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Histories, hauntings, and methodological echoes from medical anthropology’s recent past

Eileen Moyer and Vinh-Kim Nguyen

At its core, medical anthropology is a discipline interested in studying health, illness, medicine, and public health though a lens of history. But history and, more broadly, past making is a multiple enterprise. As Johannes Fabian (1996) and Michel-Rolph Trouillot (1995) made clear twenty-five years ago, there are not only politics in how the past is made by historians but also in how it is made by people in the societies we study, whether they be doctors, artists, or peasant farmers. Anthropologists also shape history through ethnographic engagements, and the theories and methods developed by anthropologists over time have transformed the social sciences and qualitative research more broadly. The ethnographic method, although often misunderstood or reformulated to meet empiricist demands, has been widely adopted in science and technology studies, public health, and social epidemiology, to name but a few.

Playing on the notion of haunting, as introduced in Victoria Hume’s think piece entitled ‘Ghosts in the Health Machine: Visits from the Dead in Hospital’, we’d like to highlight other hauntings that force, invite, and entice us to engage with various pasts. As Hume’s tale of patients experiencing near-death delirium demonstrates, hauntings – both friendly and unfriendly – can be and do many different things. Hauntings keep us connected to a past person, event, or idea, and as researchers (and researched!), we all carry ‘ghosts’ with us, which shape how we see and understand the present.
The second think piece in this issue, authored by Warwick Anderson, builds on a paper presented at a double panel organized at the 2017 American Anthropological Association meeting to honor the life and work of Shirley Lindenbaum, a pioneer who helped establish the field of medical anthropology and also one of the first anthropologists to work collectively with field-based public health specialists attempting to track a disease. Lindenbaum’s work on the disease of kuru – and specifically how ethnographic research allowed her to link the spread of the disease to cannibalism and funerary practices among the Fore in the New Guinea highlands – is one of the origin stories of the discipline of medical anthropology. Lindenbaum’s seminal *Kuru Sorcery* (1979) remains a foundational text in introduction to anthropology seminars nearly forty years after its first publication. In his essay, Anderson explores Lindenbaum’s work, arguing that it has been historical from the beginning while illustrating the importance of her approach, which involved taking seriously her subjects as historical agents despite them living in a place deemed by many at the time to not have a history.

In her article, ‘Diabetes, Alcohol Abuse, and Inequality in Southern Mexico’, Laura Montesi draws on the theoretical framework of the syndemic, developed more than twenty-five years ago by Merrill Singer to account for the relationships among intravenous drug use, gender, sex work, poverty, and HIV in New Haven, Connecticut. And it’s not just Montesi who seems to be haunted by the ghost of this theoretical lens. Although developed to understand the social and structural factors relating to infectious disease, the syndemic frame is increasingly used for understanding chronic disease and coinfection. Writing in the *Lancet*, medical anthropologist Emily Mendenhall (2017, 889) suggests that the syndemic approach offers a ‘powerful path for global health research’. Given its current popularity among a wide range of researchers, we think this friendly ghost is very likely to continue haunting health research in the coming years.

Building on foundational work in science and technology studies by Bruno Latour and John Law, Michal Synek interrogates the concept of ‘good ethnography’ in an article about research in ‘a home for persons with health impairment’. Although Latour and Law are not anthropologists, their seminal STS research relies heavily on ethnographic methods. A historical lens allows us to recognize the extent to which the field of STS has been shaped by anthropology, as well as the iterative relationship between the two fields. Similar to Lindenbaum’s commitment to taking seriously the agency of her research participants, Synek advocates for ‘diplomatic arguments’ within the context of fieldwork to ensure that particular voices are heard. Because Synek is working in an institutional environment using a mode of ordering that results in the silencing of people with mental impairment, doing ‘good ethnography’ requires him to argue diplomatically with the residents’ caretakers in an attempt
to ensure the voices of the residents are not entirely ignored. Perhaps in this example, we can also see how ethnographers may be like ghosts in the machine, haunting caretakers with questions about the agency, personhood, and subjectivity of those being cared for.

The third article in this issue is by Ana Vinea, who examines a contemporary Islamic healing practice in Egypt that is haunted by historical references to the psy science conceptualization of ‘suggestion’. Vinea delivers a fascinating ethnographic account of a Cairo-based Islamic healer who has built a successful professional practice on exposing false claims of jinn possession. The malady in question, known as *wahm*, or self-delusion, provides an important case study for interrogating the jinn affliction/mental disorder binary that presumes a clear distinction between religion and the psy sciences in Cairo.

Rounding out this issue are six book reviews authored by Laura Bisaillon, Jeroen Boekhoven, Paul Christensen, Lesley Doyal, Linda Musariri, and Amanda Wang. As always, we appreciate the contributions of all these authors to *MAT* and to the discipline more broadly. In closing, we would like to express our gratitude to Josien de Klerk who has served as the section editor of the Found in Translation section since its inception and who will be stepping down following the publication of this issue.

**References**


