

Inhorn, Marcia C. and Emily A. Wentzell (eds.). 2012. *Medical Anthropology at the Intersections: Histories, Activisms and Futures*. Durham, London: Duke University Press. 352 pp. Pb.: \$25.95. ISBN: 9780822352709.

Medical Anthropology at the Intersections, edited by Marcia Inhorn and Emily Wentzell, is the result of a collaboration of prominent medical anthropologists. It is the product of a conference of the Society for Medical Anthropology at Yale University in 2009, entitled *Medical Anthropology at the Intersections: Celebrating Fifty Years of Interdisciplinarity*, which marked an opportunity for authors at the conference to expand on their plenary talks. The book is written in three parts: *Histories*, *Queries* and *Activisms*, and beautifully describes the development of the discipline throughout history by focusing on the ‘ways in which it has come to intersect with numerous other disciplines’ (p. 1).

The first part, *Histories*, features the authors Emily Martin, Lynn M. Morgan and Lawrence Cohen and assesses the intersection of anthropology with three fields: feminism and technoscience studies, medical history, and international and area studies. Martin brings her topic to life by using her own professional and personal development to describe how anthropology was shaped through its connection with the ever-changing topics of feminism, science and technology studies. Morgan uses the case of the Chinese ‘baby towers’ (p. 45) and embryo collection by Western anatomists in the early twentieth century to reflect on the importance of confronting difficult historical actions. She also illustrates how the links between anthropology and anatomy helped to shape our understanding of the Chinese ‘disregard for infant life’ (p. 45). In his chapter, Cohen gives a critique of the historical use of area studies and the problematic intersections between medicine and anthropology that resulted in a warped study of cultures seen through a prism of post-war colonialism and cold war politics.

The second part, *Queries*, is co-authored by Didier Fassin, Arthur Kleinman and Margaret Lock, and encourages the reader to re-evaluate some fundamental notions within anthropology concerning the fields of global health, mental health, and genetics and genomics. Fassin speaks of globalisation as a new form of hype that is enthralling activists and politicians world-wide. He warns of the phenomenon of ‘new problematizations’ (p. 113), i.e. the act of renaming an old problem without actually finding new solutions, and he questions whether globalisation is really as new as it appears. Fassin argues that “global health” can be either interpreted as meaning worldwide or universal health; a geographical understanding versus an idealistic notion, while the term “health” has the dual meaning of individual versus collective and social health. He thus reflects on the complexity of global health, its potential for abuse by Western powers and how anthropological research continues to develop our understanding of it and thus plays as important a role in activism as conventional humanitarian work does.

Kleinman concentrates on the future of the intersection of medical anthropology with mental health. He laments that the field of mental health has declined in popularity and outlines some important questions for it in the future. These questions cover the overlap of ‘social suffering’ (p. 118) with mental health problems, whether it is time to abandon the concept of stigma, the lack of adequate services in psychiatry to those most

deprived and most in need due to the ‘psychopharmacological paradox’ (p. 124). For future studies, Kleinman suggests a re-evaluation of how advances in neurobiology will affect anthropological work in the field of mental health.

Lock turns her attention to the relatively recent emergence of genetic testing. She reflects on how important scientific developments in genetics are prompting anthropologists to resume the old nature/nurture discussion. By tracing the history from Mendelian genetics to today’s postgenomic era, she discusses the profound effect that the application of the ‘genetic embodiment’ (p. 129) can have on individuals as well as society.

The third part, *Activisms*, is written by Rayna Rapp, Faye Ginsburg, Merrill Singer and Richard Parker, and covers the active side of medical anthropology that works towards a better world. Co-authored by Rapp and Ginsburg, the first of the three chapters reflects on the intersection of medical anthropology with disability studies. Both authors are the parents of children with disabilities and thus their research and disabilities rights activism is strongly shaped by their experiences. An overview of important works regarding disability sets the scene for the chapter and results in a call for medical anthropology to drop its reluctance to incorporate disability studies more centrally into its field.

Singer illustrates the difficulty and frustration that anthropologists face when attempting to use their research to help shape policies on local, national and global scales. As a solution, she looks to the movement of ‘community-based organizing for social change’ (p. 185), inspired by Saul Alinsky, as a more effective way for medical anthropologists to bring about significant change.

Parker takes us back to the start of our journey through the developmental stages of medical anthropology. He continues the theme that Martin touched upon in her chapter at the start of the book: the intersection of medical anthropology and gender. Parker makes a move from the much researched feminism to the ‘range of sexual *others*’ (p. 211, his emphasis) and reflects on the impact HIV and AIDS, population control and the development of sexual rights has had on the works of anthropologists regarding gender, sexual health and LGBT issues.

As someone about to embark on a career in clinical practice, this reviewer has been inspired to contemplate the wider social and cultural context of health and illness that have been highlighted by this excellent book. All contributors go beyond the discipline of anthropology by making connections between medical practice, wider society and different cultural contexts, and I would recommend the volume highly to anyone wishing to learn more about the history, progress and futures of Medical Anthropology.

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