



An interdisciplinary series examining how advocacy shapes everyday care and becomes embedded in research on medicine and global health—connecting perspectives across the Global South and Global North.

Jointly organised by the Program on Medical History, Ethics & Politics (MHEP), Faculty of Medicine, American University of Beirut (AUB), and the Medical Anthropology Research Center (MARC), Department of Anthropology, Philosophy and Social Work, Rovira i Virgili University (URV). Coordinated by Joelle Abi-Rached (Associate Professor of Medicine, AUB) and Fernando Vidal (ICREA Research Professor, MARC-URV).

TUESDAY, NOVEMBER 11, 2025

Anne Kveim Lie and Jeremy Greene

GLOBAL HISTORIES OF SOCIAL MEDICINE: USABLE PASTS FOR AN UNTENABLE PRESENT

In this talk, we discuss the plural histories of social medicine as a site of practical engagement between social science, clinical care, and community health advocacy in the modern world. There is no single definition of social medicine, a vital and pragmatic field that has been invented and re-invented in many different times and places. Instead, we present its multiple origins and trajectories across very different politics and economies of health as an opportunity to explore what advocacy can mean in community health, clinical practice, and even the basic sciences of medical education. This talk draws on our recently released book, *Medicine on a Larger Scale: Global Histories of Social Medicine* (Cambridge University Press, 2025), co-edited with Warwick Anderson, which weaves together a variety of intersecting narratives of social medicine and health advocacy in colonial and postcolonial contexts, involving authors, actors, and analytics from around the world. Social medicine has often been marginalized in (and sometimes opposed to) biomedical systems, but we argue that it must also be understood as a critique of medicine from within, or as an embedded advocacy by those actors within the medical profession who emphasize the ineradicable relevance of the social world in medical education, research, practice, and policy. In a world of widening global health inequalities and depleted public health services, we need a revived social medicine more than ever; we offer a usable past for social medicine in order to imagine alternate futures from this alarming and oppressive moment.

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