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In The Journals - September 2017, part I

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By Christine Sargent

Hi everyone! September was full of publications, so we'll take last month in two parts.

[American Anthropologist](#)

[“The Campesino Was Born for the Campo”: A Multispecies Approach to Territorial Peace in Colombia](#)

Angela J. Lederach

I draw on ethnographic fieldwork with a social movement, the Peaceful Process of Reconciliation and Integration of the Alta Montaña, to explore practices of peacebuilding in rural Colombia. I use a multispecies lens to interrogate the discourse of territorial peace (paz territorial), revealing the ways in which both violence and peace intertwine human and nonhuman lives and relations in the Alta Montaña. Through analysis of the everyday assemblages forged between people, animals, forests, and crops, I demonstrate how the multispecies approach to peacebuilding found in the Alta Montaña sharpens our understanding of the mutually reinforcing processes of violent conflict and environmental degradation. As a result, I argue that multispecies anthropological analysis also enables a capacious conceptualization of peace, one that recognizes the full life-worlds of people as they seek, in their everyday lives, to reweave—and create anew—the social and ecological fabric of their communities. [violence, displacement, multispecies, peacebuilding, Colombia]

[Acculturation and Health: The Moderating Role of Sociocultural Context](#)

Molly Fox, Zaneta M. Thayer, Pathik D. Wadhwa

Acculturation represents an important construct for elucidating the determinants and consequences of health disparities in minority populations. However, the processes and mechanisms underlying

acculturation's effects on health are largely undetermined and warrant further study. We integrate concepts from anthropology and statistics to describe the role of sociocultural context as a putative modifier of the relationship between acculturation and health. Sociocultural context may influence the extent to which exposure to host culture leads to internalization of host cultural orientation and may influence the extent to which acculturation leads to stress and adoption of unhealthy behaviors. We focus on specific aspects of sociocultural context: (1) neighborhood ethno-cultural composition; (2) discrimination; (3) discrepancy between origin and host environments; (4) discrepancy between heritage and host cultures; (5) origin group, host group, and individual attitudes toward assimilation; (6) variation in targets of assimilation within host community; (7) public policy and resources; and (8) migration selection bias. We review and synthesize evidence for these moderation effects among first- and later-generation immigrants, refugees, and indigenous populations. Furthermore, we propose best-practices data-collection and statistical-analysis methods for this purpose, in order to improve our understanding of the complex, multilevel aspects of the relationship between acculturation and health. [acculturation, minority health, health disparities, sociocultural context, effect moderation, statistical interaction]

[Natural Graffiti and Cultural Plants: Memory, Race, and Contemporary Archaeology in Yosemite and Detroit](#)

John M. Chenoweth

This article argues that some elements of material culture can creatively cross the line between notions of “nature” and “culture” as these and related ideas are often tacitly understood by some modern people. This has implications for the biosphere, but the division of these categories is also tied up with the division of people, processes of identification, memorialization, and the way some people are defined out of the human realm altogether. Modern material culture—objects used, left, manipulated, and removed by people—seems particularly adept at telling us about these categories in the minds of some modern people. An archaeology of the contemporary examines how people interact with different kinds of “natural” things in places where nature and culture, in the modern imaginary, meet and conflict. In the starkly different contexts of the city of Detroit and Yosemite National Park, such objects have been managed and manipulated in a way that speaks to crucial issues of memory, identity, and race.

[contemporary archaeology, nature and culture, memory, national parks, Detroit]

[Uniquely Human: Cultural Norms and Private Acts of Mercy in the War Zone](#)

Bilinda Straight

War-zone mercy—sparing of one’s culturally constructed enemies in the midst of organized group violence—is a political act but also a potentially empathically motivated one that has contributed to shared expressive gestures across cultural boundaries and to international laws of war. This article elucidates historical and cross-cultural norms for war-zone mercy in order to provide a theoretical framework for scholarly research examining this behavior and offers a case study with systematically collected data about war-zone mercy during Kenyan pastoralist Samburu experiences of coalitional lethal violence (low-intensity chronic warfare). As a whole, this article presents evidence from human and nonhuman animal studies that war-zone mercy is a uniquely human form of empathy-produced altruism. Humans may be trained or culturally conditioned to kill, and yet widely available historical and cross-cultural examples of war-zone mercy underscore the ways in which prosocial emotions like empathy reveal and pervade the human. [war, agency, prosocial emotion, altruism, Kenya]

[BioSocieties](#)

[White opioids: Pharmaceutical race and the war on drugs that wasn't](#)

Julie Netherland, Helena Hansen

The US ‘War on Drugs’ has had a profound role in reinforcing racial hierarchies. Although Black Americans are no more likely than Whites to use illicit drugs, they are 6–10 times more likely to be incarcerated for drug offenses. Meanwhile, a very different system for responding to the drug use of Whites has emerged. This article uses the recent history of White opioids – the synthetic opiates such as OxyContin® that gained notoriety starting in the 1990s in connection with epidemic prescription medication abuse among White, suburban and rural Americans and Suboxone® that came on the market as an addiction treatment in the 2000s – to show how American drug policy is racialized, using the lesser

known lens of decriminalized White drugs. Examining four 'technologies of whiteness' (neuroscience, pharmaceutical technology, legislative innovation and marketing), we trace a separate system for categorizing and disciplining drug use among Whites. This less examined 'White drug war' has carved out a less punitive, clinical realm for Whites where their drug use is decriminalized, treated primarily as a biomedical disease, and where their whiteness is preserved, leaving intact more punitive systems that govern the drug use of people of color.

[Patient-centred medicine and the broad clinical gaze: Measuring outcomes in paediatric deep brain stimulation](#)

John Gardner

Policymakers have argued that patient-centred approaches, which emphasise 'greater patient involvement' and 'comprehensive care', can improve health-care outcomes and lead to a more efficient use of health resources. As a way of anticipating some of the implications of these approaches, this article examines a context that is heavily influenced by the ideals of patient-centred medicine. Drawing on ethnographic research conducted with a multidisciplinary team providing deep brain stimulation to children with movement disorders, this article will illustrate that patient-centred principles can become embedded within particular sociotechnical arrangements involving architectural forms, assessment tools and clinical team structures. These arrangements, it is argued, are implicated in the emergence of a broad clinical gaze: a clinical interest that extends from the shapes and structures of the body, to the subjective thoughts and emotional state of the patient, to elements of the patient's social context and their ability to act within it. The implications of this gaze will be discussed, and this article will suggest that it constitutes a form of disciplinary power that seeks to reaffirm and perpetuate particular ways of being human.

[Spliced: Boundary-work and the establishment of human gene therapy](#)

Courtney Addison

Human gene therapy (HGT) aims to cure disease by inserting or editing the DNA of patients with genetic conditions. Since foundational genetic techniques came into use in the 1970s, the field has developed to the point that now three therapies have

market approval, and over 1800 clinical trials have been initiated. In this article I present a brief history of HGT, showing how the ethical and practical viability of the field was achieved by key scientific and regulatory actors. These parties carefully articulated gene therapy's scope, limiting it to therapeutic interventions on somatic cells, and cultivated alliances and divisions that bolstered the field's legitimacy. At times these measures faltered, and then practitioners and sometimes patients would invoke an ethical imperative, posing gene therapy as the best solution to life and death problems. I suggest that we consider how boundary-work stretches out from science to enlist diverse publics, social formations and the natural world in the pursuit of legitimacy.

[From the pergonal project to Kadimastem: A genealogy of Israel's reproductive-industrial complex](#)

Sigrid Vertommen

In the Israeli 'start-up nation' biotechnology has emerged as one of the most thriving knowledge-intensive industries. Particularly the med-tech and repro-tech sector are widely regarded as world class in their ability to develop experimental therapies and medicines based on topnotch 'pioneering' biomedical research. These developments have rightly been attributed to the neoliberal turn of the late seventies when Israel started to position itself as significant player in the global health and research market. By exploring the (dis)continuities between Pergonal, a fertility drug developed in the late 1950s by the Israeli scientist Bruno Lunenfeld and the Swiss-Italian pharmaceutical company Serono, and the experimental stem cell therapies that are currently being developed by the Israeli biotech company Kadimastem, this article argues, however, that a much older, but still ongoing history of Zionist settler colonial warfare in Palestine/Israel also lies behind the emergence of Israel's flourishing reproductive-embryonic industry. A Zionist demographic logic that aims to consolidate a Jewish majority in a Jewish state has created fertile conditions for the emergence of a reproductive-industrial complex in which the interests of a pronatalist Jewish state and a biomedical establishment – consisting of academic entrepreneurs, venture capitalists, biotech companies and pharmaceutical giants – have coalesced. The bodies of Israeli women play a pivotal role in this process, not only as reproducers of the settler nation but also as providers of the raw biological materials that are needed to produce experimental research results and to generate surplus bio-value.

[Pathways and prospects in cancer research: Securing futures and negotiating boundaries](#)

Alexandra Hillman, Jamie Lewis, Glyn Elwyn

This paper draws on literature from the sociology of expectations to explore accounts of experts in cancer research and clinical practice. The cancer specialists' accounts presented in this article are taken from interviews undertaken as part of a project that aimed to develop a research agenda for the next ten to thirty years that will achieve early detection and prevention in the four main cancers: (i) bowel and colorectal, (ii) prostate, (iii) lung and (iv) breast. Drawing on secondary analysis of the interviews, this article provides a sociological exploration of both the experts' versions of the future and the interactions between the interviewer and research participant to show expectation in the making: the competing stories of what is and what ought to be the focus of cancer research now and in the (near) future. The building of a cancer research agenda is shown to be a contested future, represented by a dominant and resistant view of the cancer problem, in which cancer specialists must engage in performative strategies and boundary work to frame the present problem: what cancer is and how it can be detected and, subsequently, to claim credibility for a future pathway

[\(Re\)configuring research value: international commercial clinical trials in the Russian Federation](#)

Olga Zvonareva, Nora Engel, Natalia Kutishenko, Klasien Horstman

Clinical trials of new drugs are generally understood in terms of contribution to the future well-being of patients and society at large, while studies of the political economy of trials reveal that global health inequalities have come to sustain the continuous and lucrative operation of this enterprise. The divide between profit generation and improvements in local well-being could be especially vivid when international commercial clinical trials are conducted in new, non-traditional locations outside of North America and Western Europe. This article focuses on how this divide is managed in the everyday work of conducting trials in a research centre in Russia. It explores how investigators and research participants engage in the work of translating trials into academic capacity-building, development of local medical expertise and provision of public health benefits. That is, research

value is being multiply configured in clinical, scientific and economic domains. We view the conduct of clinical trials as a boundary process which, through enabling multiplication of value, bridges the realms of health and wealth. This reading of the process of conducting trials opens up opportunities to think about ways to maximise the value of medical experimentation and to (re)link clinical research and public good.

[Narrating uncertainty: Variants of uncertain significance \(VUS\) in clinical exome sequencing](#)

Stefan Timmermans, Caroline Tietbohl, Eleni Skaperdas

Exome sequencing is an innovative next-generation sequencing technology that examines the majority of disease-causing genes with a single test. Physicians and patients resort to exome sequencing to probe for a genetic cause of disease. The technology produces about 20,000 variants and many are of uncertain clinical relevance. Drawing from ethnographic field notes and audio recordings of over 1,500 patient cases discussed at genetic data board meetings over a three-year period, this article reports on how a collective of laboratory scientists and clinicians contend practically and conceptually with variants of uncertain significance (VUS). Rather than standardizing the inclusion criteria for a VUS, the collective contextualizes each VUS with its own evidentiary narrative. The VUS then becomes subject to revision based on evolving evidence, further testing, and updated interpretations. We argue that the epistemic uncertainty of VUS becomes productive; it indicates future causality and suggests that genetic causes can explain patients' symptoms even if no known pathogenic variants could be located.

[Body & Society](#)

Special Issue: Indeterminate Bodies

[Indeterminate Bodies: Introduction](#)

Claire Waterton and Kathryn Yusoff

Indeterminate Bodies organizes a number of theoretical and empirical studies around the concept and actuality of indeterminacy, as it relates to body and society. Located within the struggle to apprehend different categories of 'body' in the volatile

flows of late-capital, indeterminacy is considered through such multiple incarnations as economy, contingency, inheritance, question, force, uncertainty, materiality and affective resistance to determination. While indeterminacy is often positioned as the 'trouble' or friction in subject/object knowledge-formation (framed as ontological or empirical challenge), it also engenders affects such that some subjects are both in and out of recognition. Questions of indeterminacy overlap with work on imperceptibility, giving rise to interlocked questions about the modes of representation, categorization, inclusion, exclusion and sensibility in the production of bodies. We address the hesitations, difficulties and necessities of working with and through indeterminacy in order open up new descriptions, visions and modes of political work.

[Plastic Naturecultures: Multispecies Ethnography and the Dangers of Separating Living from Nonliving Bodies](#)

Kim De Wolff

A jellyfish surrounds a plastic fragment, merging the synthetic material with its body; a water agency poster warns of dangerous plastic bottle 'fish' in the Mediterranean; marine organisms take shelter on and under synthetic materials. These are the denizens of a growing realm marine ecologists call the 'plastisphere', where sea life and plastics meet. Building upon multispecies ethnography, science and technology studies interrogations of nature/culture divides and the practical work of classification, this article explores the indeterminacy – the very plasticity – of the category of 'species' as it is engaged in seriousness and irony, with living and nonliving bodies. First, I draw on participant observation at a nonprofit marine institute laboratory in California to trace the travels of plastic-creatures through attempts to disentangle them in the pursuit of scientific knowledge. Here volunteers sort tiny plastic bits from animal ones under the microscope, enacting material boundaries as they decide what gets counted as life (not plastic) and what does not (plastic). Second, I follow movements of plastic-creatures through public education campaigns, paying particular attention to assumptions about belonging and agency enacted with assumptions about whether and when plastic-species should or should not meet. I argue that the 'danger' of plastic relationships lurks not in associations but in the very categories used to know and live with forms of plastic and forms of life, in the kinds of belonging that emerge with kinds of materials, and in the failure to recognize the impossibility of their separation.

[Microbial Suicide: Towards a Less Anthropocentric Ontology of Life and Death](#)

Astrid Schrader

While unicellular microbes such as phytoplankton (marine algae) have long been considered immortal unless eaten by predators, recent research suggests that under specific conditions entire populations of phytoplankton actively kill themselves; their assumed atemporality is being revised as marine ecologists recognize phytoplankton's important role in the global carbon cycle. Drawing on empirical research into programmed cell death in marine microbes, this article explores how, in their study of microbial death, scientists change not only our understanding of microbial temporality, but also reconstruct the relationship between life and death, biological individuality and assumptions about a natural teleology associated with bounded biological systems and genetic programmes. Reading this research together with a Derridean deconstruction of the limit between human and other animals with respect to death, this article explores how the deconstruction of individuality from within biology may suggest alternatives to our anthropocentric notion of time and embodiment.

[Indeterminate Subjects, Irreducible Worlds: Two Economies of Indeterminacy](#)

Kathryn Yusoff

Lodged in an impasse between questions of environmental justice and modes of capitalisation in the green economy, indeterminacy is a vulnerable and porous relation. Pollution activates a potentiality in the organism to be otherwise, to generate certain kinds of tumours, mini-deaths or mutations. Toxicity has an intermediary status that launches a mobility of effects that is often fragmented through sense organs, affirming forms of non-identity in biopolitical relations. Organisms are receptive to such bodily reconfigurations precisely because they are open to the material communication of the world. In contrast to the "hidden labour" of indeterminacy in capitalist modes of capture, this article crafts an analytics of indeterminacy as an interjection in the politics of environments. Through dispersants in the Gulf of Mexico and military bees, two economies of indeterminacy are discussed. Drawing on Georges Bataille's notion of political economy, I argue that what is required is an economy of radical inequivalence; an

excessive engagement with the possibilities of indetermining forces to make fleeting marks.

[Indeterminacy and More-than-human Bodies: Sites of Experiment for Doing Politics Differently](#)

Claire Waterton

This article analyses research that has explored the potential of a focus on indeterminate bodies for decision making, policy and politics. Drawing on different ways of conceptualising indeterminacy in scientific and policy domains it describes the Loweswater Care Project, a participatory 'knowledge collective' that attempted to avoid converting the complexities of vital cyanobacterial bodies into a purely social or managerial set of questions around water quality. Through a commitment to opening out the nature of 'things', participants in this collective honed new questions and avenues of inquiry around cyanobacteria and its relations. The Loweswater Care Project was a kind of 'open' in Haraway's sense, where questions and demands are put to bodies, and to the apparatus that allows us to sense them, in ways that do not shy away from the probabilistic character of entities and their relations. The implications of generating indeterminacies in this setting are explored for environmental decision making, policy and politics.

[Adopting Neuroscience: Parenting and Affective Indeterminacy](#)

Adrian Mackenzie, Celia Roberts

What happens when neuroscientific knowledges move from laboratories and clinics into therapeutic settings concerned with the care of children? 'Brain-based parenting' is a set of discourses and practices emerging at the confluence of attachment theory, neuroscience, psychotherapy and social work. The neuroscientific knowledges involved understand affective states such as fear, anger and intimacy as dynamic patterns of coordination between brain localities, as well as flows of biochemical signals via hormones such as cortisol. Drawing on our own attempts to adopt brain-based parenting, and engaging with various strands and critiques of new materialism and affect theory, we explore the ways in which the social sciences and humanities might fruitfully engage with neuroscientific concepts and affects. How does science-affected indeterminacy, with all its promises of ontological

and experiential agency, help us to observe, wait, bind or hold together volatile mixtures of habit, speech and action?

Critical Public Health

[An exploration of how health care professionals understand experiences of deafness](#)

Danielle Ferndale, Bernadette Watson & Louise Munro

Findings from recent deaf education intervention programmes with health care professionals emphasise the importance of sociocultural dimensions of medicine, pointing to the need to further investigate health professionals' current understandings of deafness. Situated within a social constructionist and critical realist framework, we investigated health professionals' understandings of deafness and experiences of providing health services in Australia to d/Deaf people. Through an inductive thematic analysis of 18 individual interviews with medical or allied health professionals, we identified an overarching theme we labelled hearingness as privileged, whereby professionals accounted for the quality of the health services available to d/Deaf people in Australia. The professionals recognised the services as not good enough and, through relating their efforts to do the best they can, and describing how the situation could always be better, it was evident that the professionals were negotiating a larger health system that disadvantages the needs of d/Deaf people for the needs of people with hearingness. We discuss the implications of working within a system that privileges hearingness.

Culture, Medicine, and Psychiatry

[Shame, Blame, and Status Incongruity: Health and Stigma in Rural Brazil and the Urban United Arab Emirates](#)

Lesley Jo Weaver, Sarah Trainer

Stigma is a powerful determinant of physical and mental health around the world, a perennial public health concern that is particularly resistant to change. This article builds from sociologist Erving Goffman's classic conception of stigma as a unitary social phenomenon to explore the stigma attached to two seemingly dissimilar conditions: food insecurity in rural Brazil, and obesity in the urban United Arab Emirates. Our analyses underscore that

both conditions are stigmatized because they represent a departure from a deeply-held social norm, and in both cases, self-stigma plays an important role. Furthermore, in both cases, the stigma associated with food insecurity and obesity is likely at least as harmful to personal wellbeing as are the biological consequences of these conditions. Finally, evidence increasingly links obesity and food insecurity causally. Our analyses suggest that these forms of stigma transcend individuals and are largely structural in their origins, and therefore that they are most likely to be improved through structural change.

[Don't Give Up! A Cyber-ethnography and Discourse Analysis of an Online Infertility Patient Forum](#)

Mihan Lee

Infertility affects women across the socioeconomic spectrum; however, it is by no means egalitarian in its distribution, nor uniform in its lived experience. Evidence shows striking disparities by income, race, and education in infertility prevalence, access to infertility services, and success rates after receiving infertility treatments. However, few studies so far have investigated disparities in patients' access to psychological support during the infertility journey. This paper undertakes a cyber-ethnography of the online patient forum, "Finding a Resolution for Infertility," hosted by RESOLVE: The National Infertility Association. It also draws from interviews with 54 infertility patients recruited from the forum. Our aim was to examine how social support operates within this virtual realm, by examining how the forum's language, norms, and values create and enforce categories of deserving and belonging among site users. We find that the forum's discourse privileges an infertility narrative we term the "persistent patient," in which a patient exhaustively researches treatment options, undergoes multiple cycles of treatment despite repeated failures, and ultimately achieves success (a healthy baby). Meanwhile, there is little to no discursive space for discussion of the financial and social resources necessary to act in accordance with this script. Thus, women without such resources can be alienated, silenced, and denied mental health support by this online community.

[Actively Negotiating the Mind–Body Divide: How Clozapine-Treated Schizophrenia Patients Make Health for Themselves](#)

Julia E. H. Brown, Simone Dennis

It is well recognised that antipsychotic treatments impact the whole body, not just the target area of the brain. For people with refractory schizophrenia on clozapine, the gold standard antipsychotic treatment in England and Australia, the separation of mental and physical regimes of health is particularly pronounced, resulting in multiple, compartmentalised treatment registers. Clinicians often focus on the mental health aspects of clozapine use, using physical indicators to determine whether treatment can continue. Our observations of 59 participants in England and Australia over 18 months revealed that patients did not observe this hierarchisation of mental treatments and physical outcomes. Patients often actively engaged in the management of their bodily symptoms, leading us to advance the figure of the active, rather than passive, patient. In our paper, we do not take the position that the facility for active management is a special one utilised only by these patients. We seek instead to draw attention to what is currently overlooked as an ordinary capacity to enact some sort of control over life, even under ostensibly confined and confining circumstances. We argue that clozapine-treated schizophrenia patients utilise the clinical dichotomy between mental and physical domains of health to rework what health means to them. This permits patients to actively manage their own phenomenological 'life projects' (Rapport, *I am Dynamite: an Alternative Anthropology of Power*, Routledge, London 2003), and forces us to reconsider the notion of clinical givenness of what health means. This making of one's own meanings of health may be critical to the maintenance of a sense of self.

[Mental Ill Health, Recovery and the Family Assemblage](#)

Rhys Price-Robertson, Lenore Manderson, Cameron Duff

The recovery approach is now among the most influential paradigms shaping mental health policy and practice across the English-speaking world. While recovery is normally presented as a deeply personal process, critics have challenged the individualism underpinning this view. A growing literature on "family recovery" explores the ways in which people, especially parents with mental ill health, can find it impossible to separate their own recovery experiences from the processes of family life. While sympathetic to this literature, we argue that it remains limited by its anthropocentricity, and therefore struggles to account for the varied human and nonhuman entities and forces involved in the

creation and maintenance of family life. The current analysis is based on an ethnographic study conducted in Australia, which focused on families in which the father experiences mental ill health. We employ the emerging concept of the “family assemblage” to explore how the material, social, discursive and affective components of family life enabled and impeded these fathers’ recovery trajectories. Viewing families as heterogeneous assemblages allows for novel insights into some of the most basic aspects of recovery, challenging existing conceptions of the roles and significance of emotion, identity and agency in the family recovery process.

[Intersecting Cultures in Deaf Mental Health: An Ethnographic Study of NHS Professionals Diagnosing Autism in D/deaf Children](#)

Natassia F. Brenman, Anja Hiddinga, Barry Wright

Autism assessments for children who are deaf are particularly complex for a number of reasons, including overlapping cultural and clinical factors. We capture this in an ethnographic study of National Health Service child and adolescent mental health services in the United Kingdom, drawing on theoretical perspectives from transcultural psychiatry, which help to understand these services as a cultural system. Our objective was to analyse how mental health services interact with Deaf culture, as a source of cultural-linguistic identity. We ground the study in the practices and perceptions of 16 professionals, who have conducted autism assessments for deaf children aged 0–18. We adopt a framework of intersectionality to capture the multiple, mutually enforcing factors involved in this diagnostic process. We observed that professionals working in specialist Deaf services, or with experience working with the Deaf community, had intersectional understandings of assessments: the ways in which cultural, linguistic, sensory, and social factors work together to produce diagnoses. Working with a diagnostic system that focuses heavily on ‘norms’ based on populations from a hearing culture was a key source of frustration for professionals. We conclude that recognising the intersectionality of mental health and Deaf culture helps professionals provide sensitive diagnoses that acknowledge the multiplicity of D/deaf experiences.

[Contemporary Drug Problems](#)

[Assembling the Social and Political Dimensions of Take-Home Naloxone](#)

Adrian Farrugia, Suzanne Fraser, Robyn Dwyer

This commentary explores the complex position that take-home naloxone holds as a harm reduction strategy in contemporary public health contexts. Providing the opioid antagonist naloxone to people who consume opioids and others likely to witness opioid overdose is currently positioned as an exemplary lifesaving public health intervention. Few socially oriented studies of take-home naloxone raise questions beyond whether or not take-home naloxone “works”—lines of inquiry that we think should be raised. Until take-home naloxone efforts address harms as effects of social context and policy regimes, the focus on individual behavior change will constrain the equitable distribution of responsibility for tackling overdose and the capacity to achieve more ambitious harm reduction goals such as decriminalization and the associated destigmatization of those who consume opioids. We conclude by arguing for the analytic incorporation of issues of power and normalization that animate responses to opioid overdose, including take-home naloxone.

[Becoming a Medical Marijuana User: Reflections on Becker’s Trilogy—Learning Techniques, Experiencing Effects, and Perceiving Those Effects as Enjoyable](#)

Nicholas Athey, Neil Boyd, Elysha Cohen

Howard Becker’s analysis of marijuana use has had long-standing impacts upon our collective understanding of how individuals become drug users. This paper ultimately asks whether the framework described by Becker is unique to recreational marijuana use or, rather, a process that is not fundamentally different from that employed with the consumption of any psychoactive drug, whether taken for medical and/or recreational purposes. We used detailed semistructured interviews with Canadians (n = 22) who self-identify as medical marijuana users. Respondents were asked a series of questions about their reasons for use, medical conditions and symptoms, current and past consumption habits, how they learned about medical marijuana, and the substance of that learning process. The analytic approach is informed by Becker’s conceptual framework and peer-reviewed and publicly available information sources. Although the principal reasons for self-described medical use—relief from pain, anxiety, and insomnia—are consistent across respondents, the way in which they come to define their use as medical is heterogeneous. Sources of information and the substance of such information are

more complex and detailed than that described by Becker, suggesting a more intricate learning process when the motivation for use is therapeutic. Drawing upon detailed interviews with self-described medical users, we argue that the line drawn between recreational marijuana use and medically driven use is blurred: Most self-described users are seeking both relief from pain and the pursuit of recreation in their use of the drug, a finding that has implications for the logic of a clear separation in law and policy between these two motivations for consumption.

[East Asian Science, Technology and Society](#) (open access)

[Bionetworking and Strategic Linking between India and Japan: How Clinical Stem Cell Intervention Continues despite New Regulatory Guidelines](#)

Prasanna Kumar Patra, Margaret Sleeboom-Faulkner

Based on a case study of a clinical stem cell intervention (CSCI) center in Chennai, India, this article explores distinct entrepreneurial strategies for the promotion of unrecognized clinical stem cell applications in India. It shows that the center—an Indo-Japanese joint-venture—is able to promote the CSCI due to its central position in a network relationship, its possession of specialized skills and knowledge, and its ability to maneuver other actors in the network and to identify and utilize their latent value. We examine the developmental history of the making and remaking of regulation and the shift in the way clinical stem cell application providers function—from institutional embedment to strategic linking through collaborative networks. We ask why and how unauthorized clinical applications are sustained and promoted in India. We conclude that this is possible as a result of a number of factors: jurisdictional ambiguity, institutional inability, issues concerning the legal enforceability of the relevant guidelines, the complexity of the collaborative network structure that facilitates the circumvention of the regulation, and the nonfunctioning of apex-level committees.

Forum: on Evelyn Fox Keller's, "[Globalization, Scientific Lexicons, and the Future of Biology](#)"

With contributions by:

[Daiwie Fu](#) – An Introduction to the Forum and Its Origins

[Francesca Bray](#) – Science, Language, and the Purity of Bottled Water

[Ruey-Lin Chen](#) – A Linguistic or an Ontological Problem? Some Comments

[Tomoko Ishida](#) – Gene: From Demarcation to Dynamic Meanings

[Dayk Jang](#) – What Can Cultural Psychology Give to Twenty-First-Century Biology?

[Karine Chemla](#) – What Can Be Derived from Evelyn Fox Keller’s Article about Scientific Cultures? Some Thoughts about Language and Scientific Activity

[Evelyn Fox Keller](#) – Response to Comments on “Globalization, Scientific Lexicons, and the Future of Biology”

[Ethos](#)

[Care and Relatedness among Rural Mapuche Women: Issues of Cariño and Empathy](#)

Marjorie Murray, Sofía Bowen, Marisol Verdugo, Jona Holtmannspötter

Based on ethnographic fieldwork in the Araucanía region of Chile, this article analyzes the caring practices of rural Mapuche women through relatedness, investigating how the study of mutual care illuminates the acknowledgment of sociality and personhood. Recounting concrete daily practices of mutual care—ayuda (help), estar atenta (being aware), and estar ahí (being there)—we examine the enactment and narratives of what these women label cariño, or affection. We argue that these women’s caring practices and sense of cariño are coherent with the acknowledged volitional and autonomic features of Mapuche personhood. We also claim that paying specific attention to cariño provides novel insight for an understanding of rural Mapuche women’s personhood. Cariño stands for what is considered empathy in different societies, in which feelings and actions related to empathy and empathy-like phenomena are indistinguishable. We hope to contribute to the study of mutual care in everyday life. [care, women, Mapuche, autonomy, empathy]

[Specters of Social Antagonism: The Cultural Psychodynamics of Dream Aggression among the Tzotzil Maya of San Juan Chamula \(Chiapas, Mexico\)](#)

Kevin P. Groark

In this article, I present an analysis of “persecution dreams” among the Tzotzil Maya of San Juan Chamula, discussing the complex connections among sickness, interpersonal aggression, ideologies of social antagonism, and the spectral phantasies that shadow these social phenomena. Building on this ethnographic foundation, I present a “cultural psychodynamic” account framed in terms of projective-introjective dynamics (functioning at both the individual and social levels), arguing that the aggression dream serves as an experience structure in which inner and outer realities become deeply interwoven—often resulting in an increased sense of insecurity and existential threat. At its broadest level, this article is concerned with the affective dimensions of dream life, the processing of real affects and social relations within the register of phantasy, and the transposition of these phantasy-laden feelings back into waking life, where they influence not only the individual’s sense of well-being, but the tenor of actual interpersonal relations.

[“At Such a Good School, Everybody Needs It”: Contested Meanings of Prescription Stimulant Use in College Academics](#)

Amy Cooper, Lisa McGee

Approximately 15% of US college students have used Adderall or other stimulant medications without a prescription or not as prescribed. The development of college academics into a field of practice amenable to unauthorized pharmaceutical intervention suggests a growing acceptance of pharmaceutical self-fashioning among young people in the United States. However, analyzing illicit stimulant use from college students’ perspectives, we documented significant contestation over the practice’s acceptability. For some, unauthorized stimulant use violated the rules of fair play, but for others it was an understandable strategy to gain an edge and maximize one’s “return on investment.” Viewing college academics in market-oriented terms encouraged students to understand illicit stimulant use as an expectable (if not always morally acceptable) strategy for managing the competition of college life and a postrecession job market. This analysis shows how the moral valence of unauthorized stimulant use is strongly shaped by the sociocultural context that shapes people’s realities.

[Health and Place](#)

[Smelling therapeutic landscapes: Embodied encounters within spaces of care farming](#)

Richard Gorman

The conceptual framework of ‘therapeutic landscapes’ has been used as a means of considering the significance of specific environments, spaces, and places for aspects of health. Building on a growing attention to the sensory elements of spaces of health and wellbeing, this article mobilises empirical research on ‘care farming’ practices to discuss how smellsapes come to be crucial in fulfilling anticipations, imaginations, and expectations of a ‘therapeutic space’. This article highlights how embodied relationships with specific scents can constitute a therapeutic encounter with place, actively influencing practices and engagement with(in) place, and the ways by which place can have a meaningful affect on health.

[\(Em\)placing recovery: Sites of health and wellness for individuals with serious mental illness in supported housing](#)

Myra Piat, Kimberly Seida, Judith Sabetti, Deborah Padgett

This study used photo-elicitation methodology to explore how the move from supervised to supported housing affects recovery and community connections for individuals living with serious mental illness (SMI) in four Canadian cities. Qualitative interviews conducted in 2015 revealed five themes: (1) the characteristics distinguishing home from housing; (2) the importance of amenities offered by supported housing; (3) the connections between accessibility, mobility, and wellbeing; (4) the role of certain places in facilitating aspects of recovery such as offering hope or facilitating social connectedness; and (5) the concrete and metaphorical impact of changing vantage points on identity (re)construction. Utilizing therapeutic landscapes as an analytical framework, and combining insights from the health geography, and mental health (MH) housing and recovery literatures, this study deepens current understanding of how everyday places—conceptualized as therapeutic landscapes—directly and indirectly support MH recovery for individuals with SMI. Implications for research on housing, and on the spatial aspects of recovery processes are discussed.

[Pills in paradise: Exploring international lifestyle and retirement migrants’](#)

[perceptions of the pharmaceutical sector on Cozumel Island, Mexico](#)

Leon Hoffman, Valorie A. Crooks, Jeremy Snyder

International lifestyle and retirement migration is a growing phenomenon, yet little is known about migrants' experiences of health care in destination countries. This includes use of and access to pharmaceutical selling establishments. This article explores international lifestyle and retirement migrants' experiences and perceptions of the local pharmaceutical sector on Cozumel Island, Mexico. Qualitative data, collected through semi-structured interviews (n = 26), finds that participants are concerned with accessibility, quality and communication within the island's pharmaceutical sector. Subsequent analysis suggests that these concerns arise through comparison with previous health care environments and that migrants attempt to remedy them by spatially reorganising their pharmacy engagements through practices which may contribute to adverse health outcomes.

[Journal of the Royal Anthropological Institute](#)

[Zoonotic diagrams: mastering and unsettling human-animal relations](#)
(open access)

Christos Lynteris

This article approaches interspecies relations through an examination of the prevalent visual device employed in the representation of animal-human infection in the life sciences: the zoonotic cycles diagram. After charting its emergence and development in the context of bubonic plague, I explore how this diagrammatic regime has been applied in two distinct practical contexts: a plague warning sign on the Grand Canyon National Park hiking trail; and the on-line public information campaign launched by the US Centers for Disease Control and Prevention (CDC) in the wake of the Ebola outbreak of 2014-16. The article demonstrates the principal ontological and biopolitical operations of these diagrams, arguing that, far from simply summarizing epidemiological narratives of animal-human infection, they function both as pilots of human mastery over human-animal relations and as crucial sites of unsettlement for the latter.

[Settler indigeneity and the eradication of the non-native: self-determination and biosecurity in the Falkland Islands \(Malvinas\)](#)

James J.A. Blair

This article analyses how settlers of the Falkland Islands (Malvinas) construct themselves as 'natives' through environmental management. Taking a multispecies ethnographic and historical approach to studying the Falkland Islanders' self-determination claim, I explore a series of ecological practices that demonstrate how some nonhumans become institutionalized into systems of racial and colonial classification whereas others appear natural. I show how agroindustrial and technoscientific value systems categorize human and nonhuman cohabitants according to degrees of political, economic, and ecological status through particular periods in the Falklands: from the eradication of 'native pests' (1833-1982) to defence against 'alien invaders' (1982-present). Towards a conclusion, I analyse how Islanders have begun to uproot their own ecological imperial past through removal of British-introduced 'invasive' species and native habitat restoration. The article argues that attention to how settlers colonize with natives contributes significantly to a critical multispecies anthropology with broader implications for debates on ethnogenesis and indigeneity.

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