

# IMAGINATIONS

REVUE D'ÉTUDES INTERCULTURELLES DE L'IMAGE • JOURNAL OF CROSS-CULTURAL IMAGE STUDIES



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Kaisu Koski, *Injection Simulator* (2015)

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## DISCUSSING THE ANATOMY TABLE AND THE VACCINATION

### PICTURE

SEAN CAULFIELD, TIMOTHY CAULFIELD, JOHAN HOLST

*The Anatomy Table is a print-based work that thematically addresses the loss of public trust in science, as well as misinformation surrounding science-informed interventions in health care, such as vaccination. Drawing on the history of anatomical illustration by referencing Andrea Vesalius's famous 16<sup>th</sup>-century anatomical book, *On the Fabric of the Human Body*, the work combines this with contemporary drawings that suggest anatomy but which have an imagined, nonsensical quality, indicating to viewers that the drawings are not accurate representations of human anatomy. In addition to reflecting on this piece and the process of collaboration, Caulfield, Caulfield, and Holst discuss the challenge of countering misinformation in health-care today. The work was created through collaborative dialogue between Sean Caulfield, a professor in the Department of Art and Design at*

*The Anatomy Table est un ouvrage imprimé qui aborde de façon thématique la perte de confiance du public dans la science, ainsi que la désinformation entourant les interventions scientifiques dans les soins de santé, comme la vaccination. S'appuyant sur l'histoire de l'illustration anatomique en faisant référence au célèbre livre anatomique du XVI<sup>e</sup> siècle d'Andrea Vesalius, *A Propos de la fabrique du corps humain*, cet ouvrage combine cela avec des dessins contemporains qui suggèrent l'anatomie mais qui ont une qualité imaginaire et absurde, indiquant aux lecteurs que les dessins ne sont pas des représentations précises de l'anatomie humaine. En plus de réfléchir à cette oeuvre et au processus de collaboration, Caulfield, Caulfield et Holst discutent du défi de lutter contre la désinformation dans les soins de santé aujourd'hui. Le travail a été créé grâce au dialogue collaboratif entre Sean Caulfield, professeur au Département d'art et*

*the University of Alberta, Timothy Caulfield, Canada Research Chair in Health Law and Policy at the University of Alberta, and Johan Holst, senior scientist previously working at the Norwegian Institute of Public Health in Oslo and from August 2016 being a vaccine expert at the Headquarter of CEPI (Coalition for Epidemic Preparedness Innovations), situated in Oslo, Norway.*

*de design à l'Université de l'Alberta, Timothy Caulfield, titulaire de la Chaire de recherche du Canada en droit et politique de la santé à l'Université de l'Alberta, et Johan Holst, scientifique principal travaillant auparavant à l'Institut norvégien de la santé publique à Oslo et depuis août 2016, expert en vaccins au siège du CEPI (Coalition for Epidemic Preparedness Innovations), situé à Oslo, en Norvège.*



Figure 1: Installation view of The Anatomy Table, UNAIDS, Geneva, Switzerland, 2017.

Photo by Annik Wetter.



## THE ANATOMY TABLE

Over the last ten years, brothers Sean Caulfield (artist) and Timothy Caulfield (law professor) have collaborated on a number of interdisciplinary projects—including *Imagining Science* and *Perceptions of Promise*<sup>1</sup>—that have integrated creative and academic methods in order to examine ethical and philosophical issues in the health sciences. *The Anatomy Table* is, in part, a result of a long-term and ongoing discussion between these two creative/academic researchers. At the same time, the input of a new collaborator, Johan Holst, as well as the thematic concerns of the larger <*Immune Nations*> project, brought a unique focus to *The Anatomy Table*: the work attempts to create an open space of speculation and contemplation around issues related to biomedicine, while simultaneously taking on the role of advocacy in relation to vaccines.

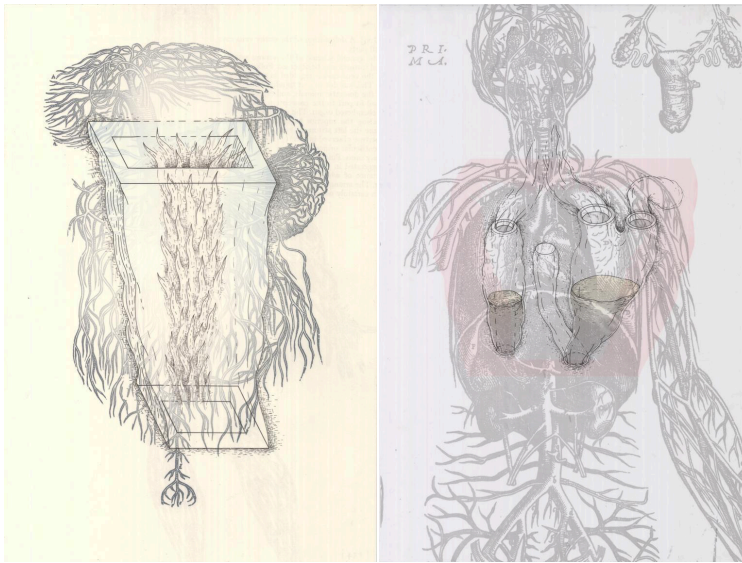
Thematically, *The Anatomy Table* addresses a perceived loss of public trust in science, as well as misinformation surrounding science-informed interventions in health care, such as vaccination. The work draws on a number of sources for formal and conceptual motivation, including *The Vaccination Picture* (discussed in more detail below), as well as historic and contemporary medical illustrations, images, and knowledge. One of the key tensions the work explores is the importance of educating people about scientific/biomedical research in order to counter pseudoscience and to support trust in health care, while at the same time acknowledging the fact that perceptions of our bodies come from multiple sources beyond science. Different cultural and philosophical perspectives need to be respected in public policy debates around health care, but governments and health agencies must also guard against the spread of misinformation in relation to vital public health initiatives such as vaccination. This is a difficult balance to strike.

*The Anatomy Table* was influenced and produced alongside an accompanying project, *The Vaccination Picture*, a publication by Timothy Caulfield, that was produced in collaboration with a number of artists and illustrators: Cindy Baker, Blair Brennan, Sean Caulfield, Dom Civiello, Zachary Chomysak, Patrick Mahon, Tammy Salzl, Ser-

gio Serrano, and Jill Stanton. The book addresses a wide range of topics related to vaccination, vaccination hesitancy, and relevant issues such as public trust, science spin, and the impact of popular culture on science policy. The visual artists working on this project responded to these topics through a wide range of approaches, from “traditional” illustration to more esoteric poetic drawing, in order to increase dialogue around the complex issues related to vaccines. As the text and images for this publication unfolded, work on *The Anatomy Table* drew on this material for both formal and conceptual motivation.

Production of *The Anatomy Table* began by first scanning and digitally manipulating reproductions from Andrea Vesalius’s famous 16th-century anatomical book *On the Fabric of the Human Body*. This reference is intended to point viewers to the complexities that emerged as Western medicine met other cultural traditions within the difficult history of colonialism. Alongside this historic material, *The Anatomy Table* also references contemporary medical images and research provided by Johan Holst, including illustrations of viruses, as well as research material on vaccination. This blending of historic and contemporary references, as well as the mixing of empirically accurate and imagined bodily imagery, addresses the complexities and tensions surrounding empirical/scientific representations, and more emotional and culturally charged expressions of the body.

In the final presentation of *The Anatomy Table* two visual languages, one referencing the history of medical science, and one that is deliberately nonsensical, are layered on top of one another in a series of twelve 61 x 91 cm digital and silkscreen prints on digital paper and transparent drafting film. This series of prints is presented on the wall in a grid around a life-sized image on Plexiglas and drafting film of the entire human body. The overlay of printed images on the central figure is composed of the smaller images from the surrounding grid, suggesting that the grid is a kind of index or map to understand the larger body. This dialogue underscores the way science isolates (dissects) our bodies in order to study and test our complex physiology—a method of inquiry that produces unique insight and knowledge, but which also may limit more interconnected perspectives.



Figures 2 and 3: Sean Caulfield, details of *The Anatomy Table*, silkscreen and inkjet on drafting film, and Photo Tex, each 91 x 61 cm, 2017. Images courtesy of the artist.

### CAULFIELD, CAULFIELD, AND HOLST IN CONVERSATION

**Timothy Caulfield:** We have had an ongoing collaboration over the last ten years. Are there key issues from our discussions that influenced *The Anatomy Table*?

**Sean Caulfield:** Absolutely. For me your work into the rise of pseudoscience within health care systems has been a major influence for this work, and in particular the growing tendency for non-science-based “cures” to adopt the language of science as a means of promoting and legitimizing alternative treatments. As you know, this is very relevant in the realm of vaccines, as the public has been exposed to considerable misinformation about vaccination, confusing and complicating discourse around this important public health issue. For example, the claim by Wakefield that vaccines cause autism still persists despite all of the quality research that has proven this to be completely false.<sup>2</sup> Additional misinformation, such as the idea that children’s immune sys-

tem can be overwhelmed by the current vaccine schedule, also continues to circulate despite extensive evidence indicating that this is also false.<sup>3</sup>

**T. Caulfield:** Yes, the social confusion issue is important. The noise around vaccine safety and efficacy has been loud and representations too often wrong. We also know that once people have formed opinions it can be extremely difficult to change their minds. This project provided an opportunity to both explore the sources of the noise and to use a unique engagement strategy—fine arts—to provoke discussion.

**Johan Holst:** To me *The Anatomy Table*—and similar projects and approaches to communication—represent a way of expressing the complexity of vaccines and vaccination. In addition, the multidisciplinary setting offers a different entrance to scientific knowledge and creates an opening for new ways of informing a defined target group. It challenges the classical pro and contra discussions between anti-vaccine activists and vaccine providers and other forces positive to vaccines. This, “third, supplemental way” might very likely contribute to increased and better understanding between various groups and primarily to reflection between the various actors.

**S. Caulfield:** On a related note, when I began working on *The Anatomy Table* I intentionally made use of an iconic image from the history of European medicine in order to examine the ways Western health sciences relate to other historical, cultural, medical, and religious traditions. I know this is a complicated relationship given the difficult and problematic history of colonialism that is interwoven with the introduction of European medical practices to non-Western cultures, as well as the need to be respectful of diverse religious and cultural practices. I did not want to present a single viewpoint or answer to this highly complex set of tensions, but to point to the need to have ongoing dialogue about this difficult and multifaceted issue.

**T. Caulfield:** Providing different perspectives is important, but, at the same time, some ideas around vaccines are simply wrong. There is no link between vaccination and autism. The vaccination schedule does not overload the immune system. Providing an alternate perspective on these scientifically sound conclusions does not help the debate. On

the contrary, it creates the illusion that there are two—equally compelling—perspectives that need to be considered and weighed. This is wrong. That said, we do want to explore these different perspectives. What is at their root? How can we explore them in a respectful manner that does not legitimize their core message? I am hopeful that the use of complex imagery is a strategy that can work. Indeed, there is some evidence that using different communication strategies—such as pictures and narratives—can have a constructive impact on the intention to vaccinate. In some ways, this collaborative project builds on that strategy.

**Holst:** I support everything that is being said here. But I want to underscore that I immediately liked the impression of subtlety and ambiguity I got when I first started to know the <Immune Nations> project. Not pretending to capture the “true and only image of nature,” the project is rooted in evidence, but, importantly, leaves space for reflection, imagination, knowledge, and insights to emerge through experiencing the works gathered together for exhibition.

**S. Caulfield:** A longstanding interest in my studio practice is to create work that fluctuates between a spectrum of emotional responses for viewers, including on the one hand having an absurd or whimsical quality, and on the other hand conveying a sense of anxiety and dread. This continuum is intended to parallel the polarized discourse around biomedicine in popular culture and media, which can often present complex issues in simplistic terms. By deliberately layering and interweaving a range of visual languages, I hope that *The Anatomy Table* might suggest complexity and the need for nuanced debate. At the same time, I also recognize the importance of clear and concise messaging when conveying health care policy to the public, particularly around vaccines. With this in mind, I found it useful to work on two interrelated projects as a means of navigating this tension: *The Anatomy Table* exploring open, poetic language; and *The Vaccination Picture* utilizing more concise, targeted messages.

**T. Caulfield:** Agreed. There is a fascinating tension between listening to the various concerns and being clear and concise about the evidence surrounding vaccines. But we also know—and there is a good deal

of research on this—that simply providing more “facts” rarely has the desired impact. On the contrary, there is some evidence that the “more facts” strategy can backfire, causing people to become more entrenched in their views. *The Vaccination Picture* tries to strike a balance between being firm about the facts, while still not making “facts” the overwhelming message. We explore sources of conspiracy theories and their impact on public opinion. We outline the factors that erode public trust, such as concern about the involvement of industry. We map the influence of popular culture, social media, and celebrities. And we end with an exploration of possible ways forward.

**S. Caulfield:** I have been very fortunate to work on a number of collaborative, interdisciplinary initiatives that have explored the interface of art and biomedicine—many with you! During this time, I have tried to take on different approaches to collaboration that have included, on one side of the spectrum, working directly with other artist/academic(s) to produce creative work, and on the other side of the spectrum, drawing on interdisciplinary experience and knowledge in concentrated workshop environments as a means of enriching a more isolated studio practice. For *<Immune Nations>*, I chose to work in the second method, partly for practical reasons relating to the long-distance exchange that took place between international participants, but also because this approach allows me to maintain a creative thread in the studio between projects, while simultaneously remaining open to ideas and motivations from different disciplinary perspectives. The danger in this approach, however, is that I may not fully respect or utilize the concerns of collaborators. Do either of you have any thoughts on our process of collaboration for *<Immune Nations>* or *The Vaccination Picture* book project?

**T. Caulfield:** I have also been involved in several collaborations with artists. All have been tremendously enjoyable and productive. And each initiative has been unique. As compared to *Perceptions of Promise*, *The Vaccination Picture* involved less back-and-forth about the science and the social controversies. Because this is such a high-profile topic, I got the sense that everyone was on the same page. All of the artists seemed to have a clear idea what they wanted to tackle, and it fit incredibly well with the text I was producing. Some of

the work—like that done by Blair Brennan’s exploration of conspiracy theories and popular culture—caused me to dig deeper into particular topics. Others, like Jill Stanton’s graphic images, seemed to perfectly complement the messages I hope to convey and inspired me to use a different narrative approach. These collaborations are fantastically rewarding. They caused me to re-examine what I wanted to say and how I planned to say it.

**Holst:** I also have experience with collaborative projects, directly interacting with statisticians, epidemiologists, etc., but not with artists in such a way as the <Immune Nations> project has offered and demanded. Thus, this has been a new and challenging, but very rewarding, experience to me.

**S. Caulfield:** One of the most challenging aspects of the <Immune Nations> project for me was the fact that the final exhibition took place in an unconventional space—the massive and gorgeous lobby of the UNAIDS building. Exhibiting in the UNAIDS building was a unique opportunity that enabled unprecedented engagement with high-level public health policy experts from around the world—guests of honour at the opening included First Lady of Namibia Monica Geingos, Anuradha Gupta, deputy CEO of Gavi, the Vaccine Alliance; and then Canadian Minister of Health Jane Philpott. At the same time, working in this kind of space presented many challenges related to the architecture of the space. To my mind, the final exhibition achieved the right balance of activating the space so that viewers were encouraged to interact with art, but in a manner that was not completely overwhelming. These were particular challenges related to studio and curatorial practice; however, they also stand more broadly as an analogy for interdisciplinary projects that must respectfully engage a wide spectrum of stakeholders from different disciplines and communities. Collaborative and interdisciplinary initiatives require a lot of creative energy from everyone to ensure they result in successful or meaningful outputs (of course, they are also very rewarding in terms of stimulating creative thinking and innovation). To my mind, it is also important to identify when transitioning out of a project in order to engage in new ideas is needed to carry creative or academic work forward. This tension underscores the importance of having a wide range

of programs within research institutions and funding agencies in order to support work that includes both large, ongoing interdisciplinary initiatives, and smaller, single researcher initiatives.

**Holst:** Agreed. As vaccine scientists, we must make our explanations in understandable ways and argue in a trustworthy manner. The whole journey of <*Immune Nations*> has increased my awareness of the importance of public communication about vaccination, and the role that art can play. I very much hope that future funding is available to develop the important collaborative methods that we have started here.

#### WORKS CITED

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Vesalius, Andreas. *On the Fabric of the Human Body: A Translation of De Humana Corporis Fabrica Libri Septem*. Translated by William F. Richardson and John B. Carman, Jeremy Norman Co., 2003.

#### IMAGE NOTES

Figure 1: Installation view of *The Anatomy Table*, UNAIDS, Geneva, Switzerland, 2017. Photo by Annik Wetter.

Figure 2: Sean Caulfield, details of *The Anatomy Table*, silkscreen and inkjet on drafting film, and Photo Tex, 91 x 61 cm, 2017. Image courtesy of the artist.

Figure 3: Sean Caulfield, details of *The Anatomy Table*, silkscreen and inkjet on drafting film, and Photo Tex, 91 x 61 cm, 2017. Image courtesy of the artist.

#### NOTES

1. For more information on these projects, see <http://www.sean-caulfield.ca/projects.html>.↵
2. For more on the claim that vaccines cause autism, see Vanessa Lam, Steven Teutsch, and Jonathan Fielding, “Refuting a Lie That Won’t Die: Taking the Fight for Vaccines beyond the Doctor’s Office,” *Health Affairs Blog*, 28 Feb. 2019, <https://www.healthaffairs.org/doi/10.1377/>



hblog20190226.742851/full/; and Anders Hviid, Jørgen Vinsløv Hansen, Morten Frisch, and Mads Melbye, "Measles, Mumps, Rubella Vaccination and Autism: A Nationwide Cohort Study," *Annals of Internal Medicine*, 16 Apr. 2019, <http://annals.org/aim/article/doi/10.7326/M18-2101>.↵

3. See the following World Health Organization and Centers for Disease Control links for more on vaccine safety: [https://www.who.int/vaccine\\_safety/initiative/detection/immunization\\_misconceptions/en/index6.html](https://www.who.int/vaccine_safety/initiative/detection/immunization_misconceptions/en/index6.html); and <https://www.cdc.gov/vaccinesafety/concerns/multiple-vaccines-immunity.html>.↵

ANATOMY TABLE/VACCINATION PICTURE



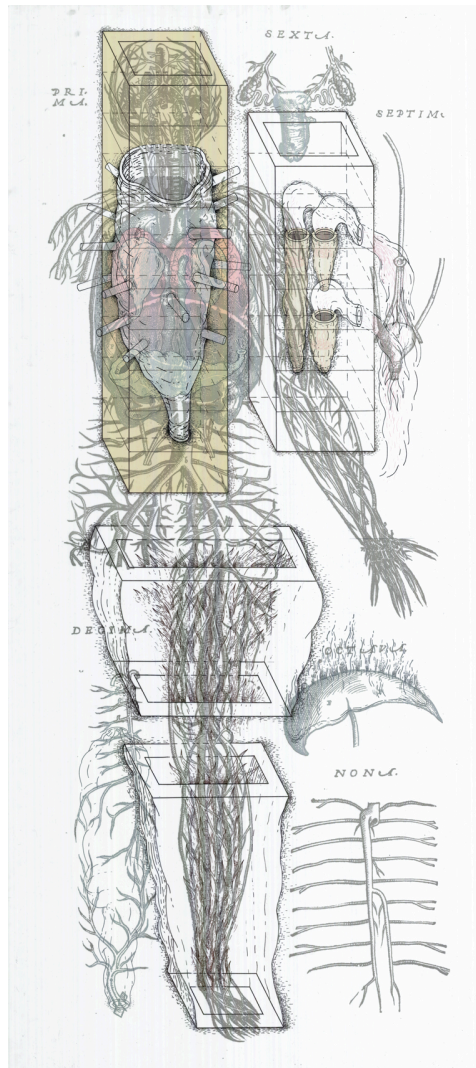
Sean Caulfield, *The Anatomy Table*, Galleri KiT, Trondheim, 2017. Silkscreen and digital printing on drafting film, plexi and Photo Tex. Photo by Yanir Shani.

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Sean Caulfield, *The Anatomy Table*, Galleri KiT, Trondheim, 2017. Silkscreen and digital printing on drafting film, plexi and Photo Tex. Photo by Yanir Shani.

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Sean Caulfield, Detail from *The Anatomy Table*, 2017. Silkscreen and Digital Printing on Drafting Film, Plexi and Photo Tex. Image courtesy of the artist.



Sean Caulfield, *Virus #1* (Study for *The Anatomy Table*), 2016. Silkscreen and digital printing on drafting film and rag paper. 61 x 45.72 cm. Image courtesy of the artist.