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## In the Journals (August 2014)

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By Jessica Cooper

Welcome to the August 2014 edition of *In the Journals*, just in time to kick off the transition from summer back to the start of the academic year. Without further ado...

### [American Ethnologist](#)

[Infrastructure and interpretation: meters, dams, and state imagination in Scotland and India](#)

*Leo Coleman*

The technical infrastructures of modern life—energy, communications, transport—stand at the juncture between material orderings of society and collective meaning. Public utilities are both material and symbolic, and both aspects require maintenance—and anthropological understanding. However, recent anthropological approaches building from science studies have tended to pursue “flat” descriptions that replace mystical or hypostatizing concepts of “social forces” with material associations and have focused on micrological discipline rather than ritual sites where collective identity is formed. By contrast, I identify an “aporetic relation” between material ordering and symbolic form as the site of ritual, and hermeneutic, processes by which large-scale political collectives are built up—and infrastructures are shaped to serve collective projects. I analyze examples of contemporary and historical infrastructural politics from India and Scotland to develop insights into how collectivities and states are formed, interpreted, and challenged in symbolic contests over their infrastructures.

[Cashinahua perspectives on functional anatomy: Ontology, ontogenesis, and biomedical education in Amazonia](#)

*Cecilia McCallum*

Ontological dimensions of encounters between Brazilian biomedical Cartesianism and Amerindian perspectivism come into sharp focus in an intensive course in functional anatomy offered to trainee indigenous health agents in Acre state, Brazil. After presenting the biomedics' rationalization of the course, which centered on the supervised dissection of a cadaver, I look at Cashinahua students' accounts of their participation in the training and consider the broader implications of this particular engagement between two profoundly different philosophical traditions from the angle of the ontogenesis of meaning. I contextualize the students' views of the cadaver through discussion of Cashinahua phenomenology of the body and cumulative personhood. Rather than revealing a confrontation between distinct "cultures," as suggested by the term interculturality, analysis supports a focus on the interplay between ontology and epistemology within historically specific ontogenetic processes.

### [Toxic uncertainties of a nuclear era: Anthropology, history, memoir](#)

*Donna M. Goldstein*

New narratives of toxic contamination are expanding and challenging our ethnographic sensibilities. In confronting the contamination left behind from the Cold War period, a range of disciplinary approaches, methods, and writing styles is necessary. Ethnography plays a crucial role here, but it cannot fly solo in these sorts of projects. In this review essay, I compare three books from authors belonging to distinct scholarly traditions, each one dealing with complicated cases of radioactive contamination that began in the Cold War era and that demand rethinking in the contemporary one. Anthropologists have much to learn from approaches pursued in other disciplines, particularly if the end goal is a more holistic portrait of contamination and toxicity.

### [Ontological anthropology and the deferral of critique](#)

*Lucas Bessire and David Bond*

What does ontological anthropology promise, what does it presume, and how does it contribute to the formatting of life in our present? Drawing from our respective fieldwork on how Indigenous alterity is coenvisioned and how the lively materiality of hydrocarbons is recognized, we develop an ethnographic and theoretical critique of ontological anthropology. This essay, then, provides an empirical counterweight to what the ontological turn celebrates of Native worlds and what it rejects of modernity. In it, we

examine the methodological and conceptual investments of ontological anthropology. The figure of the ontological as commonly invoked, we argue, often narrows the areas of legitimate concern and widens the scope of acceptable disregard within social research. We chart how this paradigm's analytical focus on the future redefines the coordinates of the political as well as anthropology's relation to critique. Finally, we formulate three conceptual theses that encapsulate our criticism and open this discussion to further debate.

## **Cultural Anthropology**

### **[Witness: Humans, Animals, and the Politics of Becoming](#)**

*Naisargi Dave*

A prominent animal rights activist in New Delhi, explaining her relentlessness on behalf of animals, said to me the following: "I only wish there were a slaughterhouse next door. To witness that violence, to hear those screams . . . I would never be able to rest." She was not alone among animal welfare activists in India in linking the witnessing of violence against an animal to the creation of a profound bond that demanded from her a life of responsibility. I argue in this article that this moment of witnessing constitutes an intimate event in tethering human to nonhuman, expanding ordinary understandings of the self and its possible social relations, potentially blowing the conceit of humanity apart. But I also consider another reading, which is how this act of intimacy exacerbates the species divide as the witness hyper-embodies herself as human, "giving voice" for the animal other which cannot speak. Throughout the article, I consider how posthumanist perspectives might trouble both these interpretations and ask what it would mean to take seriously the animal activist's "becoming animal."

### **[Humanity/Plan; or, On the "Stateless" Today \(Also Being an Anthropology of Global Health\)](#)**

*Tobias Rees*

My fieldwork among HIV vaccine researchers, activists, and funders has led me to suggest that humanity—when it was first conceived of in the late eighteenth century—emerged as a plan, a plan for how to establish a future anticipated in the present. The powerful implication of this fieldwork-based suggestion is that what humanity is—or if it is at all—depends on the

available humanity plans. I argue in this essay that we are currently seeing the emergence of a new—a biological—humanity plan, and I wish to make visible that—and how—this biological humanity plan has outgrown, conceptually as well as institutionally, older humanity plans. I also hope to make comprehensible the massive—intellectual as well as political—challenge this emergence poses.

### [Ethnography and Theory of the Signature in Physics](#)

*Arpita Roy*

Ending the decades-long search for the elusive Higgs particle, physicists at the Conseil Européen pour la Recherche Nucléaire, or CERN, in Switzerland announced the news of its historic discovery on July 4, 2012. In the wake of the recent discovery of the Higgs particle, the article aims to give a critical account of the concept of signature used in contemporary particle physics. Appearing as interlopers in the material world of science, signatures engender a complex movement between fact and value, thing and sign, or reference and meaning. This movement is instructive in explaining how discoveries are made in an experimental science, and also in the more provocative problem of how necessary consequences follow from contextual signs. Drawing on two and a half years of ethnographic fieldwork carried out at the Large Hadron Collider particle accelerator complex and integrating it with medieval theories of the signature, the essay offers a renewed interrogation into the topic of things, signs, and relations and their relevance for anthropology today.

### [Santería Copresence and the Making of African Diaspora Bodies](#)

*Aisha Beliso-De Jesús*

In Santería priesthoods, practitioners are “made” into African diaspora bodies in what is called “making santo.” These embodied epistemologies reveal not only the complex historical practices that have emerged through processes of racialization and enslavement but also how a body logic resituates the formations of diasporic feeling and sensing. I argue that practitioners’ everyday acts redefine the capacities of and for action as part of a spiritual habitus. The various rituals, works, and spiritual acts in Santería thus culminate in a different form of bodily engagement with the world, operating in racial space. This article examines Santería body logics, showing how what I call copresences are activated in somatic racial ontologies. I suggest that these diasporic sensings resituate

anthropological universalisms, arguing for a disruption in the debate between mediation and practice in the anthropology of religion. Rather than assuming notions of presence, copresence allows for an intervention that hails Santería's embodied epistemology as a form of diasporic sensing.

### [Genetic Diaspora: Producing Knowledge of Genes and Jews in Rural South Africa](#)

*Noah Tamarkin*

After Lemba South Africans participated in genetic tests that aimed to demonstrate their ancient links to contemporary Jewish populations, American Jews began to visit the Lemba to connect with them on the basis of an assumed shared Judaism. Some Lemba people welcomed and endorsed these visits, but they also maintained their own ideas about the meaning of their “genetic Jewishness” and the terms of their new diasporic relationships, which often contradicted the understandings of visiting Jews. This article privileges the perspectives of Lemba South Africans, and the historical and ethnographic contexts through which Lemba genetic data emerged and circulated, to offer an alternative reading of the social and political significance of DNA. It poses the question: How do divergent genomic knowledges articulate with the politics of belonging and the pursuit of citizenship in South Africa and transnationally? I argue that DNA and diaspora converge to create new sites of political belonging, ones marked by precarious connections that balance on the production of knowledge and its refusal. I introduce the concept of genetic diaspora to theorize how these connections, marked by inequality, are tenuously forged through national, racial, and religious difference that is imagined to be the same. Genetic diaspora offers Lemba South Africans the possibility to produce and circulate their own new knowledge about Jewish history and genetic belonging. This article demonstrates that those implicated in genetic studies transform DNA into a resource that authorizes their own histories and politics of race and religion.

### [Health & Place](#)

#### [Do minority and poor neighborhoods have higher access to fastfood restaurants in the United States?](#)

*Peter James, Mariana C. Arcaya, Devin M. Parker, Reginald D.*

*Tucker-Seeley, S.V. Subramanian*

- Fast-food access has been linked to obesity in low income and black populations.
- Most studies cover small areas and use administrative boundaries to define access.
- Do these populations have greater access to fast-food across the United States?
- Neighborhood poverty was not independently linked to fast-food access.
- Higher proportion black neighborhoods had higher fast-food access.

[Spatialising the contentious politics of ADHD: Networks and scalar strategies in health social movement activism](#)

*Claire Edwards*

This paper explores the spatial dynamics of health social movement activism in the context of a specific condition, Attention Deficit Hyperactivity Disorder (ADHD). Deploying qualitative research conducted with Irish ADHD organisations, it examines how place and space affect activist networks and the dilemmas that emerge when local 'mobilisations' converge at national and transnational levels. ADHD activism in Ireland has been predominantly localist in orientation, but certain organisations have shifted their activism to the European scale as a means of gaining further political and epistemic recognition for the condition. The paper suggests that health social movement studies would benefit from an engagement with the geographies of inter-scalar relations in analysing organisations? action repertoires.

[Lost in translation? Theory, policy and practice in systems-based environmental approaches to obesity prevention in the Healthy Towns programme in England](#)

*Elena Sautkina, Denise Goodwin, Andy Jones, David Ogilvie, Mark Petticrew, Martin White, and Steven Cummins*

This paper explores how system-wide approaches to obesity prevention were 'theorised' and translated into practice in the 'Healthy Towns'

programme implemented in nine areas in England. Semi-structured interviews with 20 informants, purposively selected to represent national and local programme development, management and delivery were undertaken. Results suggest that informants articulated a theoretical understanding of a system-wide approach to obesity prevention, but simplifying this complex task in the context of uncertainty over programme aims and objectives, and absence of a clear direction from the central government, resulted in local programmes relying on traditional multi-component approaches to programme delivery. The development of clear, practical guidance on implementation should form a central part of future system-wide approaches to obesity prevention.

### [Gender inequality and the use of maternal healthcare services in rural sub-Saharan Africa](#)

*Vissého Adjiwanou and Thomas LeGrand*

In this study, we measure gender inequality both at individual level by women's household decision-making and at contextual level by permissive gender norms associated with tolerance of violence against women and assess their impact on maternal healthcare services utilisation in rural Africa. We apply multilevel structural equation modelling to Demographic and Health Survey (DHS) data from Ghana, Kenya, Tanzania and Uganda to gain better measure and effect of the gender norms construct. The results show that women in Ghana and Uganda, who live in areas where gender norms are relatively tolerant of violence against women, are less likely to use skilled birth attendants and timely antenatal care. In Tanzania, women who live in this type of environment are less likely to attend four or more antenatal visits. In contrast, the effects of a woman's decision-making authority on maternal health service use are less pronounced in the same countries.

### [Mental health/illness and prisons as place: Frontline clinicians' perspectives of mental health work in a penal setting](#)

*Nicola Wright, Melanie Jordan, and Eddie Kane*

This article takes mental health and prisons as its two foci. It explores the links between social and structural aspects of the penal setting, the provision of mental healthcare in prisons, and mental health work in this environment. This analysis utilises qualitative interview data from prison-based fieldwork undertaken in Her Majesty's Prison Service,

England. Two themes are discussed: (1) the desire and practicalities of doing mental health work and (2) prison staff as mental health work allies. Concepts covered include equivalence, training, ownership, informal communication, mental health knowledge, service gatekeepers, case identification, and unmet need. Implications for practice are (1) the mental health knowledge and understanding of prison wing staff could be appraised and developed to improve mental healthcare and address unmet need. Their role as observers and gatekeepers could be considered. (2) The realities of frontline mental health work for clinicians in the penal environment should be embraced and used to produce and implement improved policy and practice guidance, which is in better accord with the actuality of the context – both socially and structurally.

### **Social Science & Medicine**

#### **[Professional problems: The burden of producing the 'global' Filipino nurse](#)**

*Yasmin Y. Ortiga*

This paper investigates the challenges faced by nursing schools within migrant-sending nations, where teachers and school administrators face the task of producing nurse labor, not only for domestic health needs but employers beyond national borders. I situate my research in the Philippines, one of the leading sources of migrant nurse labor in the world. Based on 58 interviews with nursing school instructors and administrators, conducted from 2010 to 2013, I argue that Philippine nursing schools are embedded within a global nursing care chain, where nations lower down the chain must supply nurse labor to wealthier countries higher up the chain. This paper shows how this process forces Filipino nurse educators to negotiate an overloaded curriculum, the influx of aspiring migrants into nursing programs, and erratic labor demand cycles overseas. These issues create problems in defining the professional knowledge needed by Filipino nurses; instilling professional values and standards; and maintaining proper job security. As such, these findings demonstrate how countries like the Philippines bear the burden of ensuring nurses' employability, where educational institutions constantly adjust curriculum and instruction for the benefit of employers within wealthier societies. My interviews reveal how such adjustments undermine the professional values and standards that define the nursing profession within the country. Such inequality is an outcome of nurse migration that current research has not fully explored.



[PTSD in the U.S. military, and the politics of prevalence](#)

*Michael P. Fisher*

Despite the long-standing codification of posttraumatic stress disorder (PTSD) as a mental disorder, the diagnosis is a controversial one whose legitimacy is at times disputed, particularly in U.S. military contexts (e.g., McNally and Frueh 2013; McNally, 2003, 2007). These disputes often manifest in a struggle over prevalence rates. Utilizing data from in-depth interviews and relying on situational analysis methodology (Clarke, 2005), I highlight this struggle in the wake of a decade of U.S.-led war in Afghanistan and Iraq. I focus on the objects of contestation employed by public officials, veterans' advocates, and researchers to make or refute claims about PTSD prevalence. These objects of contestation include the diagnostic category and criteria; screening tools, procedures, or systems; and the individuals who express symptoms of the disorder. Based on these claims, I make two key interrelated assertions. First, PTSD is viewed by some public officials as an overly generalized or invalid diagnostic category that is often induced in or falsified by veterans or servicemembers. As such, PTSD is perceived by these stakeholders to be over-diagnosed. Compounding these perceptions are beliefs that PTSD is costly and negatively impacts military duty performance, and thus overall manpower. Second, there exist perceptions, largely on the part of veterans' advocates but also some public officials, that many servicemembers and veterans are not seeking treatment (and thus, a diagnosis) when they experience symptoms of PTSD. Thus, PTSD is perceived by these stakeholders to be under-diagnosed. Paradoxically, some public officials make both claims: that PTSD is over-diagnosed and under-diagnosed. I conclude by exploring the implications of these findings.

[Contextualizing racial disparities in preterm delivery: A rhetorical analysis of U.S. epidemiological research at the turn of the 21st century](#)

*Erica Prussing*

Preterm delivery (PTD), defined as delivery prior to 37 weeks gestation, is a key contributor to persistent racial disparities in infant mortality in the United States. Five major funding initiatives were devoted to advancing PTD epidemiology during the 1990s and 2000s. By examining content and rhetorical features of 94 studies conducted under these initiatives, and published between 1993 and 2011, this paper considers how calls for more "contextual" approaches (focusing on social and environmental contexts) interacted with more "conventional" approaches (focusing on

individual-level risk factors) to PTSD epidemiology during this period. Contextual advocates initially emphasized complex biosocial reasoning to better connect social adversity with embodied outcomes. Yet responses by researchers invested in conventional approaches, as well as in studies published under new initiatives that explicitly claimed to incorporate contextual insights, often reframed this complex reasoning in biologically reductionist terms. Subsequent contextual advocates then focused on developing statistical methods to support research about social and environmental causes of PTSD, and this strategy appears to have gained some traction with conventional researchers. These findings call for closer attention to language and power in both social scientific studies of epidemiological knowledge production, as well as among epidemiologists themselves.

[Whose social capital matters? The case of U.S. urban public hospital closures and conversions to private ownership](#)

*Michelle Ko, Kathryn Pitkin Derosé, Jack Needleman, Ninez A. Ponce*

Prior literature on social capital and health has predominantly focused on health outcomes and individual access to healthcare services. It is not known to what degree, if any, community social capital influences the performance or behaviors of public hospitals, a key source of healthcare for disadvantaged communities in the United States. In this study we developed measures of community bridging social capital – horizontal social networks between heterogeneous groups of similar social position – and linking social capital – vertical networks across the status hierarchy – relevant to public hospitals. We examined associations between social capital, and U.S. urban public hospital closures and conversions to private ownership from 1987 to 2007. We found that higher voting participation was associated with a greater hazard of public hospital closure over time (p

[The influence of women's empowerment on maternal health care utilization: Evidence from Albania](#)

*Lantona Sado, Alma Spaho, and David R. Hotchkiss*

Women in Albania receive antenatal care and postnatal care at lower levels than in other countries in Europe. Moreover, there are large socio-economic and regional disparities in maternal health care use. Previous research in low- and middle-income countries has found that

women's status within the household can be a powerful force for improving the health, longevity, and mental and physical capacity of mothers and the well-being of children, but there is very little research on this issue in the Balkans. The aim of this paper is to investigate the influence of women's empowerment within the household on antenatal and postnatal care utilization in Albania. The research questions are explored through the use of bivariate and multivariate analyses based on nationally representative data from the 2008–09 Albania Demographic and Health Survey. The linkages between women's empowerment and maternal health care utilization are analyzed using two types of indicators of women's empowerment: decision making power and attitudes toward domestic violence. The outcome variables are indicators of the utilization of antenatal care and postnatal care. The findings suggest that use of maternal health care services is influenced by women's roles in decision-making and the attitudes of women towards domestic violence, after controlling for a number of socio-economic and demographic factors which are organized at individual, household, and community level. The study results suggest that policy actions that increase women's empowerment at home could be effective in helping assure good maternal health.

[A changing epidemiology of suicide? The influence of birth cohorts on suicide rates in the United States](#)

*Julie A. Phillips*

The increases in suicide among middle-aged baby boomers (born between 1946 and 1964) in the United States since 1999 suggest a changing epidemiology of suicide. Using data from 1935 to 2010, this paper conducts age-period-cohort analyses to determine the impact of cohorts in shaping temporal patterns of suicide in the United States. The analysis demonstrates that age, period and cohort effects are all important in determining suicide trends. Net of age and period effects, the cohort pattern of suicide rates is U-shaped, with cohorts born between 1915 and 1945 possessing among the very lowest suicide rates. Suicide rates begin to rise with boomers and subsequent cohorts exhibit increasingly higher rates of suicide. The general pattern exists for both men and women but is especially pronounced among males. The average suicide rate over the entire period for males is about 28 per 100,000, 95% CI [27.4, 28.7]. For males born in 1930–34, the suicide rate is estimated to be 17.4 per 100,000, 95% CI [15.9, 18.8]; for males born between 1955 and 1959, the rate is essentially the same as the average for the period while for males born between 1985 and 1989, the suicide rate is estimated to be 37.8 per 100,000, 95% CI [33.1, 43.4]. The results dispute popular claims that

boomers exhibit an elevated suicide rate relative to other generations, but boomers do appear to have ushered in new cohort patterns of suicide rates over the life course. These patterns are interpreted within a Durkheimian framework that suggests weakened forms of social integration and regulation among postwar cohorts may be producing increased suicide rates.

[Uneasy subjects: Medical students' conflicts over the pharmaceutical industry](#)

*Kelly Holloway*

In this article I report on an investigation of the pharmaceutical industry's influence in medical education. Findings are based on fifty semi-structured interviews with medical students in the United States and Canada conducted between 2010 and 2013. Participant responses support the survey-based literature demonstrating that there is clear and pervasive influence of the pharmaceutical industry in medical education. They also challenge the theory that medical students feel entitled to industry gifts and uncritically accept industry presence. I investigate how medical students who are critical of the pharmaceutical industry negotiate its presence in the course of their medical education. Findings suggest that these participants do not simply absorb industry presence, but interpret it and respond in complex ways. Participants were uncomfortable with industry influence throughout their medical training and found multifaceted ways to resist. They struggled with power relations in medical training and the prevailing notion that industry presence is a normal part of medical education. I argue that this pervasive norm of industry presence is located in neoliberal structural transformations within and outside both education and medicine. The idea that industry presence is normal and inevitable represents a challenge for students who are critical of industry.

["There's a higher power, but He gave us a free will": Socioeconomic status and the intersection of agency and fatalism in infertility](#)

*Ann V. Bell and Elizabeth Hetterly*

Existing literature characterizes fatalism as a passive reaction to health in the face of powerlessness and constructs agency as a more activist perspective based in self-efficacy and control. Frequently studied together, researchers extol agency as the appropriate approach to decision-making around health, while discouraging fatalistic outlooks. Despite associating

such beliefs with social classes—agency with high socioeconomic status (SES) groups and fatalism with low SES groups—there is little research that compares health beliefs across class groups. By examining the medicalized condition of infertility among women of both high and low SES, this study examines how social class shapes reactions to health and illness. Through 58 in-depth interviews with infertile women in the U.S., we reveal the complexity of fatalism and agency and the reasons behind that complexity. We first examine the commonalities among SES groups and their mutual use of fatalism. We then demonstrate the nuance and continuity between the health beliefs themselves—fatalism can be agentic and agency can be achieved through fatalism. In other words, we disrupt the binary construction of health beliefs, their conflation with social class, and the static application of health beliefs as psychological attributes, ultimately exposing the classist basis of the concepts. Doing so can result in improved patient care and reduced health inequalities.

## [Social Studies of Science](#)

### [Neoliberal pharmaceutical science and the Chicago School of Economics](#)

*Edward Nik-Khah*

In recent years, science studies scholars have critically examined several methods used by the pharmaceutical industry to exert control over knowledge about drugs. Complementary literatures on ‘medical neoliberalism’ and ‘neoliberal science’ draw attention to the economic ideas justifying such methods of organizing knowledge, and in so doing suggest that neoliberal thinkers may play an important role in developing them. As yet, the nature of this role remains unexplored. Relying on heretofore-unexamined archival evidence, this article establishes a direct link between the Chicago School of Economics and the mobilization of the pharmaceutical industry in the 1970s. It argues that economists affiliated with the Chicago School of Economics sought to influence pharmaceutical policy and science and constructed institutions to do so. These institutions – most notably the Center for the Study of Drug Development – remain highly influential. This article contributes to a historical understanding of how neoliberal ideas came to assume prominence in pharmaceutical policy, the management of science, and scientific practice.

### [Physician-industry collaboration: Conflicts of interest and the imputation of motive](#)

*Sarah Wadmann*

Policies about physicians' involvement with pharmaceutical companies spawn contradictory ideas. One set of policies aims to stimulate collaboration between private companies and publicly employed researchers to spur innovation and economic growth, another addresses what is seen as the problem of physicians' conflicts of interest stemming from industry collaboration. This article explores how these contradictory policies interact with everyday practice in clinical hypertension research in Denmark. I argue that 'corporate' and 'academic' research is entangled as physicians participate in industry trials to pursue their own research. Building on document analysis, observations of contract research, and interviews with clinician researchers and industry executives, I show how the establishment of industry 'ties' can serve as a way for physicians to navigate the constraints of research infrastructures and live up to intergenerational norms that knit the medical collective together. I discuss how this entanglement shapes medical research in ways that may run counter to the aims of medical innovation policies and that conflicts of interest policies do little to address. I conclude that appreciation of the ways in which economic and moral valuations come together is necessary to understand the conditions for medical research in an intertwined public-private research environment.

[Homogeneity and heterogeneity as situational properties: Producing- and moving beyond?- race in post-genomic science](#)

*Janet K. Shim, Katherine Weatherford Darling, Martine D. Lappe, L. Katherine Thomson, Sandra Soo-Jin Lee, Robert A. Hiatt, and Sara L. Ackerman*

In this article, we explore current thinking and practices around the logics of difference in gene-environment interaction research in the post-genomic era. We find that scientists conducting gene-environment interaction research continue to invoke well-worn notions of racial difference and diversity, but use them strategically to try to examine other kinds of etiologically significant differences among populations. Scientists do this by seeing populations not as inherently homogeneous or heterogeneous, but rather by actively working to produce homogeneity along some dimensions and heterogeneity along others in their study populations. Thus we argue that homogeneity and heterogeneity are situational properties – properties that scientists seek to achieve in their study populations, the available data, and other aspects of the research situation they are confronting, and then leverage to advance post-genomic science. Pointing to the situatedness of homogeneity and heterogeneity in

gene–environment interaction research underscores the work that these properties do and the contingencies that shape decisions about research procedures. Through a focus on the situational production of homogeneity and heterogeneity more broadly, we find that gene–environment interaction research attempts to shift the logic of difference from solely racial terms as explanatory ends unto themselves, to racial and other dimensions of difference that may be important clues to the causes of complex diseases.

[Epidemiology and ‘developing countries’: Writing pesticides, poverty and political engagement in Latin America](#)

*Ben W. Brisois*

The growth of the field of global health has prompted renewed interest in discursive aspects of North–South biomedical encounters, but analysis of the role of disciplinary identities and writing conventions remains scarce. In this article, I examine ways of framing pesticide problems in 88 peer-reviewed epidemiology papers produced by Northerners and their collaborators studying pesticide-related health impacts in Latin America. I identify prominent geographic frames in which truncated and selective histories of Latin America are used to justify research projects in specific research sites, which nevertheless function rhetorically as generic ‘developing country’ settings. These frames legitimize health sector interventions as solutions to pesticide-related health problems, largely avoiding more politically charged possibilities. In contrast, some epidemiologists appear to be actively pushing the bounds of epidemiology’s traditional journal article genre by engaging with considerations of political power, especially that of the international pesticide industry. I therefore employ a finer-grained analysis to a subsample of 20 papers to explore how the writing conventions of epidemiology interact with portrayals of poverty and pesticides in Latin America. Through analysis of a minor scientific controversy, authorial presence in epidemiology articles, and variance of framing strategies across genres, I show how the tension between ‘objectivity’ and ‘advocacy’ observed in Northern epidemiology and public health is expressed in North–South interaction. I end by discussing implications for postcolonial and socially engaged approaches to science and technology studies, as well as their relevance to the actual practice of global health research. In particular, the complicated interaction of the conflicted traditions of Northern epidemiology with Latin American settings on paper hints at a far more complex interaction in the form of public health programming involving researchers and research participants who differ by nationality, ethnicity, gender, profession, and class.

## [Social Theory & Health](#)

### [Barebacking with Weber- Re-enchanting the rational sexual order](#)

*Brandon Andrew Robinson*

Sexual health discourses have become a defining part of many gay men's sex lives. These discourses have effectively linked gay identity to HIV/AIDS discourses through telling most gay men how to rationally have sex and how to routinely get tested. However, some gay men who bareback – the choice often made not to use a condom – engage in condomless sex despite these larger discourses. Through using Weber's theories on rationalization, I explicate how sexual health and HIV/AIDS discourses are calculable, efficient systems that are about protecting the public good. I show how this rationalized sexual health system disciplines pleasure and intimacy. Through this disciplining, I illuminate how sexual public health has disenchanting sex, specifically for some gay men, where some of these men who bareback may be attempting to find re-enchantment in this disenchanting sexual world. Through this Weberian framework, barebacking may be seen as an act that can allow for the re-exploration of personability, intimacy, eroticism and love.

### [Differentiation and displacement: Unpicking the relationship between accounts of illness and social structure](#)

*Barry J. Gibson and Ninu R. Paul*

This article seeks to unpack the relationship between social structure and accounts of illness. Taking dentine hypersensitivity as an example, this article explores the perspective that accounts of illness are sense-making processes that draw on a readily available pool of meaning. This pool of meaning is composed of a series of distinctions that make available a range of different lines of communication and action about such conditions. Such lines of communication are condensed and preserved over time and are often formed around a concept and its counter concept. The study of such processes is referred to as semantic analysis and involves drawing on the tools and techniques of conceptual history. This article goes on to explore how the semantics of dentine hypersensitivity developed. It illustrates how processes of social differentiation led to the concept being separated from the more dominant concept of dentine sensitivity and how it was medicalised, scientised and economised. In short, this study seeks to present the story of how society has developed a



specific language for communicating about sensitivity and hypersensitivity in teeth. In doing so, it proposes that accounts of dentine hypersensitivity draw on lines of communication that society has preserved over time.

[The aesthetic rationality of the popular expressive arts: Lifeworld communication among breast cancer survivors living with lymphedema](#)

*Elizabeth Quinlan, Roanne Thomas, Shahid Ahmed, Pam Fichter, and Linda McMullen*

The use of popular expressive arts as antidotes to the pathologies of the parallel processes of lifeworld colonization and cultural impoverishment has been under-theorized. This article enters the void with a project in which breast cancer survivors used collages and installations of everyday objects to solicit their authentic expression of the psycho-social impacts of lymphedema. The article enlists Jurgen Habermas' communicative action theory to explore the potential of these expressive arts to expand participants' meaningful engagement with their lifeworlds. The findings point to the unique non-linguistic discursivity of these non-institutional artistic forms as their liberating power to disclose silenced human needs: the images 'spoke' for themselves for group members to recognize shared subjectivities. The authenticity claims inherent in the art forms fostered collective reflexivity and spontaneous, affective responses and compelled the group to create new collective understandings of the experience of living with lymphedema. The article contributes theoretical insights regarding the emancipatory potential of aesthetic-expressive rationality, an under-developed area of Habermasian theory of communicative action, and to the burgeoning literature on arts-based methods in social scientific research.

[Social History and Medicine](#)

[The Machinery of Authoritarian Care: Dramatising Breast Cancer Treatment in 1970s Britain](#)

*Elizabeth Toon*

This article examines the professional and public response to the television play *Through the Night*, which aired on BBC1 in December 1975. One of the first British mass media portrayals of a woman's experience being treated for breast cancer, this play attracted a large audience and considerable attention from both critics and everyday

viewers. My analysis of the play draws on sources documenting expert responses to the play in its production stages, as well as critics' and viewers' responses to what the play said about breast cancer treatment in particular, and about Britons' experiences of medical institutions more broadly. Together, I argue, these sources help us see how *Through the Night's* critique of what one expert called 'the machinery of authoritarian care' reverberated with and supported the efforts of professionals anxious to improve patient experience, and how it crystallised the concerns of activists and everyday viewers.

### [Pills, Potions and Devices: Treatments for Hearing Loss Advertised in Mid-nineteenth Century British Newspapers](#)

*Liz Ross, Phil Lyon, and Craig Cathcart*

This article examines the ameliorative options facing people with hearing loss in mid-nineteenth-century Britain. As reflected in professional journals of the day, medical understanding of diseases and dysfunctions of the ear was limited, yet there was vigorous assertion and counter-claim as to the cause and treatment of problems. At the time, medicine was largely unregulated and quack practitioners were also able to promote their nostrums and services to a credulous the general public with little chance of a genuine cure for their hearing loss. Using the nineteenth-century British Library Newspapers Archive for 1850, 379 advertisements offering cures for deafness were identified and examined to illustrate the variety of nostrums and devices offered to the public. Individuals with hearing loss were easy prey when even qualified medical practitioners had little understanding of cause or treatment, and when scant legal protection protected them from fraudulent treatment claims or offered redress for their failure.

### [The "Dangerous" Women of Animal Welfare: How British Veterinary Medicine Went to the Dogs](#)

*Andrew Gardiner*

This paper examines the turn toward the small companion animal that occurred in British veterinary medicine in the twentieth century. The change in species emphasis is usually attributed to post-war socioeconomic factors, however this explanation ignores the extensive small animal treatment that was occurring outwith the veterinary profession in the interwar period. The success of this unqualified practice

caused the veterinary profession to rethink attitudes to small animals (dogs initially, later cats) upon the decline of horse practice. This paper argues that a shift toward seeing the small animal as a legitimate veterinary patient was necessary before the specialty could become mainstream in the post-war years, and that this occurred between the wars as a result of the activities of British animal welfare charities, especially the People's Dispensary for Sick Animals of the Poor.

### [Before Survivorship: The Moment of Recovery in Twentieth-century American Cancer Campaigns](#)

*David Cantor*

This paper concerns what I call “the moment of recovery,” the time when, in the 1950s, American cancer campaigns abandoned an earlier tendency to downplay post-operative recovery in their public education programs. This change was signalled by the emergence of new patients groups such as Reach to Recovery (founded 1953), and by a new interest in cancer rehabilitation among physicians, nurses, and manufacturers and sellers of equipment and clothing for patients. My focus is on breast cancer and the nurse-patient-industrial complex that drove the new interest in rehabilitation and recovery, but I also argue that the “moment of recovery” in breast cancer was part of a larger “moment” in cancer more generally. Finally, I seek to distinguish the “moment of recovery” of the 1950s from the discourses around the survivor that have emerged since the 1970s and 1980s, what might be called the “moment of survivorship.”

### [Contesting the Animal Model: Axel Holst and the Controversy over Scurvy and Beriberi](#)

*Kristin Asdal*

In contemporary writing Axel Holst and Theodor Frølich are being celebrated as the first to produce an animal model for the experimental production of scurvy. But in their time their research was contested by their peers, most vocally by the polar hero and zoologist Fridtjof Nansen. This paper explores how Axel Holst initially started out as a microbe hunter and worked within a bacteriological framework, before he shifted to performing feeding experiments and came to understand scurvy as a deficiency disease. This radical shift in framework may take part in explaining the controversy around their research. But most importantly, this paper argues, we must understand this in light of the contested status of animal

models and modelling work in medical science. In order to analyse this, the paper suggests that we attend to a broad set of approaching and defining 'models'. Moreover, the paper suggests that we extend our discussion from 'the animal model' and what an animal model is, to modelling practices and what models can do, and sometimes fail to do. The paper concludes with arguing that Holst and Frølich in fact did not develop an animal model, i.e. a shared example upon which scientists base their work.

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