

<http://somatosphere.net/2013/11/in-the-journals-november-2013-part-i.html>

In the Journals, November 2013 (Part I)

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By Thurka Sangaramoorthy

There were quite a number of articles related to anthropology, science, and medicine in this month's round up of journals including those from American Ethnologist, Health, Philosophy, Ethics, and Humanities in Medicine, Social Theory and Health, and Social Science and Medicine. Happy reading!

American Ethnologist

[Senses of care: Embodying inequality and sustaining personhood in the home care of older adults in Chicago](#)

Elana D. Buch

This article examines the inequalities that structure paid care work by focusing on the role of bodily relations in sustaining independent personhood and the moral consequences of these processes in the context of paid home care in Chicago. Buch argues that the goal of home care is to render older adults recognizably independent and that elders hire home care workers to sustain their desire to be recognized as persons still capable of making their subjective preferences a reality; in turn, home workers, mainly poor women of color and immigrant women, develop embodied knowledge of their clients' histories of sensory and social experience in order to sustain elders' lives in ways that reflected these dispositions. They also used their bodies to stand in for elders' bodies or to mimic elders' past relationships. Buch contends that even though workers sustained older adults' independence, they themselves were publicly constructed as lesser persons by virtue of their need to supplement paltry wages and nonexistent benefits with government assistance. She concludes that while home care practices sustained elders' personhood, they also positioned home care workers as persons whose social value lay in their willingness to suppress their subjective preferences in deference to those they cared for.

Health

[Producing children in the 21st century: A critical discourse analysis of the science and techniques of monitoring early child development](#)

Rochelle Einboden and Trudy Rudge

Using a critical discursive approach and theories of technoscience, this article analyzes a population-based early child development research initiative to demonstrate how health and economic discourses signify the child as a figure of significant contemporary social and political interests and as subjects of social value, figured as human capital, investments in the future, or alternatively, as waste. The analysis also shows how child development practices and theories marginalize the very children they intend to serve.

[Finding the patient in patient safety](#)

Su-yin Hor, Natalya Godbold, Aileen Collier, Rick Iedema

Using data from three studies exploring patients' accounts of their health-care experiences in Australia and internationally, the authors demonstrate how patients and their providers are contributing to the safety of their own care. Based on this analysis, a new model emphasizing the patient-provider collaboration to achieve safer care is proposed.

[Attention deficit/hyperactivity disorder blame game: A study on the positioning of professionals, teachers and parents](#)

Alessandra Frigerio and Lorenzo Montali

Using positioning theory, dialogical thinking, and discourse analysis, the authors study the discourses of mental health professionals, teachers and parents and the circulation of competing perspectives about attention deficit/hyperactivity disorder children. They argue that mutual blame is a constitutive element of relational dynamics among the key adults which is not necessarily related to the validity of attention deficit/hyperactivity disorder diagnosis, but on issues of compliance, recognition of authority, and morality.

[Dual embedded agency: Physicians implement integrative medicine in health-care organizations](#)

Yael Keshet

The article examines the ways in which medical doctors trained in complementary and alternative medicine integrate the latter into mainstream health-care organizations. The author found that these physicians maneuvered among the constraints of institutional structures while using these very structures as a platform for launching complementary and alternative medicine practices and values by drawing upon the complementary and alternative medicine philosophical principle of interconnectedness and interdependency of contrary forces and acted to achieve change by means of non-adversarial strategies.

[Talking about sex in the Gender Identity Clinic: Implications for training and practice](#)

Susan A. Speer

Using recordings of psychiatric assessment sessions, the article examines how doctors and patients initiate and develop talk about sex in a National Health Service Gender Identity Clinic. The author argues that doctor-patient alignment in terms of communication was most successful when clinicians made transitions from asking questions about relationships in general to talking about sex, or built on patients' relationship talk, suggesting the importance of grounding communication skills training and clinical practice in recordings of actual consultations.

[Bipolar disorder: Idioms of susceptibility and disease and the role of 'genes' in illness explanations](#)

Ingrid Baart and Guy Widdershoven

This article focuses on how members of the Dutch Association for People with Bipolar Disorder explain their affliction; (2) the relationship between genetic, environmental and personal factors in these explanations and (3) the relationship between illness explanations, self-management and identity. The authors conclude that susceptibility versus disease become opposing explanatory idioms through which bipolar disorder is constructed. Furthermore, the authors argue that individuals who construct explanations around the concept of 'disease' attach more importance to 'genes and chemicals' than to environmental components of the disorder, observe fewer possibilities for self-management, are less inclined to construct normalcy through a quest for personal growth than individuals adhering to the central

concept of 'susceptibility.'

Philosophy, Ethics, and Humanities in Medicine

[The autism puzzle: challenging a mechanistic model on conceptual and historical grounds](#)

Berend Verhoeff

The author argues that although current research in autism takes autism as a scientific object that can be identified with systematic neuroscientific investigation, this model of autism is limited since it disregards the way in which autism relates to ideas about what kind of behavior is abnormal. Through historical and anthropological studies, the author shows that normative issues concerning disability, impairment and societal needs drive our recognition and understanding of autism. The article concludes by stating that clinicians and autism researchers need to engage critically with issues related to the framing of autism: the social acceptance of diversity; the framing effects and performativity of an autism diagnosis regarding a child's identity, social relations and societal challenges and possibilities; the relationship between suffering and impairment and the demands of the social world; the historical development of the concept of autism; and implicit (shifting) norms in social life and children's behavior.

Social Theory & Health

[Agency, materiality and mental illness](#)

Sebastian von Peter

This article uses an everyday psychiatric situation as a way of illustrating how non-human agents such as things and material objects influence not only what people do, but also who they are in order to demonstrate that the concept of agency must be understood in a relational way, as a product of interaction, and assigning materiality a more substantial role in changing a person's behavior.

[An adaptation to Michel Foucault's medical authority: The Lucid Succor of the informal caregiver](#)

C Thomas Farrell and J Porter Lillis

The authors in this article argue that recent epidemiological shifts and the proliferation of medical information across electronic media have caused medical experiences and our corresponding understanding of them to change. They argue for an adaptation of Foucault's model of medical authority to account for the role and the impact of informal caregivers of the elderly.

[The domestication of an everyday health technology: A case study of electric toothbrushes](#)

Simon Carter, Judith Green, Nicki Thorogood

Using the electric toothbrush as an example, this article examines the growing acceptability of domestic health technologies that blur the traditional boundaries between health, aesthetics and consumption. By using interviews about people's oral health practices, this research explores the relationships between an everyday artifact, its users and their environments, and the ways in which oral health technologies become domesticated in the home environment.

[Pretenders and performers: Professional responses to the commodification of health care](#)

Evelien Tonkens, Christian Bröer, Nienke van Sambeek, Daniël van Hassel

This article explores the ways in which health care providers respond to the commodification of health care in the Netherlands. The authors demonstrate that different combinations of the logics of the market, bureaucracy and professionalism are grounded in differential levels of professional autonomy, dominance, and discretion. They also discuss new ways of enacting professionalism in an increasing age of uncertainty: (1) entrepreneurialism: embracing commodification as integral part of professionalism; (2) activism: rallying against encroachment on the profession; (3) bureaucratization: seeking reassurance in procedures; (4) pretending: faking compliance to protect autonomy; and (5) performing: upholding the profession through conscious and skillful management of appearance in the eyes of patients and the public.

[Stunting professionalism: The potency and durability of the hidden curriculum within medical education](#)

Barret Michalec and Frederic W Hafferty

In this article, the authors explore: (1) how the hidden curriculum within medical education functions to counter medicine's push for professionalism and (2) why the hidden curriculum continues to persist within medical training. They suggest mechanisms to assuage elements of the hidden curriculum, which may, in turn, allow the principles of professionalism to blossom among medical students.

[Regime change in Australian maternity hospitals](#)

Karen Lane and Kerreen Reiger

Contemporary attempts to mediate risk and manage uncertainty are remaking many medical institutions – including maternity hospitals in Australia. Health policies are encouraging a shift away from hierarchical, medically dominated structures towards new governance systems and 'women-centered' care, often led by midwives. Using theories of the 'second modernity,' the authors demonstrate that when cultural and interactional levels of this change are examined, considerable fluidity and uncertainty in the identification and negotiation of risk is evident, resulting in new work practices and professional identities.

[Critical junctures in health and social care: Service user experiences, work and system connections](#)

Ben Hannigan and Nicola Evans

Using the notion of "critical juncture," the authors use one individual's journey through an interconnected system of mental health care to show how micro-level critical junctures can be purposefully used to introduce instability at the meso-level in the pursuit of larger organizational change in the improvement of mental health services.

Social Science and Medicine

[Personal identity and the role of 'carer' among relatives and friends of people with multiple sclerosis](#)

Nic Hughes, Louise Locock, Sue Ziebland

Using identity theory, the authors explore variation in peoples' perceptions of themselves as informal care givers, suggesting that self-identification with the role and label of care giving is nuanced, shifting and variable. They also propose taxonomy of caring activity including emotional support, personal care, physical care, household tasks, advocacy, and activism and describe four categories of care giver role identity (embraced, enforced, absorbed or rejected). They argue that variability and fluidity in self-identification as a care giver are related to expectations about whether one should assume a caring role.

[Making information 'relevant': General Practitioner judgments and the production of patient involvement](#)

Megan Clinch and John Benson

Drawing on sociological work that focuses on decision-making in health care is not an individual act within in a single clinical encounter, but a process that is distributed across multiple encounters in relation to a range of human and non-human actors and interviews with 24 general practitioners in the United Kingdom about statin prescriptions for the primary prevention of cardiovascular disease, this paper explores the work that these doctors perform when attempting to achieve patient involvement in healthcare decisions. The paper identifies a set of repertoires through which these providers evaluate and coordinate often contradictory forms of knowledge, transforming them into information that they think is relevant to patients, and which will potentially facilitate meaningful involvement in healthcare decisions. The authors conclude that what enables action is the ability to interpret multiple forms of knowledge and evidence derived from a range of sources in a manner that is considered to cohere with and enhance a patient's capacity to become autonomous.

[Biomedicalization and the public sphere: Newspaper coverage of health and medicine, 1960s–2000s](#)

Daniel C. Hallin, Marisa Brandt, Charles L. Briggs

Using newspaper reporting of health and medicine from the 1960s to the 2000s, this article explores the central role that the mass media plays in the historical process of biomedicalization. In particular, it focuses on how the production, circulation, and

reception of biomedical knowledge constitutes and is constituted by events, subjects, and objects that are defined in communicative terms. The authors argue that biomedicalization has rendered health news more conventional in the form of political reporting, focusing increasingly on controversy and including more mixed and negative portrayals of biomedical actors, consistent with the “watchdog” function of journalism so as news positions health issues more in the public sphere, they become subject to public debate and to communicative norms that apply in the public sphere generally.

AMA citation

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