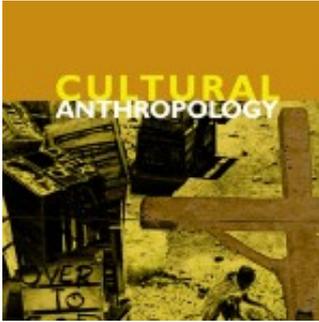


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In the journals - May 2012

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By Lara Braff



Articles in this month's issue of **Cultural Anthropology** concern the body, humanitarianism, and/or sovereignty (variously conceived) in the context of either religion or medicine. [Brahinsky](#) examines Pentecostal "body logics" and how "religiously inflected sensory aptitudes, or perhaps even mind-body relationships, emerge through a process of careful cultivation and nurturance" (217). [Bernstein](#) explores how Buddhist "body politics" among Buryats of Siberia help maintain their mobility, and express both cultural sovereignty and an "ideal sovereign body." Focusing on Thakur baba (a deity in central India), [Singh](#) develops a "political theology of sovereignty" and discusses its implications for conceptualizing "life."

[McKay](#) explores how humanitarian governmentality shapes lives, health, care, and social networks in Mozambique. Focusing on people's memories and experiences of humanitarian projects, McKay argues that they evoke a "nostalgic humanitarian lexicon," which articulates "ambiguous political subjectivities" that "give rise to new possibilities of claims-making and critique in the present" (289). Analyzing pharmaceutical company-sponsored drug donation programs in Tanzania, [Samsky](#) develops the notion of "scientific sovereignty" and examines its impact on local care and theories of global health. [Caduff](#) attends to the politics of life and security in the U.S. through her study of infectious disease researchers. Focusing on human mobility in the case of Médecins Sans Frontières, [Redfield](#) examines the double binds that this organization confronts and the "micropolitics of national origin amid global circulation" (359).



[Vol. 74\(9\)](#) of **Social Science & Medicine** features several articles that examine how SES and/or race/ethnicity affect health/healthcare: Laudicella, et al.; Shoff & Yang; Mottus, et al.; Do, et al.; Kendzor, et al.; Charafeddine et al. Another article explores the relationship between social in/equality and “successful aging,” finding that less social inequality and better welfare state policies can enable healthy aging. Wang et al. examine mental health issues among AIDS orphans in China. Hilber, et al. present a review of qualitative research on “vaginal practices” in Sub-Saharan Africa.

[Vol. 74\(10\)](#) includes several HIV/AIDS-related articles on prevention, screening, intervention, orphan programs, and stigma in the U.S., South Africa, Rwanda, Tanzania, Haiti, and Zambia. Three other articles focus on mental health issues: Francis et al.; Boardman, et al.; Brusilovskiy & Salzer. Two articles examine reproductive health: Hershberger et al. explores how at-risk couples decide whether or not to use preimplantation genetic diagnosis. Urquia, et al. looks at the effects of immigration and ethnicity on pre- and post-partum health.



In **Science, Technology, & Human Values**, [Swedlow](#) draws on Mary Douglas to delineate four states of knowledge in order to further theorize the coproduction of science and society. He then applies this theory to forest/wildlife science and management in the Pacific Northwest. Based on analyses of juridical documents and interviews with regulatory committee members, [Pavone and Arias](#) examine how and why preimplantation genetic diagnosis/screening have become so acceptable in Spain, where both embryonic stem cell research and the IVF industry are rapidly expanding.



In **Social Theory & Health**, [Von Peter](#) draws on Schofield's concept of "the vague" to examine modes of diagnosis and institutionalized treatment for the severely mentally ill. [Marent, et al.](#) present a literature review of "participation" in health promotion and suggest that future work should engage more with specific social contexts and broader theoretical discussions about health promotion.



In **Sociology of Health & Illness**, [Saukko, et al.](#) examine coronary heart disease (CHD) risk assessment technologies that contribute to patients' perceptions of lifestyle changes as "futile." They emphasize the importance of attending to technologies that help "generate incipient diseases and patients' experiences of them." Using STS approaches, [Waldby & Carroll](#) explore the "social intractability of oocytes" based on their finding that IVF patients and donors were more willing to donate frozen embryos, than viable eggs, to stem cell research. Conceptualizing the DSM category of antisocial personality disorder (ASPD) as a "technology," [Pickersgill](#) discusses how "processes of path dependency constrain innovation and how imaginaries of users and publics are implicated in the APA debates."



In this month's issue of **Health**, [Armstrong and Murphy](#) critically discuss the application of Foucauldian governmentality to public health/healthcare, focusing on how empirical researchers recognize and examine resistance (in its multiple forms) with respect to health encounters/promotion. [Broom and Doron](#) draw on Paul Farmer's notion

of “structural violence,” to elucidate cultural issues and structural conditions shaping cancer care in India. Shaw’s sociological study of the [New Zealand organ donation system](#) focuses on issues of anonymity, ritual, and personhood in organ transfer.

In addition, three articles examine medical professionals/training: [The pursuit of medical knowledge](#) and the potential consequences of the hidden curriculum; [Expert nurses](#) and the division of labour in hospitals; [Practising engagement](#): Infusing communication with empathy and compassion in medical students’ clinical encounters.



The International Journal of Social Psychiatry contains several articles about depression and its care: [Bussing, et al.](#); [Dobransky-Fasiska, et al.](#); [Østergaard, et al.](#); [Madianos, et al.](#); and [Wickrama & Ketring](#). In addition, there are articles concerning [stigma and mental illness](#), and [life trajectories](#) of people with psychiatric disorders.

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