before it can be unmarked in the process of making it subject to gender, race, or else¹³. The novel combination discourse analysis, critical realism and complexity theories is a return to Foucault beyond Foucault: *Experiences are to be made*. Separately, Luce Irigaray, Ian Hacking and, very recently, John Ernest suggest that the mere reification of political categories does not help understand the “real experiences” (of 19th century authors): *Experience* precedes categorizations and *the body* is first in experience¹⁴. Before we can understand what the politicized body is, we must understand what “the body (conceptualized)” is. Reiterated in current practices, one is *enabled* to ask and yet avoid the fallacy of misplaced concreteness: “What is the modern experience of being a patient, or, better still: of being a *virtual patient*?”

1.2. Appropriateness of research methodology and approach

Methodology Summary

To reveal the historic ontology of *the body*, avoiding essentialism and constructivism, charting the *master narratives* and phantasms that condition the possibility of *the body*, the spatial and geo-philosophical concepts heterotopia/hetero-topology¹⁵, multiplicity, virtuality, and focalization constitute a research agenda, interlaced with training for the outgoing phase: With a selection of *events*¹⁶, based on focalized micro-ethnographies or individual thick descriptions, a mini-theory of the concept of the body is created for each event that is embedded in a metaphorical landscape and sketched in phantasms that literally guide the problematization of the body in its discursive and practical relations following a complex topology (Michel Serres¹⁷)

Objective:

To assess contemporary epistemic scientific and social foundations (phantasms, metaphors, narratives) of the underlying concepts and statements that describe the human body in biomedical research and community health practices in Continental Europe, the United States, and the history of the transatlantic epistemic community of biomedical scientists in the 19th and 20th centuries and today.

Methods:

The fellow's methodology continues in its development, begun in his doctoral thesis, by uniting *critical theory* and *critical realism* with an “interest in the body”¹⁸; an approach, which the researcher outlined further in recent publications, including the forthcoming book on *Studies in the Co-evolution of Philosophy, Biology, and Sociology*, and essays on the „ADHD regime and neurochemical selves” and a detailed explication in “Truth, Knowledge, Narratives of Selves” from a special issue on Semiotics and Social Science (see below B.3.2). The method reconciles institutional analysis (John W.Meyer) and interpretative

in anthropological medicine. In: *Medicine Health Care and Philosophy* Vol.2: 117 – 128; Bordo, Susan. Unbearable Weight: Feminism, Western Culture, and the Body, 10th. California UP, 2004. Dreger, Alice. Jarring Bodies. In: *Perspectives in Biology and Medicine* Vol. 43, 2000: 161 – 172 ; Garland-Thompson, Rosemary Extraordinary Bodies – Figuring Physical Disability in American Culture and Literature. Columbia UP, 1997; Grosz, Elisabeth Volatile Bodies – Toward a corporeal feminism. Indiana UP, 1994; Robb, Graham Strangers. Homosexuality in the 19th century. Norton, 2005.

¹² Irigaray, Luce. An Ethics of Sexual Difference. Cornell UP, 1993

¹³ Fausto-Sterling, Anne. Sexing the Body. Basic Books, 2000. Halewood, Michael. Whitehead and Butler on the (social) body. In Faber, Robert, Stephenson, Andrea M. Eds. Secrets of Becoming. Fordham UP, 2011: 107 – 126' Fox Keller, Evelyn Making Sense of Life : Explaining Biological Development with Models, Metaphors, and Machines. Harvard UP, 2002

¹⁴ As suggested by Ernest, John. Rethinking African American Literary History, University of North Carolina Press, 2009

¹⁵ Choosing the concept *heterotopia* for his essay on *heterotopology* as a method, “Of Other Spaces(1967)” [*Diacritics* Vol.16/1986: 22-27], was not an “innocent move” by Michel Foucault: *Heterotopia*, is a 19th century medical concept, rendered applicable and popular by Rudolf Virchow (1821 – 1902) in Europe and in the US by his former student Reginald Heber Fitz (1843 – 1913), a physiologist at Harvard University. *Heterotopia* describes the (pathological) displacement of an organ or tissue.

¹⁶ Butler, Judith. Undoing Gender. Routledge, 2004; Shaviro, Steven. Without Criteria: Kant, Whitehead, Deleuze, and Aesthetics. MIT Press, 2009; Willams, James. ‘On the problem of the selection of events for Deleuze and Davidson’ in Postanalytic and Metacontinental. Willams, James., et al. (editors), Continuum, 2010;

¹⁷ Serres, Michel. Atlas. Paris: Juillard, 1994.

¹⁸ “Interesse am Körper” in: Horkheimer, Max/Adorno, Theodor, Dialektik der Aufklärung.: Fischer, 2000 [1944]: 246 – 252

analytics (Foucault, Deleuze, Rabinow) via cultural analysis (Bal). Accordingly, genealogical excavation of the concepts and practices, which are constituting the human body as an epistemic object in an epistemic community of biomedical practitioners and their publics, is the objective of this research. It will be achieved through analysis, description, and „reading different spaces and other places, in a kind of both mythical and real contestation“ of the volume of space which the body describes as a *heterotopia* or *multiplicity* in performances and practices. This is the type of description that Foucault defined as *heterotopology*: The body, it will be shown, is constituted as an *assembly* of real and effective spaces, which are outlined in the very institution of their epistemic culture and communities. It constitutes, however, a sort of counter arrangement, “of effectively realized utopia”, in which all the real arrangements of what it means *to be a human body*, all the other real arrangements that can be found within an epistemic community, are at one and the same time represented, challenged, and overturned: a sort of place that lies outside all places and yet is actually localizable in *events* embedded in arrangements that preserve and transform the body in processes of socio- and psychogenesis (N.Elias), *events* that can be reconstructed by re-applying ethnographic methods for *cultural analysis* in the creation of mini-ethnographies of events and reconstructing the transformation rules (Foucault) for events in a *series* (Deleuze), thereby bridging the analyses of discourses and institutions in biomedical research and health care, similarly suggested by John W. Meyer et al for environmental regimes and in Gieryn's concept *truth-spots*¹⁹: The final goal of the project lies in the integration of research and training as a combination of the theoretical premises with the practical and historical hypothesis. On the “practical side”, the researcher aims at immersing into a current epistemic community culture of biomedical research and community health experts, in order to acquire a working knowledge of a variety of jargons, rationalities and practices in biomedical research and in bio-ethical practice among expert groups and between biomedical science and its publics.

Expected Results Conclusions and Potentials:

Creation of a monograph and articles on the emergence of the modern body as a scientific concept, epistemic object and phantasm: Results of such an epistemological “assessment” enable a critical analysis of current *best practices* in public health policy-making and healthcare organization and biomedical research. Being successful in presenting a holistic approach leads to alternatives in the continued development of *medicine studies* as a field, beginning with publications, development of relevant teaching, and the development of integration of transatlantic collaborations in medical humanities and STS research into the European Research Area (ERA).

1.3. Originality and Innovative nature of the project, and relationship to the 'state of the art' of research in the field

The history of biomedical research and public health, the concept of the human *body* and the relation between medicine and its publics have, separately and individually, been subject of innovative research by historians, philosophers, and sociologists of science and technology: Among others, Stefan Rieger, Philipp Sarasin, and Elisabeth Grosz have each in the past decade ideal-typically²⁰ contributed groundbreaking research on the construction of the human body as an epistemic object, which inspire this project and provide the frame that it seeks to transcend: Sarasin, for example, has provided an insightful Foucauldian reconstruction of the conceptual and practical debts that the statement “I have a body” owes the *long 19th century* and the discourse on hygiene and public health. Rieger, meanwhile, has shown that the body, as object and medium of anthropo-technical research was subject to phantasms that can be described as a set of transformation rules for *pre-digital virtualization* and *interior regionalization*. Inspired by Lacan and Deleuze, *corporeal feminist* Grosz, arguing that the human body as a part of life is

¹⁹ Foucault, Michel Of Other Spaces, *Diacritics* Vol. 16, 1986: 22-27; Meyer, John W., et al. The Structuring of a World Environmental Regime, 1870-1990. *International Organization* Vol. 51 1997: 623-51; DeLanda, Manuel. A new Philosophy of Society: Assemblage Theory and Social Complexity: Continuum, 2006; Gieryn, Th. Boundary work and the demarcation of science from non-science. *Am. Soc. Review* Vol.48, 1983: 781–95; Gieryn, Th.. Three Truth Spots. *Journal of the History of the Behavioral Sciences* Vol 38, 2002:113–132; Bal, Mieke Narratology. Toronto UP, 1997; Elias, Norbert. *The Civilizing Process*. Blackwell, 1994.

²⁰ Also: Harrington, Anne, *The Cure Within*. Norton, 2008; Herzogenrath, Bernd. *An American Body Politic*. Dartmouth College Press, 2010.

one of a series of modes of competing and coordinating forms of openness, is developing a more politicized, radical, and far-reaching feminist understanding of matter, nature, biology, time, and becoming.

However, these individual contributions, which fairly describe the *state of the art* comprehensively, also present restrictions, which this research project aims to overcome:

- There is no single effort that combines these different accounts into a comprehensive account for a complete *body culture studies* perspective.
- Historical accounts that focus on the concept of *the body*, such as Sarasin's or Rieger's, rarely include a conceptually comparable account for the United States nor are there any substantial accounts of the role of transatlantic exchange of knowledge and its effects.
- Accounts of discourses on the body in the history of the United States tend to reconstruct the body being premeditated by race and gender discourses, focusing largely on the discursive construction of social (in) justice and (in)equality.
- Accounts of histories and discourses that do include biological perspectives, focus on states and materiality and tend to fail to include dynamic and process theories.
- In brief, the existing accounts, however innovative, fall prey to either one of two categories and, counter-factually, become vulnerable to the respective caveats rendered by their opposite: Constructivism versus essentialism.
- Finally, many historic analyses cannot connect to the present and fail in answering the question: "What do we learn in order to improve current practice?"

In eliminating these restrictions, the research fellow continues to prove the existence of a connectedness between important episodes in the history of 19th century medicine and philosophy, transatlantic dialogue, and modern scientific practice. In aligning with the emphasis on *events* in recent developments in social science methodologies and philosophy²¹, this research project is a media-archeology of *order*²² of the archives and contemporary narratives and practices in biomedicine²³. In analyzing a combination of archival resources, including historic images, lab-instruments, text-books, and such that are rarely, if ever, viewed in their contextual relation, and in using a unique set of methods, the researcher will be enabled to create a comprehensive account of *real events* and their lasting structural dynamics that will effectively alter present accounts of the emergence of digital modernity and modern science.

1.4. Timeliness and relevance of the project

The "Body in the Archive" project operates on a field of research which is under-represented in Germany and the European Research Area. The researcher aims to strengthen the ERA's expertise in the field and constitute novel and lasting bonds to his outgoing host as well as the corresponding network in the US and thus, tap crucial knowledge and experience in order to make it accessible to scientists of the ERA.

Medicine Studies, in fusing Medical Humanities and Social Studies of Science and Technology, is a recent development in the interdisciplinary field of Science Studies (also known as: STS [US] or *Épistémologie* [France]), which includes the humanities (history, philosophy, ethics, religion), social sciences (economics, sociology, psychology, anthropology cultural studies), and, where applicable, the arts (literature, film, visual arts) and their application in research, education and practice in bio-medical science, complementary and integrative medicine, public health, and (health) care²⁴. It is the study of

²¹Stengers, Isabelle, *Thinking With Whitehead*. Harvard UP, 2011; Faber, Roland, Stephenson, Andrea M., editors. *Secrets of Becoming: Negotiating Whitehead, Deleuze, and Butler*. Fordham UP, 2011: "Negotiating Bodies and Societies" 107 – 156.

²²On the *media-archeology* of the order of archives, see: Ernst, Wolfgang. *Das Rumoren der Archive*. Berlin: Merve, 2002.

²³Schickentanz, Silke, Raz, Aviad (eds). Special Issue Responsibility in Biomedical Practices. *Medicine Studies*. Forthcoming Fall 2011.

²⁴Paul, Norbert P., *Medicine Studies: Exploring the Interplays of Medicine, Science and Societies beyond Disciplinary Boundaries*. *Medicine Studies*, Vol. 1 (1), 2009: 3 – 10.

knowledge regimes and narrative structures that regulate acceptance of and resistance to innovation in biomedical research and healthcare through *master narratives* that govern effective and efficient policy-making and scientific practice. The reconstruction of this type of *governmentality* in *event<>discourse-based accounts* of the history of medicine and its publics leads to a novel account of the history of modernity itself in reshaping how we understand the conditions of possibility for the emergence of contemporary epistemic culture as a knowledge society. This kind of study is of immediate concern in light of the challenges for European health and care systems: European integration, globalization and immigration from outside Europe result in the fusion of (trans-) local cultures of healing with biomedical technologies and regimes of medicalization and pharmacologicalization. These developments are co-dependent on many historical prerequisites, as well as the past and future of transatlantic exchange of ideas. This project, therefore, aims to develop the field of *medicine studies* as a transatlantic field for innovative, interdisciplinary development through research and cooperation, while developing the career perspectives of the applicant accordingly, in establishing an international research profile for the researcher as an international authority in the transatlantic history of medicine and body culture studies.