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In the Journals (Dec 2013, part II)

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By Lara Braff

In the December Special Issue of [BioSocieties](#) “social theorists interrogate and, in some cases re-frame, the very idea of ‘Big Biology’ as representing a fundamental shift in the scale, organization and outputs of scientific research,” as Adele Clarke, Nikolas Rose and Ilina Sing explain in their introductory editorial. The five main research articles take up various aspects and activities related to “Big Biology.”

[Stephen Hilgartne](#) examines the emergence of the ‘governing frame’ of the U.S. Human Genome Project (HGP) that “provided an interpretive scheme that constituted a set of entities (agents, spaces, things and actions) and promoted an official view of which agents would be endowed with what rights, duties, and privileges, powers and liabilities, and immunities and disabilities as they pertained to other agents and to control over spaces and things.”

In the current post-Human Genome Project (HGP) era, [Gail Davies](#) explores “the biological assumptions, sociological challenges and spatial imaginaries at play in arguments around... using genetically altered mice to understand gene function.” She discusses two approaches to “research using mutant mice as stakeholders to negotiate the biological, sociological and spatial challenges of collaboration”: one focuses on directed research practices and sociological assumptions; the second focuses on “distributed management to enhance the sensitivities and efficiencies of existing experimental practices over space.”

[Emma K Frow](#) addresses the issue of “value” in synthetic biology, with regards to BioBrick™, which has been presented as tools to improve genetic engineering and has evoked much ambivalence and contestation.

[Sabina Leonelli](#) examines the tensions encountered by database developers in the fields of plant science and cancer research: The Arabidopsis Information Resource and the Cancer Biomedical Informatics Grid. She suggests that “one way to define the scale of data infrastructure is to consider the range and scope of the biological and biomedical questions that it helps to address; and that within this perspective, databases have a larger scale than the science that they serve, which tends to remain fragmented into a wide variety of specialised projects.”

[Jane Calvert](#) examines questions surrounding “systems biology” as an exemplar of “big science,” and suggests a need “to adopt new policy categories if we want to understand the dynamics of the contemporary life sciences.”

Following the research articles are useful commentaries by Javier Lezaun and Kaushik Sunder Rajan.

[Body and Society](#) features four research articles on the social implications of the body and interventions into it. [Joanna Latimer](#) draws on her research at a genetic clinic to ask how the “new genetics” are affecting ideas about human-ness. [Maria Fannin](#) examines the gendered and bioeconomic implications of commercial stem banks. [Annette Leibing and Antje Kampf](#) show how both prostate cancer and Alzheimer’s Disease are similarly addressed through a reductionistic “cardiovascular logic.” Finally, [Kristina Grünenberg, Line Hillersdal, Hanne Kjærgaard Walker, and Hanne Bess Boelsbjerg](#) argue that client-practitioner interactions in “specialized kinesiology” are based on an understanding of the subject as simultaneously related and individual.

In the December issue of *Ethos*, [Jocelyn Lim Chua](#) examines the public discursive activities of psychologists and psychiatrists in south India, which “blur the boundaries between clinical and popular registers of speech and forge alternative ethical sensibilities and values that challenge institutionally prescribed ideas of clinical professionalism.” Drawing on anthropological studies of motherhood and psychological anthropological theories of resilience and suffering, [Maggie Zraly, Sarah E. Rubin, Donatilla Mukamana](#) examine how motherhood shapes resilience among genocide-rape survivors in Rwanda. In addition, [Jeannette Mageo](#) examines models of dreaming and [Hemalatha Ganapathy-Coleman](#) focuses on cultural ideas of parenting among Indian parents in the U.S.

There is a Special December Issue of [Social Science & Medicine](#), entitled “Ethnography of Health for Social Change: Impact on public perception and policy,” edited by Helena Hansen, Seth Holmes, and Danielle Lindermann, which consists of eleven research articles, including:

“A case for critical ethnography: Rethinking the early years of the AIDS epidemic in South Africa” ([Didier Fassin](#))

Abstract:

The epidemic of AIDS in South Africa has been characterized not only by its rapid progression but also its impassioned controversies. Retrospectively examining a long-term anthropological project and discussing some reactions it elicited, the paper proposes a defense and illustration of a critical ethnography at three moments of the research. Ethnography is first discussed as fieldworks, proposing an alternative to the horizontal multi-sited approach via a vertical multi-layered method using various scales and locations, and thus connecting the disease endured by patients in townships and former homelands with the heated debates in scientific and political forums: this procedure substitutes a political economy of the disease for its cultural and behavioral interpretations. Ethnography is then discussed as writing, suggesting acknowledgment of the social intelligence of the agents as well as the need for a scientific distance: this principle allows the articulation of the objective historical condition of the individuals and their subjective experience of history, both revealed in the development of the epidemic. Ultimately ethnography is considered from the perspective of its afterlife, that is, the continuous process of its translation by readers and commentators, on the one hand, by the author trying to reach beyond the boundaries of the academic realm, on the other, the work of anthropology appearing as a living object open to public conversation and consequently a resource for knowledge and action.

“On sitting and doing: Ethnography as action in global health” ([Stacy Leigh Pigg](#))

Abstract:

Contemporary discussions within the arenas of medical anthropology and global health are often restricted by the driving imperatives to “do something” about a particular health problem. Drawing on ethnographic fieldwork conducted in Nepal in 1997, which sought to follow the translation of AIDS prevention policies into local awareness, this paper addresses the need to revitalize theories of ethnography for an understanding of global health goals. The Nepal example underscores how the path toward decisions is never entirely clear, nor is it always obvious who benefits or loses from different approaches, even as public health discourse seeks to set a strict agenda around what the problem is and what should be done about it. Ethnography shows that definitions of what matters as well as understandings of why certain things matter are formulated from specific social locations. The paper therefore advocates for a practice of patient ethnographic “sitting” as a means to understanding, as a form of critical reflexivity, and as a diagnostic of the politics of relevance.

“Is it worth risking your life?”: Ethnography, risk and death on the U.S.–Mexico border ([Seth Holmes](#))

Abstract:

Every year, several hundred people die attempting to cross the border from Mexico into the United States, most often from dehydration and heat stroke though snake bites and violent assaults are also common. This article utilizes participant observation fieldwork in the borderlands of the US and Mexico to explore the experience of structural vulnerability and bodily health risk along the desert trek into the US. Between 2003 and 2005, the ethnographer recorded interviews and conversations with undocumented immigrants crossing the border, border patrol agents, border activists, borderland residents, and armed civilian vigilantes. In addition, he took part in a border crossing beginning in the Mexican state of Oaxaca and ending in a border patrol jail in Arizona after he and his undocumented Mexican research subjects were apprehended trekking through the borderlands. Field notes and interview transcriptions provide thick ethnographic detail demonstrating the ways in which social, ethnic, and citizenship differences as well as border policies force certain categories of people to put their bodies, health, and lives at risk in order for them and their families to survive. Yet, metaphors of individual choice deflect responsibility from global economic policy and US border policy, subtly blaming migrants for the danger – and sometimes death – they experience. The article concludes with policy changes to make US–Mexico labor migration less deadly.

Entangled ethnography: Imagining a future for young adults with learning disabilities ([Faye Ginsburg, Rayna Rapp](#))

Abstract:

Our article draws on one aspect of our multi-sited long-term ethnographic research in New York City on cultural innovation and Learning Disabilities (LD). We focus on our efforts to help create two innovative transition programs that also became sites for our study when we discovered that young adults with disabilities were too often “transitioning to nowhere” as they left high school. Because of our stakes in this process as parents of children with learning disabilities as well as anthropologists, we have come to think of our method as entangled ethnography, bringing the insights of both insider and outsider perspectives into productive dialog, tailoring a longstanding approach in critical anthropology to research demedicalizing the experience of disability.

The good-enough science-and-politics of anthropological collaboration with evidence-based clinical research: Four ethnographic case studies ([Luke Messac, Dan Ciccarone, Jeffrey Draine, Philippe Bourgois](#))

Abstract:

The apolitical legitimacy of “evidence-based medicine” offers a practical means for ethnography and critical social-science-and-humanities-of-health theory to transfer survival resources to structurally vulnerable populations and to engage policy and services audiences with urgent political problems imposed on the urban

poor in the United States that harm health: most notably, homelessness, hyperincarceration, social service cut-backs and the War on Drugs. We present four examples of collaborations between ethnography and clinical research projects that demonstrate the potentials and limits of promoting institutional reform, political debate and action through distinct strategies of cross-methodological dialog with epidemiological and clinical services research. Ethnographic methods alone, however, are simply a technocratic add-on. They must be informed by critical theory to contribute effectively and transformatively to applied health initiatives. Ironically, technocratic, neoliberal logics of cost-effectiveness can sometimes render radical service and policy reform initiatives institutionally credible, fundable and capable of generating wider political support, even though the rhetoric of economic efficacy is a double-edged sword. To extend the impact of ethnography and interdisciplinary theories of political-economic, cultural and disciplinary power relations into applied clinical and public health research, anthropologists – and their fellow travelers – have to be able to strategically, but respectfully learn to see through the positivist logics of clinical services research as well as epidemiological epistemology in order to help clinicians achieve – and extend – their applied priorities. In retrospect, these four very differently-structured collaborations suggest the potential for “good-enough” humble scientific and political strategies to work for, and with, structurally vulnerable populations in a punitive neoliberal era of rising social inequality, cutbacks of survival services, and hyperincarceration of the poor.

Other articles in this Special Issue include:

“India’s “tryst” with universal health coverage: Reflections on ethnography in Indian health policymaking” ([Devaki Nambiar](#))

“Revolution as a care plan: Ethnography, nursing and somatic solidarity in Honduras” ([Adrienne Pine](#))

“The pill hustle: Risky pain management for a gunshot victim” ([Jooyoung Lee](#))

“Health discourse and within-group stigma in professional BDSM” ([Danielle J. Lindemann](#))

“Weighing the evidence: Risks and benefits of participatory documentary in corporatized clinics” ([Helena Hansen](#))

“The murky middle ground – When ethnographers engage public health” ([Kim Hopper](#))

“Enhancing the public impact of ethnography” ([Emily Martin](#), [Gideon Litchfield](#), [Mehret Mandefro](#), [Farah Parvez](#), [Seth M. Holmes](#), [Danielle](#))

[Lindemann, Helena Hansen](#))

Among the many articles in the first half of the December volume of [Social Science & Medicine, Vol. 99](#) are articles on healthcare, including one that examines [primary care in Europe](#) and one that looks at [patient's subjective wellbeing](#) as a measure of quality of care. Other articles examine aspects of reproductive health care, including "[Perceptions of susceptibility to pregnancy among U.S. women obtaining abortions](#)"; "[Making families: Organizational boundary work in US egg and sperm donation](#)"; and "[Online and in-person health-seeking for infertility.](#)"

The [Journal of the Royal Anthropological Institute](#) features several articles of potential interest to readers of Somatosphere, including "Playing with perspectives: spirit possession, mimesis, and permeability in the buuta ritual in South India" ([Miho Ishii](#)), and two articles on ethics: "How anthropologists think: configurations of the exotic" ([Bruce Kapferer](#)) and "The continuous and discontinuous person: two dimensions of ethical life" ([Michael Lambek](#)).

The December issue of [Science in Context](#) – entitled "Approaches, Styles, and Narratives: Reflections on Doing History of Science" – includes articles on the history of science by [Eva Jablonka and Marion J. Lamb](#), [Alexandre Métraux](#), [Roger Smith](#), among others.

As of this posting, the December issue of [Medical Anthropology Quarterly](#) was not yet available online.

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