

The Social Sciences as an Opening to the World

Statement for the Nomis Award

The social sciences have in common with the natural sciences the primary ambition to understand the world – the physical world, populated with planets and atoms, cells and genes, environments and epidemics, for the latter, and the human world populated with men and women, institutions and artefacts, values and affects, for the former. Having moved in my professional life from one domain, that of clinical medicine and public health, to the other, that of anthropology and sociology, I have always been interested in the similarities and differences between these disciplines as well as in the conversations and interactions that could arise from their contact. The Institute for Advanced Study being one of the rare places worldwide where physicists and biologists mix with historians and philosophers, I have the opportunity to explore these comparisons and connections. Indeed, whereas natural scientists generally employ deductive reasoning in order to establish general laws through experiments, social scientists proceed most of the time via inductive methods resorting to observation so as to uncover specific facts that give birth to theoretical interpretations. But the confrontation between these epistemologies and the discussion resulting from it is always enriching as both social sciences and natural sciences share a common ground: critical thinking, that is, an attitude to the world based on the questioning and challenging of self-evidences.

My passage from one domain to the other – from being a physician to being a social scientist – might seem unusual but it is probably not so difficult to account for. My vocation or, more modestly, my decision to study medicine dates back to the 1971 Bangladesh Liberation War, which is the first conflict whose terrible massacres were internationally broadcasted on television, generating a global wave of emotion among Western publics which contrasted with the lack of reaction of their governments. Like many, I was profoundly shocked by these appalling images and horrific narratives, and I somewhat naively thought that by becoming a medical doctor I would be able to intervene in similar situations. Ten years later, having started to practice in Paris university hospitals, it was by chance that I learned from a friend that in Calcutta, which is today renamed Kolkata, the so-called Home for Dying Destitutes had no physician, and that volunteers were welcome. The coincidence between my initial concern about Bangladesh and this opportunity to go to the neighboring Bengal was conspicuous, as if things had all come a full circle. A few weeks later, I took the cheapest flight to India – which had probably also the longest duration since it took me more than 48 hours to reach my final destination. Upon my arrival, I went to the hospice, which was located in a former Hindu temple and run by the Missionaries of Charity, and I began to work in a rudimentary setting where I

was in charge of 100 patients. This was my first experience of the Third World, in one of the direst contexts. It was instructive in various ways. First, I encountered cultural differences which extremely impressed me. Second, I discovered depths of social inequality that I had never imagined. Finally, I understood that in these circumstances empathy was not sufficient and could even become quite problematic when it was disconnected from a concern for social justice. The three elements were determining for my later turn to anthropology and sociology as well as my interest in moral and political issues, although I did not realize it at the time.

In the following years, while pursuing my medical career in Tunisia, where I developed a program of prevention of the main killer of adolescents and youths, rheumatic heart disease, and later in France, where I joined a department of internal medicine and infectious diseases specialized in the treatment of HIV, I embarked on the study of the social sciences. Two books played an important role in my incipient intellectual formation in a domain that was then entirely new to me. In Claude Lévi-Strauss's memoir *Tristes Tropiques*, I discovered cultural realities which, albeit apparently exotic, were made intelligible. In Pierre Bourdieu's study *Distinction*, I found clues to apprehend the mechanisms of inequalities where they are the most obscured, because they are taken for granted. The former opened my eyes to social anthropology and the latter to critical sociology. But another author later became an important source of inspiration for me: Michel Foucault, whose books on the archeology of knowledge, the birth of the clinic, the discipline of bodies and the regulation of populations illuminated several of my research projects. Indeed, not surprisingly, my early incursion into the social sciences focused on medical issues: infantile lead poisoning in France, urban health in Senegal, maternal mortality in Ecuador, and the AIDS epidemic in South Africa. Despite the geographical distance and the thematic diversity, the common thread was the inequality of lives, that is, the disparity in the way human beings are being treated by the society to which they belong or in which they have found refuge. This central preoccupation led me to be increasingly interested in the interface between moral and political questions, which I explored from two symmetrical and even opposed perspectives: the humanitarian government of the poor, the unemployed, the asylum seekers, the undocumented migrants, the victims of natural disasters and wars; and the punitive state through a study of policing, the justice and prison systems; in other words, compassion and repression. On both sides, inequality is manifest, although in distinct ways, in the treatment of human beings, whether one wants to assist or repress them. Anthropology and sociology therefore offer unique ways to approach some of the most crucial realities of our world.

Among their numerous methods, one stands out as paradigmatic: ethnography. It consists in spending a long period of time with the group, within the institution, or simply in the place one wants

to study, so as to become more or less part of it, to grasp the worldview, norms, values and practices of those who belong there, to gain their trust as well as to feel sufficiently self-confident, and eventually to be able to translate the empirical material thus collected into theoretical propositions. Ethnography has long been associated with isolated peoples, rural villages and urban neighborhoods, but it is also pertinent for the observation of hospitals, research laboratories, religious movements, political parties, national parks and, as a matter of fact, any social world. The immersion in these various social worlds leads to a progressive familiarity: what initially seemed strange or irrational comes to make sense from the perspective of those who inhabit them. The point is not to judge but to comprehend, following Spinoza's luminous precept: "not to mock, lament or execrate, but to understand human actions." Some might think that such an approach would lead to relativism. It does in a certain way, because it acknowledges the obvious existence of multiple systems of thought and prevents one from seeing things only from one's own viewpoint – in other words, from ethnocentrism. But it does not in another way, because it obliges one to think further and deeper phenomena that are generally taken for granted. In this sense, the social sciences provide an opening to the world that is all the more necessary in a time when many of the moral, political and even cognitive references which were thought to be shared across the globe are increasingly threatened, that is, in a time of crisis.

Didier Fassin, September 2018