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In the Journals - September 2016, part one

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By Aaron Seaman

Welcome to part one of September's journal post. We start off with a few special issues, which have been highlighted earlier, followed by a great batch of interesting articles for fall reading. Enjoy!

Transcultural Psychiatry – [“Practical Anthropology for a Global Public Psychiatry”](#)

Medical Anthropology – [“Nonsecular Medical Anthropology”](#)

New Genetics & Society – [“Private, the Public, and the Hybrid in Umbilical Cord Blood Banking”](#)

[Appetite](#)

[The traditional food of migrants: Meat, water, and other challenges for dietary advice. An ethnography in Guanajuato, Mexico](#)

Carolyn Smith-Morris

The term “traditional diet” is used variously in public health and nutrition literature to refer to a substantial variety of foodways. Yet it is difficult to draw generalities about dietary tradition for specific ethnic groups. Given the strong association between migration and dietary change, it is particularly important that dietary advice for migrants be both accurate and specific. In this article, I examine the cultural construct of “traditional foods” through mixed method research on diet and foodways among rural farmers in Guanajuato, MX and migrants from this community to other Mexican and U.S. destinations. Findings reveal first, that quantitatively salient terms may contain important variation, and second, that some “traditional” dietary items –like “*refresco*,” “*carne*,” and “*agua*” – may be used in nutritionally contradictory ways between clinicians and Mexican immigrant patients. Specifically, the term “traditional food” in nutritional advice for Mexican migrants may be intended to promote consumption of fresh produce or less meat; but it may

also invoke other foods (e.g., meats or corn), inspire more regular consumption of formerly rare foods (e.g., meats, flavored waters), or set up financially impossible goals (e.g., leaner meats than can be afforded). Saliency studies with ethnographic follow up in target populations can promote the most useful and accurate terms for dietary advice.

[Public Culture](#)

[Cures](#)

Bharat Jayram Venkat

What is a cure and how do we know it? This essay examines the history of tuberculosis research to trace how ideas of cure shifted from Robert Koch's development of tuberculin in late nineteenth-century Berlin to the earliest randomized studies of the efficacy of antibiotics in midcentury Britain and India. What sorts of evidence were required to know that a cure was in fact a cure? How did scientists ascertain when and if a cure had failed? And what were the ethical entailments of such modes of knowing? Through this history, I suggest that cure, rather than signaling a definitive end to illness, might instead be figured as an ending lacking finality. Like promises, cures for tuberculosis can be broken. Thinking at the limits of cure makes possible a reflection on the persistence of "curable diseases" into the present, as well as on the ways in which therapeutic knowledge comes to be consolidated and dismantled.

[Changing the Subject? Psychological Counseling in Eastern Africa](#)

Megan Vaughan

Does the spread of psychological counseling techniques in eastern Africa represent a "globalization" of the mind? This essay traces the genealogies of this phenomenon and points to the ways in which a set of imported techniques has been localized.

[Living in Dose: Nuclear Work and the Politics of Permissible Exposure](#)

Shannon Cram

This article explores the politics of permissible exposure for US nuclear workers. I argue that despite recent efforts to improve regulations for occupational radiation protection, the federal government has been unable to solve the fundamental paradox of nuclear safety: that some level of exposure is unavoidable when working with nuclear materials and that any level of exposure comes with an associated biological risk. In short, injury is an operational necessity of nuclear industry. Thus nuclear safety can never mean total protection for workers—it can only ever be the level of exposure that has been deemed acceptable relative to the benefits of radiation. In this article, I trace the historical development and daily life of this cost-benefit calculus. I consider how acceptable risk frames exposure as integral to economic development and national security, normalizing nuclear injury as an unfortunate, yet necessary, part of modern life and work.

[Abiding Chance: Online Poker and the Software of Self-Discipline](#)

Natasha Dow Schüll

Online poker gamblers employ software to track and algorithmically analyze play-by-play game information in real time, parsing opponents' behavioral patterns and tendencies into color-coded numerical values that hover over their respective positions at the virtual table. These continuously updated statistical dashboards, along with retrospective game analysis and methodical routines of self-adjustment, help gamblers abide swings of chance and avoid falling into the emotionally clouded, fiscally dangerous state of "tilt." Drawing on interviews with gamblers, observations of online poker play, and discussion threads from poker forum archives, the article explores how the game and its data-intensive software teach gamblers to act from the vantage of an infinite temporal field in which probabilistic values can be trusted to bear out. Although digital media is often associated with choice paralysis and the disappearance of the subject, here it serves as a technology of the self. The composure toward chance events that gamblers cultivate online carries over to their lives off-line, lending them a subjective "readiness" for living with uncertainty. The case of online poker offers a window onto broader predicaments of choice making under conditions of heightened economic volatility.

[Body & Society](#)

[Health Promotion, Governmentality and the Challenges of Theorizing Pleasure and Desire](#)

Mads Peter Karlsen and Kaspar Villadsen

The relationship between pleasure and asceticism has been at the core of debates on western subjectivity at least since Nietzsche. Addressing this theme, this article explores the emergence of 'non-authoritarian' health campaigns, which do not propagate abstention from harmful substances but intend to foster a 'well-balanced subject' straddling pleasure and asceticism. The article seeks to develop the Foucauldian analytical framework by foregrounding a strategy of subjectivation that integrates desire, pleasure and enjoyment into health promotion. The point of departure is the overwhelming emphasis in the governmentality literature on 'prudence', 'self-responsibility' or 'risk calculation', such that pleasure and desire remain largely absent from the framework. Some insights from Žižek's work are introduced to help us obtain a firmer grasp on the problematic of 'the well-balanced subject'. The article argues that, in order to analyse the transformation of interpellation in recent health promotion, we must recognize the mechanism of self-distance or dis-identification as an integral part of the procedure of subjectification.

[Corporeal Commodification and Women's Work: Feminist Analysis of Private Umbilical Cord Blood Banking](#)

Jennie Haw

Private cord blood banking is the practice of paying to save cord blood for potential future use. Informed by the literature on corporeal commodification and feminist theories, this article analyses women's work in banking cord blood. This article is based on in-depth interviews with 13 women who banked in a private bank in Canada. From learning about cord blood banking to collecting cord blood and transporting it to the private bank's laboratory, women labour to ensure that cord blood is successfully banked. Private cord blood banking involves the overlap or insertion of commercial practices, and relations with clinical practices and relations that may cause tensions and confusion for women and clinical practitioners. Moreover, private banking reinforces and is reinforced by an 'intensive mothering' ideology. This article shows that corporeal commodification is not confined to a laboratory and the work of experts but extends into women's everyday lives.

[Risky Bodies, Drugs and Biopolitics: On the Pharmaceutical Governance of Addiction and Other 'Diseases of Risk'](#)

Scott Vrecko

While there has been a significant amount of scholarship done on health and risk in relation to public health and disease prevention, relatively little attention has been paid to therapeutic interventions which seek to manage risks as bodily, and biological, matters. This article elucidates the distinct qualities and logics of these two different approaches to risk management, in relation to Michel Foucault's conception of the two poles of biopower, that is, a biopolitics of the population and an anatomo-politics of the human body. Using a case study of contemporary addiction biomedicine, the article examines the development and deployment of treatments for addiction that seek to reduce the risks of relapse to drug use, and relates this case to other risk-reducing (but non-curative) medications, particularly cholesterol-reducing medications. The notion of a 'disease of risk' is developed in order to identify a range of medical conditions that bear a family resemblance, insofar as they are pharmaceutically managed with risk-reducing medications, and bound up within what is described as a contemporary 'risk anatomo-politics'.

[Queering 'Successful Ageing', Dementia and Alzheimer's Research](#)

Morten Hillgaard Bülow and Marie-Louise Holm

Contributing to both ageing research and queer-feminist scholarship, this article introduces feminist philosopher Margrit Shildrick's queer notion of the monstrous to the subject of ageing and the issue of dealing with frailty within ageing research. The monstrous, as a norm-critical notion, takes as its point of departure that we are always already monstrous, meaning that the western ideal of well-ordered, independent, unleaky, rational embodied subjects is impossible to achieve. From this starting point the normalizing and optimizing strategies of ageing research – here exemplified through the concept of successful ageing and the treatment of Alzheimer's disease – can be problematized. The notion of the monstrous instead suggests a view on ageing and 'monstrous' embodiment which provides room for other, different ways of being recognized as an embodied subject, and for dealing with difference, vulnerability and frailty.

[Configurations](#)

[Reading the Blush](#)

Paul White

I explore a tension between divergent ways of reading the blush: on the one hand, physiological, as an instinctive bodily response composed of waves of nervous discharge, capillary dilation, and affect, on the other hand, narratological, as a key to inner character, its meaning unfolded over time through an interplay of temperament and circumstance. This tension surfaces in novels, natural history, and medicine over the course of nineteenth century. How were narratives of emotional character, centered on individual development or decay, bonds of affection or antipathy, sustained and transformed in relation to models of the emotional body as a reflex mechanism, an interiority of vaso-motor response, a storm of suppressed memory?

[Poetry and Neuroscience: An Interdisciplinary Conversation](#)

James Wilkes and Sophie K. Scott

Dialogues and collaborations between scientists and non-scientists are now widely understood as important elements of scientific research and public engagement with science. In recognition of this, the authors, a neuroscientist and a poet, use a dialogical approach to extend questions and ideas first shared during a lab-based poetry residency. They recorded a conversation and then expanded it into an essayistic form, allowing divergent disciplinary understandings and uses of experiment, noise, voice and emotion to be articulated, shared and questioned.

[Culture, Medicine and Psychiatry](#)

[“How I Floated on Gentle Webs of Being”: Psychiatrists Stories About the Mental Health Treatment Gap in Africa](#)

Sara Cooper

A strong movement has emerged recently which is highlighting the high levels of untreated mental illness in Africa and making proposals for reducing this 'gap' in mental health care. This movement has been criticised for insufficiently attending to the epistemologies embedded in its recommendations, and inadequately considering the views of practitioners 'on the ground'. Employing a narrative-based approach, I accessed the stories about the mental health 'treatment gap' of 28 psychiatrists all working clinically in public mental health care settings in South Africa, Uganda, Nigeria or Ethiopia. Rather than focusing on the content of these stories, I was more interested in their underpinning meaning-codes and epistemological politics. Dominant thinking about the 'treatment gap' was heavily informed by a biomedical paradigm, and associated epistemological order of European Colonial Modernity. There were, however, cracks in this master narrative, which crystallised in the stories that were told by three particular psychiatrists. Their narratives operated within an alternative paradigm, one which appears to be informed by the tradition of phenomenology, and in particular the ideas associated with French philosopher Merleau-Ponty. This more marginalised thinking may offer important insights into reducing the mental health 'treatment gap' in Africa in ways very different from those created by current seats of power.

[Conflicting Notions on Violence and PTSD in the Military: Institutional and Personal Narratives of Combat-Related Illness](#)

Tine Molendijk, Eric-Hans Kramer, and Désirée Verweij

Research indicates that soldiers struggling with PTSD under-utilize mental health care. Quantitative studies of barriers to care point to the importance of soldiers' beliefs about mental health and mental health interventions in their care-seeking behavior, yet these studies still struggle to understand the particular beliefs involved and the ways they impact care-seeking behavior. This preliminary study makes a start in examining these questions through qualitative literature analysis. It maps out dominant messages surrounding PTSD in military mental health interventions, and explores how they can both shape and conflict with soldiers' personal notions. It does so by analyzing these messages and notions as institutional and personal (illness) narratives. Institutional military PTSD-narratives, which draw on mainstream scientific and clinical models, appear to communicate contradictory notions on the meanings of violence and its psychological consequences, often without acknowledging these contradictions.

As such, these narratives seem to shape struggles of soldiers, both within themselves and with the military institution. The identified conflicts indicate, contrary to the individualizing and decontextualizing focus of dominant PTSD-understandings, that soldiers' struggles also have social and moral dimensions. This has important implications for both research into PTSD-interventions and understandings of PTSD as such.

[A Matter of Taste? Quality of Life in Day-to-Day Living with ALS and a Feeding Tube](#)

Jeannette Pols and Sarah Limburg

Although people often refer to quality of life and there is a respectable research tradition to establish it, the meaning of the term is unclear. In this article we qualitatively study an intervention of which the quantitative effects are documented as indecisive. We do this in order to learn more about what the meaning of the term quality of life means when it is studied in daily life. With the help of these findings we reflect on the intricacies of objectifying and measuring quality of life using quantitative research designs. Our case is the feeding tube for patients suffering from ALS, a severe motor neuron disease that rapidly and progressively incapacitates patients. We studied how these patients, who lived in the Netherlands, anticipated and lived with a feeding tube in the course of their physical deterioration. Our analysis shows that the quality of life related to the feeding tube has to be understood as a process rather than as an outcome. The feeding tube becomes a different thing as patients move through the various phases of their illness, due to changes in their condition, living circumstances, and concerns and values. There are very different appreciations of the way the feeding tube changes the body's appearance and feel. Some patients refuse it because they feel it disfigures their body, whereas others are indifferent to its appearance. Our conclusion is that these differences are difficult to grasp with a quantitative study designs because 'matters of taste' and values are not distributed in a population in the same ways as physiological responses to medication. Effect studies assume physiological responses to be more or less the same for everyone, with only gradual differences. Our analysis of quality in daily life, however, shows that what a treatment comes to be and how it is valued shows generalities for subgroups rather than populations.

["Thinking a Lot" Among the Khwe of South Africa: A Key Idiom of](#)

[Personal and Interpersonal Distress](#)

T.N. den Hertog, M. de Jong, A.J. van der Ham, D. Hinton, and R. Reis

“Thinking too much”, and variations such as “thinking a lot”, are common idioms of distress across the world. The contextual meaning of this idiom of distress in particular localities remains largely unknown. This paper reports on a systematic study of the content and cause, consequences, and social response and coping related to the local terms *|x’an n|a te* and *|eu-ca n|a te*, both translated as “thinking a lot”, and was part of a larger ethnographic study among the Khwe of South Africa. Semi-structured exploratory interviews with community members revealed that “thinking a lot” refers to a common experience of reflecting on personal and interpersonal problems. Consequences were described in emotional, psychological, social, behavioral, and physical effects. Coping strategies included social support, distraction, and religious practices. Our contextualized approach revealed meanings and experiences of “thinking a lot” that go beyond a psychological state or psychopathology. The common experience of “thinking a lot” is situated in socio-political, economic, and social context that reflect the marginalized and displaced position of the Khwe. We argue that “thinking a lot” and associated local meanings may vary across settings, may not necessarily indicate psychopathology, and should be understood in individual, interpersonal, community, and socio-political dimensions.

[Transformation in Dang-ki Healing: The Embodied Self and Perceived Legitimacy](#)

Boon-Ooi Lee

Since spirit possession in mediumship and shamanism resembles psychotic symptoms, early researchers perceived spirit mediums and shamans as psychiatric patients whose psychopathology was culturally sanctioned. However, other researchers have not only challenged this assumption, but also proposed that spirit possession has transformative benefits. The idiom of spirit possession provides cultural meanings for spirit mediums and shamans to express and transform their personal experiences. The present case study focuses on *dang-ki* healing, a form of Chinese mediumship practiced in Singapore, in which a deity possesses a human (i.e., *dang-ki*) to offer aid to supplicants. This study seeks to explore whether involvement in *dang-ki* healing is

transformative; and if so, how the *dang-ki*'s transformation is related to his self and the perceived legitimacy of his mediumship. At a shrine, I interviewed 20 participants, including a male *dang-ki*, 10 temple assistants, and nine clients. The results obtained were supportive of the therapeutic nature of spirit possession. First, there is a relationship between his self-transformation and the perceived legitimacy of his mediumship. As his clients and community have recognized his spirit possession as genuine, and the healing power of his possessing god, he is able to make use of mediumship as a means for spiritual development. Second, he has developed his spirituality by internalizing his god's positive traits (e.g., compassion). Deities worshipped in *dang-ki* healing can be conceptualized as ideal selves who represent a wide range of positive traits and moral values of Chinese culture. Thus, the possession of a deity is the embodiment of an ideal self. Finally, the *dang-ki*'s transformation may run parallel to his god's transformation. In Chinese religions, gods have to constantly develop their spirituality even though they are already gods. An understanding of the god's spiritual development further sheds light on the *dang-ki*'s self-transformation.

[Straighten the Back to Sit: Belly-Cultivation Techniques as “Modern Health Methods” in Japan, 1900–1945](#)

Yu-chuan Wu

In Japan, the first half of the twentieth century saw a remarkable revival of concern with the cultivation of the belly, with a variety of belly-cultivation techniques, particularly breathing exercise and meditative sitting, widely practiced for improving health and treating diseases. This article carefully examines some practitioners' experiences of belly-cultivation practice in attempting to understand its healing effects for them within their life histories and contemporary intellectual, social and cultural contexts. It shows that belly-cultivation practice served as a medium for some practitioners to reflect on and retell their life stories, and that the personal charisma of certain masters and the communities developing around them provided practitioners with a valuable sense of belonging in an increasingly industrialized and urbanized society. Moreover, these belly-cultivation techniques provided an embodied way for some to explore and affirm their sense of self and develop individual identity. While they were increasingly promoted as cultural traditions capable of cultivating national character, they also served as healing practices by inspiring practitioners with a sense of collective identity and purpose. With

these analyses, this article sheds light on the complicated meanings of belly-cultivation for practitioners, and provides illustrative examples of the multitude of meanings of the body, bodily cultivation and healing.

[Asperger's Syndrome, Subjectivity and the Senses](#)

Ellen Badone, David Nicholas, Wendy Roberts, and Peter Kien

Situated at the intersection of anthropological work on illness narratives and research on the anthropology of autism, this paper is a close reading of an autobiographical narrative recounted by Peter, a young man diagnosed with Asperger's Syndrome, a type of autism spectrum disorder (ASD). Responding to Solomon's call for phenomenologically grounded accounts of "the subjective, sensory, and perceptual experiences of autism ... based on personal narratives and practices of being and self-awareness," this paper calls into question key assumptions in the clinical and popular literature about ASD relating to theory of mind, empathy, capacity for metaphorical thinking, and ASD as a life-long condition.

[Does Employment Promote Recovery? Meanings from Work Experience in People Diagnosed with Serious Mental Illness](#)

Javier Saavedra, Marcelino López, Sergio Gonzáles, and Rosario Cubero

Employment has been highlighted as a determinant of health and as an essential milestone in the recovery process of people with serious mental illness. Different types of programs and public services have been designed to improve the employability of this population. However, there has not been much interest in the meanings attributed to these experiences and the negative aspects of work experience. In this research, we explored the meanings that participants attributed to their work experience and the impact of work on their recovery process. Research participants lived in Andalusia (Spain), a region in southern Europe with a high unemployment rate. Two versions of a semi-structured interview were designed: one for people who were working, and one for unemployed people. Participants' narratives were categorized according to grounded theory and the analyses were validated in group sessions. Apart from several positive effects for recovery, the analysis of the narratives about work experience outlined certain obstacles to recovery. For example, participants mentioned

personal conflicts and stress, job insecurity and meaningless jobs. While valid, the idea that employment is beneficial for recovery must be qualified by the personal meanings attributed to these experiences, and the specific cultural and economic factors of each context.

[East Asian Science, Technology, & Society](#)

[Generating Local Needs through Technology: Global Comparisons in Diabetes Quality Management](#)

Sofie á Rogvi, Annetre Juul, and Henriette Langstrup

The rhetoric of need is commonplace in discourses of technology and innovation, as well as in global health. Users are said to have a need for innovative technology, and citizens in resource-poor regions to have a need for improved health care. In this article we follow a global health technology—more specifically, a piece of software for monitoring diabetes quality—from Denmark, where it was developed, to Jakarta, Indonesia, where it was introduced in 2012–13. Using ethnographic material, we show how the need for a specific technology is constituted through the very process of moving a technology from one setting to another. Central to this process of a technology traveling, we suggest, is the role played by comparisons invoked by actors and the technology itself. These comparisons become instances of evaluating local practices, thus determining what is needed in tackling a health challenge locally. With this focus on the interrelations among technological innovation, local needs, and comparisons across global distances, we aim to contribute to critical discussions of the prospects of traveling technologies for global health, as well as drawing attention to the recipient's agency in (re)shaping the capacity of the technology and thus the need-solution complex even in the face of powerful asymmetries.

[Houses of Experiment: Making Space for Science in Republican China](#)

Jia-Chen Fu

This essay explores the scientific lives of two Republican-period institutions: the Henry Lester Institute of Medical Research, based in Shanghai; and the Chongqing No. 3 Children's Home. Despite

their differences, these two spaces sheltered and nurtured scientific experimentation and functioned as heterotopic sites that controlled who could produce scientific knowledge and which kinds of scientific objects could become visible. By examining closely the research work of Bernard E. Read, Stephen M. K. Hu, and the team of nutrition scientists from National Jiangsu Medical College, this article argues that how space became hospitable for scientific experiment and how science refashioned space were mutually constitutive processes. This process of coproduction was critical to and, at times, contested through expressions of expertise.

[Biotech in Hong Kong: How Biologist-Entrepreneurs Pursued “Hong Kong’s Bioscience Dream”](#)

Christine Y. L. Luk

This article aims to put Hong Kong on the map of East Asia’s biotech studies by identifying the major themes of biotech innovation specific to the city-state’s colonial past and postcolonial present and future. I provide evidence of a concerted effort led by biologist-entrepreneurs to promote the biotech industry in postcolonial Hong Kong. Through assessing scientific literature, media representations, business strategies, and programmatic visions of key scientist-entrepreneurs in Hong Kong’s biotech enterprise, I highlight how factors such as local history and geopolitical considerations shape the emerging “Hong Kong’s bioscience dream.” Using the recent discovery of a new recombinant anticancer drug, pegylated human recombinant arginase (BCT-100), as a case in point, I explore how biotech research and applications are marketed and interpreted in relation to Hong Kong’s unique historical, political, and cultural context, thus making it distinct from other Asian Tigers. My analysis of the featured recombinant drug reveals a set of uniquely Hong Kong-centered cultural meanings attributed to biopharmaceutical research and benefits. This case reflects how genetic engineering and biotech research are configured and imagined within the context of the postcolonial Hong Kong Special Administrative Region.

[Ethos](#)

[Competing Etiologies of Trauma and the Mediation of Political Suffering:](#)

[The Disengagement from the Gaza Strip and West Bank in Secular and Religious Therapeutic Narratives](#)

Galia Plotkin Amrami

The forced evacuation of Jewish Israeli settlers from the Gaza Strip and parts of the West Bank in August 2005 (known as the Disengagement) was an extremely controversial political event in Israeli public discourse. This article seeks to explore how political differences in the public sphere were reflected in the professional narratives of mental health practitioners. Based on my field notes documenting the processes of the narration of the Disengagement within various professional settings of Israeli mental health experts, I compare the narratives produced by practitioners who hold different ideological positions vis-à-vis the settlement project. I contend that the political views of practitioners expressed in causal explanations of the Disengagement experience and in the modes of mediation of this experience in order to mobilize empathy with evacuated settlers. By focusing on the professional narration and mediation of the experience of a controversial group of sufferers (“the bad victims,” as they might be called), this research highlights the importance of the anthropological perspective on therapeutic empathy as a socially mediated reflection of the moral experience of health practitioners.

[Care, Closeness, and Becoming “Better”: Transformation and Therapeutic Process in American Adolescent Psychiatric Custody](#)

Katie Rose Hejtmanek

In the United States, young people are remanded to psychiatric custody for the institutionalized treatment of mental illness, behavior disorders, and emotional disturbances, and forced to participate in this therapeutic system. Anthropological investigations of therapeutic process have focused on individuals actively seeking and engaging in treatment or a therapeutic process. Does transformation require a person fully accept the therapeutic system? Is a coerced therapeutic process still effective? This article engages with these questions by situating the therapeutic process in psychiatric custody for American adolescents. The youth in treatment accept that transformation and even healing take place but locate the etiology and form of this change differently than the official treatment paradigms. This case study illustrates that transformation and therapeutic process as multifaceted, especially in coercive contexts, and the efficacy of

the therapeutic process as shaped by the life stage and political contexts of those engaged in the process.

[uffering Peacefully: Experiences of Infancy Death in Contemporary Zambia](#)

Sesilie Smorholm

In Ng'ombe Township in Lusaka, the death of a baby is often met with silence. Based on long-term ethnographic fieldwork, this article explores how the bereaved mother's silence is guided by wider cultural norms and values associated with death, by complex notions of what it means to be a person, and by local perceptions of mental health and well-being. To enhance the complexity of the mother's silences, it also explores how structures of poverty manifest in mothers' experiences of loss and how silence may hold feelings of inadequacy but also of care and compassion. Finally, the article aims to provide a counterweight to the predominant assumption that mothers in poor communities, who experience high levels of infant mortality, fail to mourn the death of their babies, as well as to psychological theories that assumes verbal expressions as vital for the mourner's mental recovery after loss.

[Longing for a House in Ghana: Ghanaians' Responses to the Dignity Threats of Elder Care Work in the United States](#)

Cati Coe

Home health care is a growing occupation in the United States which calls for significant emotional labor. On the basis of interviews and participant observation with home health workers from Ghana, this article argues that home health work is different from other kinds of emotional labor in that living and working in the client's house are central to the conditions of work and the dignity assaults of workers' experience. Among their strategies for responding to these dignity threats is to long for a house and to direct their energy toward an alternative social field through house construction "at home" in Ghana. Thus, the dignity threats experienced by immigrant home health workers raise concerns about the occupation's ability to retain workers as well as immigrants' sense of worth and belonging in the United States.

[Health](#)

[Complementary and alternative medicine's occupational closure in Portuguese healthcare: Contradictions and challenges](#)

Joana Almeida

This article analyses strategies of closure recently enacted by complementary and alternative medicine practitioners in order to achieve occupational control over work domains in healthcare, taking Portugal as an example. A combination of the neo-Weberian occupational closure theory of the professions and Abbott's jurisdictional vacancy theory is proposed as the framework for analysis. Acupuncture and homeopathy will be presented as case studies. Data are derived from in-depth interviews with 10 traditional acupuncturists and 10 traditional homeopaths. Data analysis suggests that (1) professionalisation, (2) alignment with biomedical science and (3) expressing 'legitimizing values' of a countervailing nature have been three significant strategies complementary and alternative medicine practitioners have used in an attempt to achieve market closure. It is argued that these strategies are contradictory: some involve allegiances, while others involve demarcation from biomedical science. A further outcome of these strategies is the promotion of complementary and alternative medicine treatments and solutions in everyday life. The success of these strategies therefore, although helping to reinforce the biomedical model, may simultaneously help complementary and alternative medicine to demarcate from it, posing thus challenges to mainstream healthcare.

[Hope and doubt in the promise of neuroimaging: The case of autism spectrum disorder](#)

Thomas Eugene Bertorelli

Although neuroimaging is currently not a component of the diagnostic process for autism spectrum disorders, some scientists hail these technologies for their promise to one day replace behaviorally based psychiatric diagnostic techniques. This article examines how psychiatrists understand the potential use of neuroimaging technologies within the context of clinical practice. Drawing on 10 semi-structured interviews with child and adolescent psychiatrists, I describe the hope and doubt that comprise their discourse of ambivalence. This analysis

demonstrates that the uses and meanings of neuroimaging technologies are rearticulated in ongoing debates in the field of psychiatry regarding the role of the biopsychiatric model in the diagnosis and treatment of mental illness. This study highlights issues surrounding the perceived biopsychiatric focus of neuroimaging technologies within clinical practice, concerns regarding misdirected research attention, and the ways in which understandings of future utility mediate perceptions of technological utility.

[In the loop: Practices of self-monitoring from accounts by trial participants](#)

Rebecca Lynch and Simon Cohn

Self-monitoring, by which individuals record and appraise ongoing information about the status of their body in order to improve their health, has been a key element in the personal management of conditions such as diabetes, but it is now also increasingly used in relation to health-associated behaviours. The introduction of self-monitoring as an intervention to change behaviour is intended to provide feedback that can be used by individuals to both assess their status and provide ongoing support towards a goal that may be formally set or remains implicit. However, little attention has been paid to how individuals actually engage in the process or act upon the information they receive. This article addresses this by exploring how participants in a particular trial ('Get Moving') experienced the process and nature of feedback. Although the trial aimed to compare the potential efficacy of three different monitoring activities designed to encourage greater physical activity, participants did not present distinctly different accounts of each intervention and the specifics of the feedback provided. Instead, their accounts took the form of much more extended and personal narratives that included other people and features of the environment. We draw on these broader descriptions to problematise the notion of self-monitoring and conclude that self-monitoring is neither solely about 'self' nor is it exclusively about 'monitoring'. We suggest that a more expansive social and material understanding of feedback can give insight into the ways information is made active and meaningful for individuals in their everyday contexts.

[Health and Place](#)

[Interfering with therapeutic tranquility: Debates surrounding biosolid waste processing in rural Ontario](#)

Sarah Mason-Renton and Isaac Luginaah

Uncertainty surrounding potential health effects of techno-industrial facilities continues to result in heightened debate about what are the *best* and *safest* options for future generations in rural places regarded by residents for their therapeutic tranquility. This research examines how a proposed biosolid processing facility in rural Ontario producing agricultural fertilizer from primarily urban sewage has in some residents elicited particularly strong concerns about potential health impacts, which are accompanied by perceptions that the tranquil and pastoral nature of their landscape is being altered. However, fueling community conflict between friends and relatives is the contested nature of the landscape's restorative qualities and the facility's disruption of this tranquil place.

[Journal of the Royal Anthropological Institute](#)

[The dialogical collective: mediumship, pain, and the interactive creation of Ndyuka Maroon subjectivity](#)

Stuart Earle Strange

This article explores how pain ritually assists in producing Afro-Surinamese Ndyuka Maroon understandings of subjectivity and the self. Ndyuka discourses conceive persons as composites of multiple human and spirit others. I describe how these discourses emerge dialogically during oracular interactions between possessed mediums and their patients. Beginning as inarticulate sensations, personal pain is ritually transformed into identifiable spirits who expose their hosts as embodiments of past and present social relations. Over the course of oracular interactions, the qualities of physical pain are made to communicate that the pain is both an identity and a vital part of the sufferers' embodied self. In parallel to this process, spirit mediums perform pain in possession to establish the origins of their authority in relations with spirits. Ritually transforming pain into identities of relation, Ndyuka oracular mediumship persuades patients to re-evaluate their subjective experiences as innate evidence of Ndyuka social ideology.

[Managerial relations in Kenyan health care: empathy and the limits of governmentality](#)

Hannah Brown

This article describes relationships between a team of mid-level government health managers working in a rural Kenyan district and those whom they managed: health workers based at rural health facilities. In this context, managerial expertise was heavily informed by personal biography and a moral obligation to empathize with the difficult working conditions and familial responsibilities of junior staff. Management should be studied seriously in anthropology, as a powerful social and bureaucratic form. This focus must extend beyond a concern with tactics and technologies of governance to consider how modalities of managerial expertise are also shaped by biography, intersubjectivity, and professional identity.

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