

27-28 Oct 2022

# Faith in Immunity

Religion, COVID-19 Vaccines, and Structures of Trust



27-28 October 2022 | Asia Research Institute, National University of Singapore

COVID-19 vaccines, with suspicions and preoccupations around their safety, their substances and their implicit moral implications, have been at the center of debates across Asian societies and their diverse religious, non-religious and spiritual communities. In media representation, vaccine hesitancy is often discussed as the direct result of irrationality, ignorance, the malicious influence of anti-modern religious leaders, or the misinformation campaigns. This discourse is dominated by Western and particularly American voices, representing religious and spiritual communities as the bulk of "anti-vaxxers" demanding religious exemptions to vaccine mandates. Yet to understand the mechanisms regulating "faith in immunity," scholars need to peel beyond this binary discourse to interrogate the complex interplay between COVID immunity and pre-existing structures of trust, cosmologies of protection, and epistemologies of healing. What kinds of community relations, power structures, spiritual inclinations and influential authorities (religious, governmental, biomedical, etc.) lead people to trust or not trust COVID vaccines and information about it? How are COVID vaccines understood, accepted, or supplemented by Asian communities of practice? How are other concepts of immunity mobilized and given authority based on pre-existing structures of trust?

This workshop interrogates notions of immunity, focusing on the ways in which it is also culturally constructed and socially shaped through processes and practices that involve the intertwined spheres of cosmology, medicine, ritual and health. Through the concepts of "faith in immunity" and "structures of trust," this workshop will explore the different conceptualizations of personal and collective responsibility towards COVID-19 resistance tracing the forms of epistemological authority that come from collective religious, non-religious, and spiritual traditions in Asia and globally. The themes we aim to explore include the following:

- Definitions and conceptualizations of immunity and protection mobilized around COVID-19 including in traditional and plural medicine
- The role of religious leaders, religious authorities, and ritual communities in promoting, distributing, or discouraging COVID vaccines, and defining what constitutes a COVID vaccine
- Ideas about individual and collective responsibility relevant to vaccination and their connection to religiomoral values
- Entanglements and/or conflicts of religious and secular epistemic authority in relation to COVID vaccines and their material components
- Connections between vaccine and ritual practice
- The sensory engagement of the biological, biomoral, gendered, and ritual body in the achievement of the aspired immunity from COVID contagion

#### **WORKSHOP CONVENORS**

Dr Emily Hertzman Dr Ashawari Chaudhuri Dr Erica Larson Dr Carola E. Lorea

**SECRETARIAT** 

#### Ms Valerie Yeo

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Image Credits | Quirky paraphernalia: Shieh showing his handmade 'Hell Covid-19 Vaccine' set for the Hungry Ghost Festival at his shop in Taman Ehsan Jaya, Johor Baru. He came up with the idea after reading heart-wrenching recollections of those who lost their loved ones before they could get inoculated. — THOMAS YONG/The Star https://www.thestar.com.my/news/nation/2021/08/18/spirits-can-get-their-jab-too

#### **PROGRAM AT-A-GLANCE**

DATE	TIME (SGT)	PANEL SESSION
27 Oct 2022 (Thu)	09:30 – 09:50	WELCOME & INTRODUCTORY REMARKS
	09:50 – 11:40	PANEL 1 – PUBLIC HEALTH, GOVERNMENTALITY, & BIOPOWER
	13:30 – 15:20	PANEL 2 – VIRAL IMMUNITY IN AYURVEDA NATUROPATHY
	16:00 – 17:10	PANEL 3 – PREVENTION & VACCINATION IN ASIAN RELIGIOUS & MEDICAL TRADITIONS
28 Oct 2022 (Fri)	16:00 – 17:30	PANEL 4 – RELIGION & POLITICS OF VACCINATION
	19:30 – 21:00	PANEL 5 – COMPETING NARRATIVES & THE QUESTION OF TRUST
	21:00 – 21:15	CLOSING REMARKS

Each panel of the workshop will NOT be a presentation by the author, but instead be a discussion of that paper, with the following time format:

- 10 min commentary by the discussant
- 5 min response from author
- 5 min general discussion

#### 27 OCTOBER 2022 • THURSDAY

09:30 - 09:50	WELCOME & INTRODUCTORY REMARKS	
	Emily Hertzman   National University of Singapore  Ashawari Chaudhuri   Cornell University, USA  Erica Larson   National University of Singapore  Carola E. Lorea   National University of Singapore	
09:50 - 11:40	PANEL 1 – PUBLIC HEALTH, GOVERNMENTALITY, & BIOPOWER	
Chairperson	Ashawari Chaudhuri   Cornell University, USA	
09:50	Discussant  Xuanxuan Tan  Chinese University of Hong Kong	The Responsible and Moral 'Subjects' and Intersecting Structures of Trust: Contextualising Vaccine Hesitancy within Notions of Health/Illness, Risk, and Immunity Rizza Kaye C. Cases   University of the Philippines Diliman Bubbles Beverly N. Asor   University of the Philippines Diliman Rossine Lyandre Yao C. Fallorina   University of the Philippines Diliman
10:10	Discussant  Rizza Kaye C. Cases  University of the Philippines Diliman	Building National Identity via Immunity: The Politics of COVID-19 Vaccination Campaign in China <b>Xuanxuan Tan</b>   The Chinese University of Hong Kong
10:30	Discussant  Najmah  Sriwijaya University, Indonesia & Monash University, Australia	Haram Vaccine, Self-nonself Narratives, and Immunocompromised Immunity in Indonesia  Dimas Iqbal Romadhon   University of Washington, USA
10:50	Discussant  Elizabeth Elliott  National University of Singapore	Taming the 'Other' during the Pandemic: A Case Study of Vaccine Governmentality in India  Malini Bhattacharjee   Azim Premji University, India
11:10	QUESTIONS & ANSWERS	
11:40	END OF PANEL	

13:30 – 15:20	PANEL 2 – VIRAL IMMUNITY AND MULTIPLE MEDICAL KNOWLEDGES	
Chairperson	Carola E. Lorea   National University of Singapore	
13:30	Discussant Inaka S. Kartika Universitas Gadjah Mada, Indonesia	Faith and/in Immunity: The Mutually Enriching Relationship in Naturopathy  Rajiv George Aricat   Indian Institute of Management Ranchi, India
13:50	Discussant  Ashawari Chaudhuri  Cornell University, USA	Ayurveda, Vaccination and Buddhism: Intersecting Paths to COVID-19 Immunity in Urban Sri Lanka  Catherine West   Deakin University, Australia  Kanchana Dodan Godage   The Open University of Sri Lanka
14:10	Discussant  Dimas Iqbal  Romadhon  University of Washington, USA	From COVID-19 Vaccine Hesitancy to Vaccine Acceptance in South Sumatra, Indonesia  Najmah   Sriwijaya University, Indonesia & Monash University, Australia  Kusnan   I-Bantu, Indonesia  Sharyn Graham Davies   Monash University, Australia
14:30	Discussant  Catherine West  Deakin University, Australia	The Concept of Immunity in Ayurveda  Ashawari Chaudhuri   Cornell University, USA
14:50	QUESTIONS & ANSWERS	
15:20	END OF PANEL	

16:00 – 17:30	PANEL 3 – PREVENTION & VACCINATION IN ASIAN RELIGIOUS & MEDICAL TRADITIONS	
Chairperson	Emily Hertzman   National University of Singapore	
16:00	Discussant  Carola Lorea  National University of Singapore	Defying Disease, Deifying Disease: Vaccination, Immunity, and Ritual among Devotees of Goddess Sitala  Deepsikha Dasgupta   South Asian University, India
16:20	Discussant  Rajiv George Aricat  Indian Institute of  Management Ranchi, India	Braiding Western and Indigenous Healing Knowledge to Prevent COVID-19: Ethnographic Approach in Muslim Kejawen Youth in Yogyakarta, Indonesia  Inaka S. Kartika   Universitas Gadjah Mada, Indonesia  Antonia Tungel   Albert-Ludwigs-Universität Freiburg, Germany
16:40	Discussant  Deepsikha Dasgupta  South Asian University, India	A Sonic Vaccine for a White-Collar Disease: Matua Approaches to COVID-19 Immunity, Rural Pride, and Sonic-Sacred Epistemologies of Healing  Carola E. Lorea   National University of Singapore
17:00	QUESTIONS & ANSWERS	
17:30	END OF DAY 1	

#### 28 OCTOBER 2022 • FRIDAY

16:00 – 17:10	PANEL 4 – RELIGION & THE POLITICS OF VACCINATION	
Chairperson	Erica Larson   National University of Singapore	
16:00	Discussant  Barbara Gerke  University of Vienna, Austria	'I Don't Know Anybody Who Said, "Oh Great, Let's Get Measles": Does Religion Influence Responses to Childhood Vaccinations (MMRV) among Orthodox Jews? Reflections Following the 2018-19 Measles Outbreaks in Jerusalem  Ben Kasstan   Bristol University, UK
16:20	Discussant  Ben Kasstan  Bristol University, UK	Sowa Rigpa Infectious Disease Etiologies, Buddhist Rituals, and COVID-19 Vaccination Compliance  Barbara Gerke   University of Vienna, Austria
16:40	QUESTIONS & ANSWERS	
17:10	END OF SESSION	

19:30 – 21:00	PANEL 5 – COMPETING NARRATIVES & THE QUESTION OF TRUST	
Chairperson	Natalie Lang   University of Göttingen, Germany	
19:30	Discussant Inayat Ali University of Vienna, Austria Antiviral Viralities: Navigating Rumor, Shortage, and Drug Efficacies in Russia Tatiana Chudakova   Tufts University, USA	
19:50	Discussant Societal Memory Invoked: COVID-19 and Vaccination at the Intersections of Multiple Competing Narratives in Pakistan Tufts University, USA Inayat Ali   University of Vienna, Austria	
20:10	Discussant  Malini Bhattacharjee  Central Luzon State University, Philippines  Gradients of Trust in Vaccines: Embodied Discrimination, Religion, and Relational Care in Laos  Elizabeth Elliott   National University of Singapore	
20:30	QUESTIONS & ANSWERS	
21:00 – 21:15	CLOSING REMARKS  Emily Hertzman   National University of Singapore  Ashawari Chaudhuri   National University of Singapore  Erica Larson   National University of Singapore  Carola E. Lorea   National University of Singapore	
21:15	END OF DAY 2	

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## The Responsible and Moral 'Subjects' and Intersecting Structures of Trust: Contextualising Vaccine Hesitancy within Notions of Health/Illness, Risk, and Immunity

#### Rizza Kaye C. Cases

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To better understand people's attitudes and practices related to COVID 19, particularly surrounding vaccination, there is a need to go beyond the discourse of vaccine hesitancy and situate such specific attitudes and practices within the larger understanding of health, illness, and immunity.

Based on survey data and qualitative interviews collected in selected communities in the Philippines, this paper seeks to examine how people define health/illness, risks, and immunity and how these definitions shape their practices surrounding health, particularly inoculation and other health management strategies against COVID 19. We argue that by embedding the specific discourses surrounding COVID 19 to the notions of health/illness as well as risks and immunity, we will be able to contextualize such discourses within the concepts of personal responsibility, governmentality, and limits of individual control over one's body. In this sense, we can then frame health as a moral good to oneself, and possibly as a duty to others. Therefore, individuals are then seen as morally (ir)responsible in relation to practices related to health and prevention of illness.

To what extent then do religious beliefs and moral justifications shape such notions and practices? How do such beliefs and moral values serve as a way to maintain the view of a morally responsible individual vis-à-vis their views and practices surrounding health management strategies against COVID 19, particularly vaccination? The paper also aims to explore if and how religious beliefs co-exist and are utilised together with trust in science and other authorities and 'experts' to consistently view oneself as responsible 'subjects' and 'citizens.'

**Rizza Kaye C. Cases** is an Assistant Professor at the Department of Sociology, College of Social Sciences and Philosophy, University of the Philippines Diliman. She obtained her PhD in Sociology and Social Research from the University of Trento, Italy in 2018. Her research interests include migration studies, sociology of health and illness, mixed-methods social network analysis, and relational and comparative sociology. She is currently one of the associate editors of *Philippine Sociological Review*.

**Bubbles Beverly Asor** is an Assistant Professor with the Department of Sociology, University of the Philippines Diliman. She received her PhD in Sociology from the National University of Singapore. Her research interests include migrant organisations, faith-based organisations, religion-migration relations, Catholic Church as a mediating structure, international migration in South Korea. She is currently the *Associate Editor of the Philippine Sociological Review* and *HanPil: Studies on Korea and the Philippines*.

**Rossine Fallorina** is a graduate student and teaching associate at the Department of Sociology, University of the Philippines Diliman. He is the managing editor of the *Philippine Sociological Review*. His current research explores the role of social capital within information flows.

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### Building National Identity via Immunity: The Politics of COVID-19 Vaccination Campaign in China

#### **Xuanxuan Tan**

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As China grapples with COVID-19, the Chinese public has adopted various attitudes toward the government's rigid epidemic prevention and control measures. One popular response involves avoiding "burdening the state (不要给国家添乱)." People with this attitude emphasize the importance of collectivism, trust in the national government, and obedience to its epidemic prevention and control measures. This research employs genealogical, thematic, and critical discourse analysis to examine how "not burdening the state" shapes vaccine implementation and the roles of vaccines and immunity in China's response to COVID-19. It analyzes data generated from semi-structured interviews, online discussions, media content, news reports, and policy documents related to the vaccination campaign. It finds that vaccination is regarded as an obligation for individuals, the collective, and the nation. Knowledge about vaccines and herd immunity and discussions about the vaccination campaign are associated with discourses about safety and biopolitics. This connection further contributes to the building of national identity and vaccine nationalism. This study argues that vaccination, vaccine motivations, and vaccine knowledge related to "not burdening the state" help elucidate the politics of immunity in China during COVID-19. Vaccination, vaccine knowledge, and the vaccine itself facilitate national identity and vaccine nationalism. Immunity becomes a means of strengthening and imagining "us" by awakening the individual's obligation to the collective and the state, and rallying "us" with or without identifying "them."

**Xuanxuan Tan** is a PhD candidate from the Chinese University of Hong Kong. Her research project focuses on China's pandemic responses and examines the nexus among anti-pandemic technologies, culture, and power. This project traces the network of anti-epidemic technologies, knowledge, power, bodies, and media representations. It intends to map out the complex influences of anti-epidemic technologies on society, politics, and culture and illustrates how to study anti-epidemic technologies and pandemics from a cultural perspective. Xuanxuan's broader research interests focus on nationalism, affect, and activism in contemporary China, especially as it relates to fandom, memorials, and biomedicines. She holds a Master's degree in journalism and communication.

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### Haram Vaccine, Self-nonself Narratives, and Immunocompromised Immunity in Indonesia

#### **Dimas Iqbal Romadhon**

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In 2017-2018, the Indonesian government held a nation-wide mass vaccination in response to measles and rubella (MR) outbreaks in the country. The MR vaccines were bought from the Serum Institute of India. However, in the middle of the campaign, the Indonesian Ulama Council (*MUI*) issued an edict (*fatwa*) ruling the vaccine as contaminated with impermissible (*haram*) substances while still allowing the vaccination to continue due to public health emergency status. This *fatwa* led to uncertainties among parents and local governments. In Aceh, the only province adopting *sharia* law in Indonesia, the provincial government banned the vaccination for one month. When eventually local *ulama* in Aceh recommended the province to continue the vaccination, parents still refused to participate in the vaccination. By the end of the campaign, Aceh only recorded seven percent coverage, the lowest in the nation. The campaign itself failed to reach the target of 95% coverage. Ethnographic dataset for this research is collected through observations and interviews with government officials, *ulama*, physicians, and parents in Jakarta and Banda Aceh, Indonesia, between 2018 and 2020. Engaging with various perspectives from critical security studies, this paper explains how vaccine refusal narratives differ at every level of social institutions, showing the complexity of public health reason and authority.

**Dimas Iqbal Romadhon** is a PhD candidate in the Department of Anthropology and a teaching fellow in Comparative History of Ideas Department at the University of Washington, Seattle. His research interests include outbreak and immunity narratives, critical security studies, and medical and environmental histories, with particular area Indonesia. His dissertation examines how various actors engage in processes to compromise state health security programs in Indonesia. He previously researched the history of leprosy stigma in Indonesia.

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### Taming the 'Other' during the Pandemic: A Case Study of Vaccine Governmentality in India

#### Malini Bhattacharjee

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In June 2021, the Government of India launched a vaccination awareness drive in the midst of the Covid 19 pandemic, named 'Jaan Hai to Jaahan Hai', to fight vaccine hesitancy amongst religious minorities. The drive was kickstarted by the Ministry of Minority Affairs in Uttar Pradesh and was directed towards raising awareness about Covid 19 vaccination and addressing apprehensions regarding the same as it was felt that a large section of religious minority communities was averse to immunization. Several social, cultural and educational institutions were identified as allies in this project. Given that the modern Indian state has always been ambivalent in partnering with religious institutions in resolving developmental issues, this may come across as a refreshingly surprising move. A closer examination of this initiative however reveals a classic symptom of governmentality where the content and terms of engagement were decided unilaterally by the secular epistemic authority, in this case the state and its representatives and allies, without paying attention to the grounds of apprehensions that people were manifesting, in the name of common good. There has also not been any effort towards adopting consultative approaches with the targeted audience that could have led to more creative brainstorming and possibly more sustainable solutions to the problem of immunization. The campaign in fact, led to the furthering of the stigmatization of the minority communities who were imagined as 'disloyal', 'irrational' and 'backward thinking' groups and even the 'source of the problem', who needed to be coerced into thinking 'rationally'. The proposed paper will use the 'Jaan Hai to Jahaan hai' initiative as a case, to reflect on whether secular authorities are genuinely interested in engaging with religious institutions or whether the 'turn to religion' in the policy and development domain is merely tactical and convenience driven? More importantly, can religious subjectivities survive or successfully dissent to the onslaught of secular authorities in the midst of public health emergencies like Covid 19? The paper will rely on evidence gathered through some key respondents drawn from religious organizations, government representatives and primary and secondary literature relevant to the topic.

**Malini Bhattacharjee** is Associate Professor at Azim Premji University, Bangalore. She is a political scientist by training and is interested in understanding the interplay between religion and politics and religion and development. She also interested in the politics of humanitarianism particularly in the context of disasters and the institution of philanthropy in South Asia. Her research and teaching interests are guided by an attempt to examine the limitations of the 'secular' and the repercussions of the political project of secularism to suppress and derecognize the non-secular experience.

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### Faith and/in Immunity: The Mutually Enriching Relationship in Naturopathy

#### **Rajiv George Aricat**

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There have been calls from sociologists to explore the impact of Complementary and Alternative Medicine (CAM) approaches on the general population at micro levels. A tendency to emphasize the commonalities of different approaches within CAM has hampered a micro level analysis of the impact and spread of individual systems. As a result, discourses and truth claims of individual medical systems have received scant attention. This paper addressed this research gaps by critically engaging with the discourses that sustained naturopathy, a CAM approach that has received wide attention in the recent years. Based on ethnography among a group of naturopaths in South India, supplemented by interviews and a Critical Discourse Analysis of writings and lectures of experts, the study unpacked truth claims, restrictive ideologies and essentialized notions that provided legitimacy to this medical system. The study also explored how naturopathy doctors and practitioners related to and located themselves within the discourses of this medical system. Four themes were found to be salient in the discourse and practice of naturopathy among the respondents: (a) the interplay between biomedicine and naturopathy; (b) the resilience of naturopathy explained in terms of individual agency; (c) restrictive discourses and metaphors in naturopathy; and, (d) the intertwining of trust and faith in vaccine hesitancy. The study highlights the role played by naturopathy in challenging the certainties held by biomedicine, which is supported by the global capital on the one hand, and the governance and regulatory structures that are in alignment with the interests of the global capital, on the other. A focus on both discourse and practice helped revisit the contradictions inherent in the categories of the 'normal' and the 'pathological'.

**Rajiv Aricat** is an Assistant Professor in General Management in Indian Institute of Management Ranchi. He completed Doctoral studies in Communications from Nanyang Technological University, Singapore in 2016. His research interests are at the intersections of ICT adoption, social and economic development and migration. Rajiv follows qualitative methods including Critical Discourse Analysis (CDA), ethnography and interviews in his research. He has published in a number of reputed journals including *International Journal of Communication, Journal of Information Technology & Politics* and *Geographical Research*.

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### Ayurveda, Vaccination and Buddhism: Intersecting Paths to COVID-19 Immunity in Urban Sri Lanka

#### **Catherine West**

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#### **Kanchana Dodan Godage**

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This paper traces practices and notions of immunity that urban Sinhala Buddhists have employed in their quest to stay safe and mitigate suffering during the pandemic. Buddhist temples in Sri Lanka's capital Colombo have been an important source of information, practical support, and comfort. Having conducted anthropological field work in Narahenpita, an inner-city suburb, in 2016 and 2017, the authors have gathered comparable data in 2022. Initial interviews, participant observation and media reports suggest that the pandemic generated potentially conflicting orientations to protection from COVID-19. For example, devotees sought Western and Ayurvedic medicines; looked to secular and religious political leaders to control the public health situation; sought succour through physical and metaphysical means; acted on indigenous and foreign knowledge; and responded individually and collectively. Colombo's Buddhist temples and monks were often instrumental in these negotiations. For example, one Narahenpita temple, Sri Narada, provided food, volunteers, and promotion for a nearby vaccination centre, as well as distributing Ayurvedic immunity-boosting tonics to devotees who did not have the means to purchase these treatments. As Nichter and Nordstrom (1989) observe, in Sinhalese culture, health is a pluralistic, social, and interactive process, conditioned by the individual's distinctive socio-physical constitution. We show evidence of changes to local and national structures of trust in the field site. Through this we identify and articulate intersecting pathways that lead to a sense of immunity. The authors argue that the pandemic has bolstered a long-standing zone of plurality and mediation: a space typified by dynamic interaction between a desire for metaphysical protection, and the material steps that an individual or community takes.

**Catherine West** is an Anthropologist who recently completed a PhD at Deakin University, Australia. Her thesis looked at the post-independence transformation of Colombo, Sri Lanka, in terms of the urban environment, social formation and religion. Catherine shares her time between anthropological research, consulting in the social services sector, and running a small French bistro.

**Kanchana Dodan Godage** is a Political Scientist currently teaching at the Open University of Sri Lanka, Nawala, Colombo. She is interested in the electoral process, levels of government, and exploring how ethnic diversities interact and influence different layers of policy making and implementation. She received a BA and an MA in Political Science from the University of Peradeniya, Sri Lanka. She also has an MA in Public Policy and Governance from the North South University, Bangladesh.

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### From COVID-19 Vaccine Hesitancy to Vaccine Acceptance in South Sumatra, Indonesia

#### Najmah

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#### **Sharyn Graham Davies**

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Trying to administer COVID-19 vaccines to an archipelagic targeted population of 208million people spread over 6000 islands is no small task. Indonesia is, however, one of five countries with the highest coverage of COVID-19 vaccines (Cabinet Secretary of The Republic of Indonesia, 2022). As of 22th May 2022, Indonesia had administered first vaccines to 95% of it citizens. Further 80% of citizens had received a second vaccine and 20% a third (Covid-19 Task Force, 2022).

This high rate of vaccine uptake is in stark contrast to early attempts as vaccination where hesitancy was high. Our research explores what socio-economic, political and religious factors were at play to result is such high uptake of vaccines. We conducted thematic analysis of online news review related to COVID-19, social media postings made by government sectors, and by conducting ethnography and interviews with 40 women and10 health workers and policy makers in South Sumatra, Indonesia to understand this increase.

We found a number of factors responsible for this increase in update. First was that the responsibility of meeting vaccine targets was shared about different parties. For instance the Ministry of Health was responsible for meeting a 60%, the Indonesian National Military (TNI) for 20% and the Indonesian National Police the remaining 20%. Indeed, police military personals and local key leaders accompanied health workers in undertaking COVID-19 vaccination. Second, citizens were provided with rewards and punishments. For instance, if you accessed COVID-19 vaccines, you could travel by plane, and land transportation between regions. Small gifts also were provided such as kg oil, 5kg rice or winning a lucky draw for a motorcycle. Third, there was a silencing of hardline Islamic groups, particularly about the halal issue of COVID-19 vaccines. Fourth, there was easy access to COVID-19 vaccines, including in schools, mosques and neighbourhood centres. Fifth, there was vaccine coercion, vaccine obligations and politics. In the government institution and private sectors and transportation, people were required to show proof of vaccination. In transportation, you will be identified vaccinated or unvaccinated driver in online systems. However, there is lack of responsibilities for side effect of COVID-19 vaccines. In schools, parents need to sign a letter to take their own responsibilities if their children suffer from side effect or even passed away after getting COVID-19 vaccines.

Najmah is a lecturer in the Public Health Faculty of Sriwijaya University, South Sumatra, Indonesia and adjunct research fellow in Monash University. Najmah was awarded a prestigious New Zealand Scholarship for her doctoral studies and graduated from Auckland University of Technology in 2020. Najmah also has degrees from the University of Melbourne, where she studied with an AusAID Partnership Scholarship, and her bachelor degree in Sriwijaya University (Unsri), South Sumatra.Najmah's research interest is HIV, women and COVID-19. (email: najem240783@yahoo.com/najmah@fkm.unsri.ac.id/instagram: najmah.usman.7)

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**Kusnan** is a graduation from International Student at School of Graduates and Professional Studies in INCEIF, Malaysia. Kusnan Has been joined and presented his working paper in some international conferences in Islamic Economics and Finance. Kusnan is interested in various research fields including Islamic finance, Islamic studies, Shadow banking, politics and humanities and currently completing several papers to be published in journals or to be presented in international conferences.

Sharyn Graham Davies is Director of the Herb Feith Indonesia Engagement Centre and Associate Professor in the School of Languages, Literatures, Cultures and Linguistics at Monash University in Melbourne, Australia. She received her PhD from the University of Western Australia (Anthropology and Asian Studies) and prior to her appointment at Monash was at Auckland University of Technology (AUT) in New Zealand. Sharyn has held visiting fellowships at Cambridge, Yale, Sydney, Peking and Airlangga universities, and has been awarded Fulbright, Leverhulme and Marsden funding. Sharyn is recognised internationally as an expert in the field of Indonesian Studies and for her contributions to the study of gender, sexuality, policing, social media, and moral surveillance.

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#### The Concept of Immunity in Ayurveda

#### Ashawari Chaudhuri

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In Ayurveda, the body is not an assemblage of organs, bones, blood, and muscles. The body is biomoral--- on the one hand, it is a microcosm of the environment and is made of air, water, earth, fire; and on the other, it is constituted by the practices and life history of a person. "Immunity", therefore, is a lifelong process that needs to be built over time. Diseases in Ayurveda are categorized as *nija* (intrinsic causes), *agantuja* (extrinsic causes), and *manasa* (psychosomatic) (Pandhkar and Sachdeva, 2020). Sushruta, in the 7<sup>th</sup> century BC, mentioned *aupsargika* (infectious) diseases. Contemporary practitioners and scholars agree that in order to address the COVID-19, the *doshas* (humors) and *agni* (fire) have to be brought back to their pre-COVID stage, and it is an integration of "preventive, promotive, curative, and rehabilitative approaches" that will be the most impactful to address the disease (Tillu et al., 2020: 96). Since the beginning of the pandemic, there have been efforts by practitioners of Ayurveda to cure a patient completely through Ayurvedic medicines without the intervention of biomedicine. Even though both biomedicine and Ayurveda ultimately aim towards bringing the patient back to its pre-COVID health, the meanings of health and disease are significantly different in these two bodies of knowledge. For one, Ayurvedic practitioners have been more concerned about restoration of individual health than the cause of the disease. Based on interviews and fieldwork with Ayurvedic practitioners in India, this paper will explore "immunity" as a concept in texts as well as in practice, especially in the context of the pandemic.

Ashawari Chaudhuri is a Visiting Assistant Professor in the STS Department at Cornell University, USA. She is an anthropologist of the environment, science, and medicine. Her current book manuscript is a historically grounded ethnography of agricultural biotechnology in India. Along with asking what a good seed is for farmers and biotechnologists, she trace how knowledge about objects like genetically modified seeds is formed at intersections of practice, people, and time. Her next project is an inquiry into the long relation between environmental heat and the body in South Asia. She finds historically emerging meanings of words and concepts powerful. Her teaching is often grounded in questions of ethics and creative negotiations with power around practices, technologies, and ideas that acquire palimpsests of meanings over time and across place.

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### Defying Disease, Deifying Disease: Vaccination, Immunity, and Ritual among Devotees of Goddess Sitala

#### Deepsikha Dasgupta

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Vaccination, with the advent of biomedicine in India, has long been studied in tandem with the colonial commitment to exercise control over imperial subjects. It has been fraught with hesitance, acceptance, and resistance. The history of smallpox vaccine in India yields a similar trajectory which exists entangled with the Goddess Sitala- 'controller' of epidemics; and often overlooked- the role of the traditional variolators, tikadars. Despite eradication of the epidemic, faith in the goddess reigns over her devotees in a vaccinated world. The belief system remains unshaken, instead there exists accounts of rituals being adapted and adopted to absorb vaccination within the fold of the Goddess. This ethnographic study similarly argues that this plurality of understanding of the body, disease, and prophylaxis persists among Sitala devotees of Bengal even in the COVIDian age. Following Harish Naraindas (1998), I would argue first that Sitala practices should be considered as 'a 'system of knowledge' with therapeutic regiments rather than being confined to colonial historiography's rendition of her as an object of ritual. Second, I argue that the corporeal ontology of Sitala practices along with the irreducible trust in the goddess aid in sustaining trust in biomedical interventions among her devotees. While vaccine hesitancy occurred elsewhere in the region, my fieldwork among Sitala devotees over the last couple of years, led me to different story. Finally, I would argue that Sitala's place as a 'lesser' or 'lower-caste' deity, worshipped mostly by the marginalized section of the society, informs their vaccination choice. This is because folk healing serves as an active process to counter 'relative injustice' (Ferrari 2010) to secure respite at an individual and social level.

**Deepsikha Dasgupta** is a postgraduate student of Sociology at the South Asian University, New Delhi. Her research interests include medical anthropology, religion, cultural studies and gender. She has been engaged in working on the Goddess Sitala in Bengal for the last two years. Her dissertation work, for her undergraduate degree at Presidency University, Kolkata, has focused on the interface of COVID-19, biomedicine, alternative healing practices, and Sitala worship in West Bengal.

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### Braiding Western and Indigenous Healing Knowledge to Prevent COVID-19: Ethnographic Approach in Muslim Kejawen Youth in Yogyakarta, Indonesia

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In the hegemony of western knowledge systems, indigenous knowledge tends to be marginalized. Western scientific knowledge built a monopoly on true and valid knowledge and thereby creates a knowledge hierarchy, positioning indigenous knowledge under western knowledge. In this article, we highlight it as epistemic violence. Yet, in this paper, we would like to elucidate how western and indigenous knowledge could collaborate to create lasting benefits for human beings.

The knowledge collaboration of western medical conceptions and indigenous health practices is examined. In this framework, we work on an ethnographic case study of Muslim *kejawen* youth in Yogyakarta, Indonesia, on how they connect with more-than-human agents to protect themselves from COVID-19.

Just like indigenous practices are often dismissed as irrational and superstitious, more-than-human entities are usually not perceived as a real and agentive social force in Western scientific approaches. Yet, they navigate ideas and form understandings of the world and thus contribute to social reality, decisions and actions.

Our research participants are situated at the intersection between Muslim belief, indigenous Javanese spirituality, and modern health science, and unite scientific approaches with spiritual health practices rooted in religious and indigenous knowledge systems on health and healing.

Framed within the context of epistemic and ontological violence and aiming toward a relational ontology, this research found that more-than-human agency, non-western epistemologies, and indigenous healing practices combined with scientific achievements form an effective structure for health, and disease prevention also sensemaking in threatening and uncertain times.

**Inaka S. Kartika** is an anthropologist in-the-making with huge concerns and ongoing specialties in humanenvironment relations ontologies, renewable energies, and social justice. Inaka is studying the storytelling method through digital media and is involved in building a digital community called The Natives Life. She has been professionally active in project management with various stakeholders ranging from locals to internationals. Now, she's on a project researching sustainability housing in Freiburg, Germany.

**Antonia Tungel** is an undergraduate student of cultural anthropology and sociology in Freiburg, Germany, and is especially interested in more-than-human agency, world- and sense-making processes, and identity formation. She is currently planning an ethnographic research project on the commodification of local spiritual practices and revitalization movements and organizing a workshop on white privilege and racism.

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# A Sonic Vaccine for a White-Collar Disease: Matua Approaches to COVID-19 Immunity, Rural Pride, and Sonic-Sacred Epistemologies of Healing

#### Carola E. Lorea

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Global hegemonic narratives of the Covid pandemic dominated by biomedical protocols are counter-acted and accompanied by myriads of situated interpretations of disease and of salvation. Narratives of viral infection go hand in hand with narratives of healing and with claims of immunity, with sections of society claiming moral and epistemological superiority in the way they interpret, prevent, and contrast the viral spread. This paper, as the opening quote shows, will discuss the tales of immunity and healing that are deeply embedded in the social and religious context of the Matua community.

Members of the large, yet relatively unknown, Matua religious community believe that the Coronavirus can affect only the upper caste-class layers of society, those who sit in airconditioned offices and live in the big cities. Matua devotees, on the other hand, are predominantly part of a rural, agriculturist community inhabiting multiple fringes: the borderlands of India and Bangladesh; the peripheries of unorthodox Vaishnavism; and the social margins of untouchability.

To understand how Matua devotees responded to the impact of the Covid-19 pandemic, I have conducted phone interviews and online ethnography with Matua participants based in West Bengal, Bangladesh and the Andaman Islands. While observing and documenting religious responses to Covid-19 and ritual innovations within the Matua community, we came across insistent narratives of immunity and recurrent interpretations of the pandemic that fit into the broader onto-cosmology and sociocultural imagination of the Matua religious movement. In this paper, I discuss recurrent narratives that describe Covid as an urban-based white-collar disease that Matuas successfully prevent through a sonic vaccine – the practice of  $k\bar{l}rtan$  – and a kind of power ( $\pm sakti$ ) accumulated through physical agricultural labour.

Carola E. Lorea is Research Fellow in the Religion and Globalisation Cluster of the Asia Research Institute in National University of Singapore. She is interested in sound, Tantra, oral traditions and popular religious movements in South Asia, particularly eastern India, Bangladesh and the Andaman Islands. Her monograph Folklore, Religion and the Songs of a Bengali Madman (Brill, 2016) is the result of a four-year travel along ethnography with Baul practitioners. She was a research fellow at IIAS (Leiden), Gonda Foundation and the South Asia Institute at University of Heidelberg. She is the founding editor of the research blog CoronAsur: Religion & Covid-19. Her current book project on soundscapes of religion and displacement is focused on the Matua community and its flows of preachers, performers, religious items and ideas across the Bay of Bengal.

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### Sowa Rigpa Infectious Disease Etiologies, Buddhist Rituals, and COVID-19 Vaccination Compliance

#### **Barbara Gerke**

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Throughout the pandemic, Buddhist communities globally have shown a remarkable high acceptance rate of biomedical approaches to COVID-19, including vaccination (e.g. Álvarez Ortega 2021; Dorji and Tamang 2021). This paper is based on preliminary research on Sowa Rigpa (Tibetan medicine) and pandemic narratives in Buddhist Himalayan communities. I explore how Sowa Rigpa etiological perspectives of "contagion" interlink with Tibetan Buddhist protective practices and compliance with vaccines.

Existing scholarship emphasizes that classical medical systems (Vedic, Ayurvedic, Chinese, and Galenic) did not develop a coherent theory of contagion separate from their established etiologies of humors, elements, spirits, poisons, or environmental miasmas. Analyzing Tibetan medical texts and emerging ethnographic data from India and Bhutan on how Sowa Rigpa infectious disease etiologies have been interwoven with Vajrayana Buddhist protective rituals and amulet and therapeutic pills during the pandemic, I raise questions of how and to what end traditional medico-religious etiologies might have impacted the acceptance of COVID-19 vaccinations. In Bhutan, for example, the practice of Penden Lhamo rituals was adapted by involving the offering of SARS-CoV-2-shaped cakes and blessing COVID-19 vaccines at the airport before distribution. These rituals were organized by state monastic bodies in support of governmental vaccination campaigns (Kuyakanon & Gyeltshen 2022). In India, the Dalai Lama called for reliance on science and received his vaccine in front of cameras<sup>1</sup>; Sowa Rigpa institutions manufactured both protective amulet pills, "immune-boosters," and therapeutic formulas to treat COVID-19 symptoms.

In analyzing the interrelationships between Sowa Rigpa etiologies and ritual responses, I argue that, while general trust in religious authority certainly guided people's compliance with vaccinations, medico-religious and ritual engagements played a supportive role in these efforts due to the malleability of traditional infectious disease etiologies, in which epidemic disease-causing agents can be cosmologically explained, ritually tamed, and medically protected from/treated.

Barbara Gerke (M.Sc. Medical Anthropology and D.Phil. Social Anthropology, University of Oxford) is the PI of the Austrian Science Fund research project on "Potent Substances in Sowa Rigpa and Buddhist Rituals" at the University of Vienna. Together with Jan v.d.Valk and Sienna Craig (2020) she co-edited a Hot Spots issue on Asian medical responses to COVID-19. Her open-access monograph "Taming the Poisonous: Mercury, Toxicity, and Safety in Tibetan Medical Practice" (Heidelberg University Publishing, 2021) examines the use of refined mercury in Tibetan medicines. Her first monograph "Long Lives and Untimely Deaths" (Brill, 2012) analyses long-life rituals, as well as vitality and life-span concepts among Tibetans in the Darjeeling Hills.

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https://www.youtube.com/watch?v=51ypzc5hqpc&ab channel=DalaiLama

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'I Don't Know Anybody Who Said, "Oh Great, Let's Get Measles":

Does Religion Influence Responses to Childhood Vaccinations (MMRV) among
Orthodox Jews? Reflections Following the 2018-19 Measles Outbreaks in Jerusalem

#### Ben Kasstan

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Vaccination and religion has emerged as an issue of public health urgency and political scrutiny against the backdrop of the COVID-19 pandemic, with 'hesitancy' being framed synonymously with 'beliefs' to explain suboptimal uptake among minority populations. The question of having 'faith' in vaccination, however, is much more complex. The largest measles outbreaks in a quarter century were recorded in Israel in 2018-19 – the burden of which disproportionately affected Orthodox Jewish neighbourhoods in Jerusalem. This paper examines how Orthodox Jewish households in Jerusalem responded to the measles outbreaks in their neighbourhoods and whether they viewed childhood vaccination as a 'religious' issue. Research methods primarily consisted of 25 indepth semi-structured interviews conducted with household heads, and public health professionals. Non-vaccination was not attributed to religious 'beliefs' among the household heads in this cohort. Indicators are offered to clarify for the influence of religion in vaccine decision-making and vaccination programmes.

**Ben Kasstan** is a medical anthropologist and Vice Chancellor's Fellow based in the Centre for Health, Law & Society and the Law School. Ben's research explores how public health causes the state and minorities to encounter each other, and different ideas of protection to be negotiated. Critiquing the multiple meanings of protection has enabled Ben to offer theoretical and applied contributions to global public health policy and scholarship – specifically regarding sexual, reproductive and child health (vaccines). His research has been published in discipline leading journals, including Social Science & Medicine, Medical Anthropology Quarterly, and The Lancet (Europe). Since 2019, Ben has served as an Associate Editor at *Anthropology & Medicine Journal*, and recently joined the Editorial Board of *Humanities & Social Sciences Communications* (Nature).

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### Antiviral Viralities: Navigating Rumor, Shortage, and Drug Efficacies in Russia

#### **Tatiana Chudakova**

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This paper focuses on the social biography of the Soviet-made antiviral pharmaceutical "Arbidol" (umifenovir), used in Russia and China as a popular medication to treat influenza. Despite multiple critiques and doubts cast on its efficacy, the drug remains a popular staple of treating upper-respiratory infections in Russia. During both the 2009-2010 H1N1 epidemic, and during the COVID-19 pandemic, a shortage of the medicine on pharmacy shelves caused by its rapid bulk purchasing led to a social outcry, as well as to discussions among medical professionals and patients, and commentaries in the local and national media about the forms of political corruption underpinning the drug's production, promotion, and supply chain. Using Arbidol as a productive hinge, this paper explores the ways in which both viruses and antiviral medicines become sites of political critique and social commentary as well as theaters of state intervention into various domains of everyday life and civic activity. H1N1 in Russia, much like COVID-19 both in Russia and elsewhere, were accompanied by their share of conspiratorial thinking: about the infection's origins, purpose, potential individual and collective consequences, as well as the reasons behind the scarcity of antiviral drugs and personal protection equipment. The metropole's financial control over the production of medical supplies, the presumed effectiveness of any given medical formula, the lethality of a viral strain, and the stutters of the supply chain weave medical and political efficacies together. Rather than refuting conspiratorial thinking, this paper explores the ways in which rumors and "conspiracy" in times of social and medical crisis shift the terms on which articulations of efficacy are made possible.

**Tatiana Chudakova** is Assistant Professor in the Department of Anthropology at Tufts University. Her first book project focused on how postsocialist economies of health are shaped through the cultural politics of indigenous knowledge, the remaking of ethnoecologies, and the commodification of ethnic identities. Chudakova combines these theoretical concerns with an interest in the afterlives of Soviet scientific and state-building projects in Russia and Inner Asia. Her new book, *Mixing Medicines: Ecologies of Care in Buddhist Siberia*, follows Russia's official medical sector's attempts to reinvent itself through state-led initiatives of "medical integration" that aim to recuperate indigenous therapeutic traditions associated with the state's ethnic and religious minorities.

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### Societal Memory Invoked: COVID-19 and Vaccination at the Intersections of Multiple Competing Narratives in Pakistan

#### **Inayat Ali**

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Right from the beginning of the Expanded Program on Immunization (EPI) in 1978, vaccination has remained a highly contested phenomenon in Pakistan. On the one hand, there have been aims and efforts to vaccinate the nation; on the other hand, a growing number of parents have been choosing not to vaccinate their children while linking vaccination with politics and geopolitics in the country. Before 2011, there were several rumors and conspiracy theories surrounding vaccination, coding it as either something "good" for the government (e.g., government plans to get more funding) or as a "Western" plot to sterilize Muslim women to control their population. These rumors and conspiracy theories gained more traction after 2011, when a "fake" vaccination campaign was launched by the Central Intelligence Agency (CIA) to discover the hideout of Osama-bin-Laden. Also, people have refused to receive vaccines in favor of the "natural immunity theory," which holds that the body contains a natural immunization mechanism, and a vaccine may interrupt this process. Thus, vaccination has revealed trust and mistrust in either the vaccine or in the implementers/administrators of the vaccination programs as several vaccinators along with their escorting team have been assaulted and killed. I have argued elsewhere that these competing narratives revealing tensions have become part of "societal memory" and have resurfaced during the coronavirus pandemic, as some people have considered it a "plot" or "bioengineered" phenomenon and are highly suspicious of the COVID-19 vaccine. In this talk, I will focus on such competing narratives and will bring various socio-cultural, economic, (geo-)political and historical factors to the center stage, as these factors are affecting the uptake of the COVID-19 vaccine in Pakistan. According to the government record, by 11 May 2022, only 55% of the country's population had received the full vaccine and the remaining 45% still need to be vaccinated.

Inayat Ali PhD is a Pakistani medical anthropologist. Currently, he is In charge, Department of Public Health and Allied Sciences and Assistant Professor, and Assistant Professor in the Department of Anthropology, Fatima Jinnah Women University, Rawalpindi, Pakistan. He also has served as Assistant Professor (Visiting) at the National University of Medical Sciences, Rawalpindi, Pakistan; and as a Research Fellow at the Department of Social and Cultural Anthropology, University of Vienna, Austria. Within medical anthropology, his geographical focus is on South Asia, especially Pakistan. His PhD project studied measles and vaccination in Sindh Province, Pakistan. Using (ill-)health as analytical entry points and significantly informed by critical medical anthropology, he explores, analyzes, and illuminates the interplay between health, disease, structured disparities, geopolitics, and biopolitics. He emphasizes applied research to produce anthropological knowledge that can contribute to current world problems. His most recent work focuses on COVID-19 in Pakistan, as he is working as the Principal Investigator of the project, Exploring and Understanding the Impacts of COVID-19: A Qualitative Inquiry, approved by the National Bioethics Committee of Pakistan). Also, he has led research on COVID-19 in Sri Lanka, Bangladesh, and Nigeria. Much of that work has already been published in journals of anthropology and public health. He has authored around 50 peer and non-peer-reviewed articles on nutrition; maternal health; vaccination; and COVID-19. He is the lead editor of the book Negotiating the Pandemic: Cultural, National, and Individual Constructions of COVID-19. London: Routledge, with Robbie Davis-Floyd as co-editor, forthcoming in 2022. Also, he is single authoring his two books: (a) Contesting Measles and Vaccination: Cultural Beliefs, Structured Vulnerabilities, Mistrust, and Geo-Politics in Pakistan. London: Routledge, forthcoming in 2023; (b) Constructing the Pandemic in Pakistan: Competing Perceptions, Politics, and Structured Disparities during COVID-19 London: Routledge, forthcoming in 2023. Also, he is the lead editor another edited book: COVID-19 Syndemics of the Global South: A World Divided London: Routledge, forthcoming in 2023, with two well-known US medical anthropologists, Merrill Singer and Nicola Bulled. Moreover, he is associate editor of three well- known international journals: Journal of Biosocial Science (University of Cambridge Press), Global Public Health (PLOS), and Humanities and Social Science Communications (Springer-Nature).

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#### Gradients of Trust in Vaccines: Embodied Discrimination, Religion, and Relational Care in Laos

#### **Elizabeth Elliott**

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In rural, mountainous, ethnically diverse countries like Laos, vaccination is often portrayed as a valiant struggle against adversity by health staff, who are tasked with implementing the almost impossible expectations of health donors. COVID-19 has added another layer of difficulty, diverting limited resources towards a logistically complex nationwide vaccine rollout. Whilst the campaign has been mostly successful, identification of areas of low uptake has led to the characterization of "vaccine hesitancy" among certain populations, who have also been blamed in the recent past for outbreaks of other vaccine-preventable diseases such as measles.

This paper will examine trust in vaccines in Laos from two perspectives. Firstly, drawing on research conducted among upland ethnic groups and health staff before and during the pandemic, it will explore how vaccination intersects with or contends with local notions of immunity and cosmologies of protection based on indigenous spiritual practices. However, I will argue that this not the main factor influencing confidence in vaccines, as these epistemologies of healing are flexible and pragmatic in incorporating different approaches to curing illness. Instead, the root cause lies in patterns of distrust with the state associated with historical conflict and the embodied experiences of discrimination, as well as the increasing popularity of evangelical Christianity among marginalised populations.

Secondly, it will dissect the methods used to build vaccine confidence during the pandemic through sensitivity to local perspectives and networks. I argue that the urgency of preventing COVID-19 has prompted more awareness of relational care, effective communication and community engagement. Unlike routine vaccination, elderly people have become the main focus of public health efforts, encouraging greater emphasis on utilising existing village, family and religious structures. Trust in vaccines is therefore not based on abstract concepts but highly relational, and so can be intentionally developed.

**Elizabeth Elliott** is a Medical Anthropologist in the STS cluster of the Asia Research Institute, working primarily in Laos. She has conducted long-term ethnographic research on traditional healing practices with rural healers and communities, including medicinal plant use, ritual and spiritual practices. She has also conducted research within public health to develop people-centred approaches through a better understanding of local perspectives. During the pandemic she has been collaborating with the Lao PDR Ministry of Health and WHO to develop participatory methods to engage with communities for essential healthcare access and COVID-19 responses through improved trust and community-led solutions.

#### **ABOUT THE ORGANISERS & CHAIRPERSONS**

Ashawari Chaudhuri is a Visiting Assistant Professor in the STS Department at Cornell University, USA. She is an anthropologist of the environment, science, and medicine. Her current book manuscript is a historically grounded ethnography of agricultural biotechnology in India. Along with asking what a good seed is for farmers and biotechnologists, she trace how knowledge about objects like genetically modified seeds is formed at intersections of practice, people, and time. Her next project is an inquiry into the long relation between environmental heat and the body in South Asia. She finds historically emerging meanings of words and concepts powerful. Her teaching is often grounded in questions of ethics and creative negotiations with power around practices, technologies, and ideas that acquire palimpsests of meanings over time and across place.

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Carola E. Lorea is Research Fellow in the Religion and Globalisation Cluster of the Asia Research Institute in National University of Singapore. She is interested in sound, Tantra, oral traditions and popular religious movements in South Asia, particularly eastern India, Bangladesh and the Andaman Islands. Her monograph Folklore, Religion and the Songs of a Bengali Madman (Brill, 2016) is the result of a four-year travel along ethnography with Baul practitioners. She was a research fellow at IIAS (Leiden), Gonda Foundation and the South Asia Institute at University of Heidelberg. She is the founding editor of the research blog CoronAsur: Religion & Covid-19. Her current book project on soundscapes of religion and displacement is focused on the Matua community and its flows of preachers, performers, religious items and ideas across the Bay of Bengal.

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**Emily Hertzman** is a sociocultural anthropologist whose research focuses on mobilities, identities, religious practices, and politics. She received her PhD in Anthropology from the University of Toronto (2016) and her MA (2006) and BA (2001) from the University of British Columbia. Her theoretical and empirical research is centered around understanding how peoples' concepts of home and belonging are transformed under broader shifting social conditions, including mobility, democratization, transnationalism, economic restructuring, and liberalization, as well as religious encounters and personal identity construction processes. Her doctoral research analyzed the major cultural scripts underpinning widespread migration of Hakka-speaking Chinese Indonesians from West Kalimantan, Indonesia, to other parts of Asia. She is currently a Research Fellow in the Asia Research Institute at the National University of Singapore in the Religion and Globalisation Cluster.

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**Erica Larson** is Postdoctoral Fellow in the Religion and Globalisation Cluster at the Asia Research Institute. She holds a PhD in Cultural Anthropology from Boston University, USA. Her research interests include education, religion, ethics, and politics in Indonesia and Southeast Asia more broadly. She has examined how education becomes an arena of deliberation about the ethics and politics of plural coexistence through ethnographic research in North Sulawesi, Indonesia. Her current research engages Indonesian youth active in religious organizations and their attitudes and beliefs about corruption as a lens on normative state-society relations and notions of ethics, piety, and responsibility.

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