Problematising home, dis/placement, health and citizenship in a time of global change

XIII MAAH – conference Venue, University of York, 3-5th June 2026

Sangeeta Chattoo (sangeeta.chattoo@york.ac.uk) and Monish Bhatia (monish.bhatia@york.ac.uk) (Department of sociology, University of York, UK)

Synopsis   Home and house have been central to anthropological theory both in their symbolic and empirical significance as the site of social reproduction, relations of power, relationality, caring and boundary making at micro and macro levels across time (Carsten, 2003; Bourdieu, 1976; Lévi-Strauss, 1983; for a review, see Samanani and Johannes 2019). The theme for XIII MAH conference aims to problematise the notion of 'home' as the primary site where everyday experiences and challenges of negotiating health and illness are enacted. We are particularly interested in understanding the intersections between health and wellbeing of a people and marginalisation, homelessness, threats of eviction as well as voluntary and forced movement in space (migration, political persecution, wars, famines, poverty, climate change and so on).   At a broader level, the conference themes will focus on:

- the importance of theoretical notions of home, place and displacement in analysing experiences of health inequalities, and their relation to deeply rooted social hierarchies of race, ethnicity, class, gender, political marginalisation and structural violence
- how we envisage the future of doing 'medical anthropology at home' within the context of health, illness and healthcare systems in a world marked by greater securitisation of health; against the backdrop of COVID-19, recent and imminent politico-economic conflict as well as climate change
- innovative, inter-disciplinary methods of fieldwork (digital, visual, art based, and AI generated tools) in co-producing research, with a view to finding community based solutions to achieve equitable access to 'health for all' and, thereby, seeking to craft alternate futures

Access to a safe, suitable and secure home has long been recognised as an important social determinant of health (McGowan et al., 2021; Barnes et al., 2013; Gibson et al., 2011,

Marmot, 2010). Ironically, on one hand, postmodern social theory prioritises porousness of state boundaries, cultural mobility and the notion of home 'everywhere and nowhere' in a world of (potential) global migration (Giddens, 1991). On the other hand, mobility of certain groups marks their heritage, often drawing resistance and negative affect from state and social majorities (Mac Laughlin, 1999). Hence, historically racialised minorities, and those of mobile heritages, refugees, asylum seekers, migrant workers and homeless people pose specific threats to state boundaries, legal notions of citizenship and how claims to health are negotiated within the broader context of citizenship and welfare rights within a state. These groups are politically, socially and morally, if not always literally, sequestrated 'in the margins' of the state (Das and Poole, 2004; Han, 2012). Despite their overt differences in terms of their legal status as (unwanted or partial) citizens, these populations share a certain precarity in everyday life marked by the 'threat of evictability' (van Baar Hubb, 2016). We might think of the impact of gentrification in a metropolitan city resulting in eviction of the urban poor, demolition of an urban slum, the financial status of refugees or asylum seekers or the ghettoisation of Traveller camps across UK and Europe, resulting in persistent and disproportionate levels of poorer health outcomes for such groups living under the shadow of evictability by state and non-state agencies.

The X111 MAAH symposium panels will unpick the impacts of securitisation of such politically marginalised groups - at intersections of race/ ethnicity/ socio-economic position, gender, age and disability (among other factors) - to understand the myriad ways in which the threat of evictability underpins or exacerbates the long-standing health inequities within contemporary societies across the globe. Further, following on from Black, feminist, Latin American and dalit scholarships, we want to explore situations where notions of marginalisation and exclusion fail to capture the existential threat of sustaining life itself (Membe 2003). For instance, the real impact of discriminatory state control on physical movement of migrant labourers trapped in metropolitan cities like Delhi and Mumbai, during the early phases of covid-19 lockdown in India. Equally, in foregrounding subaltern approaches, concepts and methods applied to understanding these intersections related to health, well-being and access to healthcare, our objective is to move away from received, pre-defined frameworks of victimhood, abjection or objectification in how people make claims to health and citizenship (Macharia, 2019; Jaware, 2018).

We hope that, in doing so, we can contribute to the ongoing project of decolonising the curriculum of medical anthropology, rethinking the spatial-temporal boundaries between self, home and the field in relation to health and wellbeing. These themes are particularly relevant in light of the persistent and widening social inequities in health outcomes brought to light especially in research since the covid-19 pandemic, further exacerbated by the current climate of political, economic and environmental instability, challenging the older vision of the world as a global village. Equally, in prioritising place- based approaches to health, we want to acknowledge the need for local, up-stream, community-led solutions to persistent health inequities, addressing 'structural competencies' within a healthcare system, hoping to influence future outcomes (Martínez-Hernáez and Bekele, 2023).

Panel 1. *Crafting homes, lived experiences of health and caring in the face of threats of displacement/ forced eviction or migration*

The broader intersections between race, ethnicity, socio-economic position and gender in explaining inequities in health outcomes have long been recognised through the lens of social determinants of health. This panel invites papers engaging theoretically with lived experiences of place, home and disruptions caused by mobility, as one of the sites where health, illness, and caring are experienced and negotiated with state and non-state actors. The aim is to foreground nuanced ethnographic engagements with notions of place/ home in explaining and/or addressing long-term poorer physical and mental health outcomes and inequalities persisting across generations. Contributions are invited from across national and healthcare systems.

Panel 2. *Legal encounters and the experiences of refugees and asylum seekers: racialised, under-prioritised chronic health care needs*

The past 50 years have witnessed an increasing securitisation, and criminalisation of immigration and asylum policy in the UK and across Europe (Bhatia 2018; El-Enany, 2018; Green and Grewcock, 2002; Solomos, 1993). Undocumented and forced migrants face higher rates of mental or psychological distress when compared to the overall population of the host country (Tribe, 2002). Pre-migratory factors and exposure to traumatic events (torture, war, familial separation, to list a few) results in acute stress, anxiety and depression

(Neuner et al., 2010). In addition to their pre-migration trauma, the hostile policies and practices of the host country result in substantial post-migratory stress and can have adverse effects on the emotional health of these individuals (Carswell et al., 2011; Teodorescu et al., 2012).

This panel welcomes papers/local case-studies focusing on the health implications of material and social depravation, fear of deportation and forced confinement faced by refugees, asylum seekers and unauthorised migrants (Li et al., 2016; Silove et al., 2007; Steel et al., 2004). Contributions might, for example, focus on the links between mental health deterioration and enforced confinement in immigration detention centres across Europe (Bosworth 2016); and forms of social death triggered by racialised othering institutionalised by the state (Bhatia 2018; 2023).

Panel 3.   Resistance to forms of domestic, intrastate abandonment: Methodological and ethical challenges, innovative solutions

In this panel, the analytical lens will zoom in on both forms of caring and structural (gender/kinship based) violence within the domestic sphere, and mediations with state (for e.g. welfare and health services) as well as non-state agencies.   We might ask: how do the homeless in London or seasonal migrant workers in Colombo make transient homes against constant threats of gentrification, eviction or state paradigms of development?   How can we study the health impacts of extrajudicial demolition of homes by state, or the abandonment of families forced to live in damp council housing known to be a health hazard?   What can be the social and health implications for those thousands of rag pickers in Romania, and children and adults living in metropolitan cities across South Asia, who make a living by rummaging through mountains of household waste for scraps that can be sold/recycled? How can we witness their experiences of handling waste or even nightsoil as labour against a backdrop of stark socio-economic inequities reflected in the architecture of these urban spaces; mirrored in how their everyday survival trumps any concern for health as a priority or privilege? The case of a fight for environmental justice against the disproportionate share of adverse environmental exposure suffered by the Roma community at the Pata Rât landfill site of North-West Romania is a good example of how waste can be regenerated as an economic resource (see Petrescu-Mag et al., 2016).

Panel 4   Reflections on doing medical anthropology at home: envisaging our contributions to the future of the field

This concluding panel will reflect on how we envisage the future of doing 'medical anthropology at home' within the context of health, illness, caring and healthcare systems in a world marked by recent and imminent geo-politico and economic conflict, climate change and push-backs against the promise of unfettered globalisation. We will discus some of the major pragmatic and ethical challenges faced by researchers, shared across the potential scenarios of evictability and abandonment discussed throughout the symposium. This panel will explore innovative methods and community- based solutions to these questions.   For instance, how do we address deep mistrust of our interlocutors towards state, health and social care organisations representing the state as well as ourselves as researchers perceived to be outsiders to their community. How do we negotiate and build honest relationships with community organisations as research partners?   In a shifting climate of funding cuts to social sciences, with an ever greater focus on inter-disciplinarity, how do we foresee the contribution of our discipline and research in making a difference.

If you would like to join us, please email a long abstract of no more than 250 words, clearly outlining your contribution to one of the panels, to sangeeta.chattoo@york.ac.uk; monish.bhatia@york.ac.uk . Please note that we have a limited number of places and the last date for submission is 10th February 2026. The decision on abstracts to be included will be communicated by 28th February. In support of University of York's green policy, the event will support online/in person participation.

Key References

Abel T, Frohlich K. Capitals and capabilities: linking structure and agency to reduce health inequalities. Soc Sci Med. 2012;(74):236-244. doi:10.1016/j.socscimed.2011.10.028. 14. Bourdieu, P. 1976. Marriage strategies as strategies of social reproduction." In Family and society (eds) R. Forster and O. Ranum.

Bhatia, M. (2023). Reproductive injustice in Britain: punishing illegalized migrant women from the Global South and separating families. *Identities*, *30*(4), 471-489.

Bosworth, M. (2016). *Mental Health in Immigration Detention: A Literature Review. Review into the Welfare in Detention of Vulnerable Persons, Cm 9186. London: HSMO. Criminal Justice, Borders and Citizenship Research Paper No. 2732892. Posted 17 February*. Retrieved May 23, 2018, from https://ssrn.com/abstract=2732892.

Carsten, J. (2003) *After kinship,* Cambridge: Cambridge University Press.

Carswell, K., Blackburn, P., & Barker, C. (2011). The relationship between trauma, post-migration problems and the psychological well-being of refugees and asylum seekers. *International Journal of Social Psychiatry, 57*(2), 107–119.

Das, V. and Poole, D. (eds., 2004) *Anthropology in the margins of the state* – Oxford University Press.

Douglas, M. (1991). The idea of home: a kind of space , *Social Research,* 58 (1); 287-301.

El-Enany, N. (2020). (B) ordering Britain: Law, race and empire. In *(B) ordering Britain*. Manchester University Press.

Forster, Natalie, Hodgson, Philip and Bailey, Cathy (2019) Energy advice for Traveller Communities in the context of ethnic and spatial premiums: 'paying the price' for other people's choices. Journal of Poverty and Social Justice, 27 (1). pp. 61-78. ISSN1759-8273

Green, P., & Grewcock, M. (2002). The war against illegal immigration: State crime and the construction of a European identity. *Current Issues in Criminal Justice*, *14*(1), 87-101.

Han, C. 2012. Life in debt: times of care and violence in neoliberal Chile. Berkeley: University of California
Press

Hoare, R. (2014) The View from the Traveller Site: Post-nomadic Subjects and the Material Relations of Permanent Temporary Dwelling. Opticon1826, (16): 18, pp. 1-16, DOI: http://dx.doi.org/10.5334/opt.bz

Hills, J. (2012) Getting the measure of fuel poverty: Final Report of the Fuel Poverty Review, London: Centre for Analysis of Social Exclusion

Kundnani, A. (2007). Integrationism: The politics of anti-Muslim racism. *Race & Class*, *48*(4), 24-44.

Lévi-Strauss, C. 1983. The way of the masks. London: Jonathan Cape.

Li, S. S., Liddell, B. J., & Nickerson, A. (2016). The relationship between post-migration stress and psychological disorders in refugees and asylum seekers. *Current Psychiatry Reports, 18*(82), 1–9.

Martínez-Hernáez, Á., & Bekele, D. (2023). Structural competency in epidemiological research: What's feasible, what's tricky, and the benefits of a 'structural turn.' *Global Public Health*, *18*(1). https://doi.org/10.1080/17441692.2023.2164903

McGowan et al. (2021) Examining the effectiveness of place-based interventions to improve public health and reduce health inequalities: an umbrella review. *BMC Public Health,* 21:1888

Bialakowsky, A. L., Rosendo, E., Crudi, R., Zagami, M., Reynals, C., López, A. L., & Haimovici, N. (2006). La violencia del método institucional en el continuum de exclusión-extinción social [The violence of the institutional method in the continuum of social exclusion-extinction]. Subjetividad y Procesos Cognitivos, 9, 69–91. https://www.redalyc.org/comocitar.oa?id=339630248005

Mbembe, A. (2020). Necropolitics. Duke University Press.

Mbembe, A. (2003). Necropolitics Public Culture, 15 (1) 11–40. DOI: https://doi. org/10.1215/08992363-15-1-11.

Neuner, F., Kurreck, S., Ruf, M., Odenwald, M., Elbert, T., & Schauer, M. (2010). Can asylum-seekers with posttraumatic stress disorder be successfully treated? A randomized controlled pilot study. *Cognitive Behaviour Therapy, 39*(2), 81–91.

O'Neil, S., Gleeson, C., Torney, D. et al., (2022: 42-43) Environmental Justice in Ireland: Key dimensions of environmental and climate injustice experienced by vulnerable and marginalised Communities, Dublin: Dublin City University

Petrescu-Mag, RU., Petrescu, DC., Oroian JG., Safirescu, OC and Bican-Bris, N (2016) Environmental Equity through Negotiation: A Case-Study on Urban Landfills and the Roma Community, Int. J. Environ. Res. Public Health 13, 591; doi:10.3390/ijerph13060591

Roosvall, A. (2017) The mediated politics of place and people: picturing the 'contested place-making' of Irish Travellers at Dale Farm, Social Identities, 23:3, 343-359. doi: 10.1080/13504630.2016.1271738

Sakdapolrak P. Water Related Health Risk, Social Vulnerability and Pierre Bourdieu. In: Warner K (eds.) Perspectives on Social Vulnerability. Bonn: UNU- EHS; 2007. p. 50-59.

Samanani, F and Johannes L. (2019) 2023. "House and home". In The Open Encyclopedia of Anthropology, edited by Felix Stein. Facsimile of the first edition in The Cambridge Encyclopedia of Anthropology.
Online: http://doi.org/10.29164/19home

Silove, D., Steel, Z., Suslijk, I., Frommer, N., Loneragan, C., & Chey, T. (2007). The impact of the refugee decision on the trajectory of PTSD, anxiety, and depressive symptoms among asylum seekers: A longitudinal study. *American Journal of Disaster Medicine, 2*(6), 321–329.

Solomos, J. (1993). *Race and racism in Britain*. Springer Nature.

Steel, Z., Frommer, N., & Silove, D. (2004). Part I—The mental health impacts of migration: The law and its effects: Failing to understand: Refugee determination and the traumatized applicant. *International Journal of Law and Psychiatry, 27*(6), 511–528.

Teodorescu, D. S., Heir, T., Hauff, E., Wentzel-Larsen, T., & Lien, L. (2012). Mental health problems and post-migration stress among multi-traumatized refugees attending outpatient clinics upon resettlement to Norway. *Scandinavian Journal of Psychology, 53*(4), 316–332.

Tribe, R. (2002). Mental health of refugees and asylum-seekers. *Advances in psychiatric treatment*, *8*(4), 240-247

van Baar, H. (2017) Evictability and the Biopolitical Bordering of Europe. *Antipode*, 49: 212–230. doi: 10.1111/anti.12260.