

MAT  *Medicine Anthropology Theory*

SPECIAL PIECES

Editorial

Side Effects

Edinburgh MAT Collective

The long summer light is beginning to fade here in Edinburgh. Autumn is around the corner if not upon us already, carrying with it memories of traditions from autumns past. For the many of us who work in academia or have young children, autumn is the time of back-to-school, a time for a constellation of rituals whose consistency confers comfort. Not so this year. Although long awaited, school reopening is also contested, controversial, and anxiety-producing. Some schools reopened in the summer, whilst others have plans to open in the autumn, with the shadow of a second wave looming over all possible preparations. There is neither the satisfaction of synchronicity nor of certainty. In primary, secondary, and higher education, many face stressful or untenable labour conditions involving questions of in-person teaching—and these are those among us who've been fortunate enough to have retained employment. As was the case when we wrote our last editorial in April 2020, the future seems bleak. But we are no longer writing from the smarting shock of the initial weeks of lockdown; the contours have shifted. Six months in, many of us are turning ever more attention to the horizon. When will this end? What will come after?

The 'after' is, of course, elusive. As anthropologists, ethnographers, and fellow travellers, we might consider the slow tempo of the dance of lockdown and reopening as a collective phenomenon, keyed to a related idiom describing the lingering and enigmatic symptoms so many people who have been infected with coronavirus have experienced. A negative test, it turns out, does not necessarily mean an end, and neither does the documentation of low populational transmission rates. Moreover, behind the statistical data lie lived realities reeling from the disproportionate impact that the virus has had on communities of colour. Yet,

while COVID-19 has impacted communities in starkly different ways, part of the global experience of the disease has been a reorienting of time: a phenomenological reregistering of starts and stops, fits and pauses, ambiguous beginnings and ends. When describing the unpredictable course of the virus within a body, we tend to speak of ‘side effects’, a phrase that melds the temporality implied by ‘effect’ with a focus on the primacy of a single pathology, reducing other phenomena to the status of sequelae (Biehl 2010, Chua 2018, Davis 2018, Etkin 1992). In light of the shiftiness of our experiences of time, perhaps we might consider a different meaning of ‘side’: a gesture of adjacency and a departure from an overriding emphasis on temporality. When beginnings and ends are unavailable, what might it mean to think *laterally* (Gad and Brun Jensen 2016, Maurer 2005)?

Here at *MAT*, we have been thinking much about how to best move forwards in this world of adjacency. Or, better said, we have been thinking much about how to best *move*, with the directionality of ‘forwards’ out of reach. Laterality brings to mind questions of how to move *within* rather than how to move *past*. In this period of uncertainty, how do we continue to publish and promote the best of what scholars in the interstices of medicine, anthropology, and social theory have to offer? How do we structure a space for the ethical stewardship of authors’ important contributions? How do we acknowledge and respond to the present conditions of life—an imperative that is ethnographic through and through—whilst not limiting entirely our intellectual imagination to them? It is not surprising that these questions have revealed tensions within the publication process, where the sustenance of intellectual collaboration is met with the reality that the writing, reviewing, and editorial processes of journal production are fundamentally labour practices for which, in our current world, not everyone has the material or psychological bandwidth.

We do not have answers. But we do have ideas about an approach—one that crucially foregrounds care for and appreciation of colleagues’ energies and limitations. We join peer journals such as [Anthropology and Humanism](#) and [Antipode](#) in emphasising that accommodation is a necessary and ethical response to the world at present—and, arguably, at all presents. Production and review processes have slowed as colleagues’ (and our own) efforts have been called elsewhere. We are not resisting that slowing, but instead feature it as a symptom of a collective stance of care. As a result, we realise that our production might slow or become more erratic; that some of our issues might have more content and others less. In that sense, our journal might appear somewhat altered. We see these changes, however, as signs of other commitments that are worthier of maintenance. If production shifts as a result of commitments to supporting colleagues through times of uncertainty, so be it.

We view this posture as critically anti-capitalist, feminist, and anti-racist; *these* are the grounds upon which we stand firm even as the world and our journal shifts. As [Isis](#) has observed, colleagues who have caring responsibilities or lack institutionalised social supports are the

most likely to face experiences and challenges that impinge on the ideal of unimpeded time for work, imagination, creativity, and—to use the language of academic audit culture—research output. Those colleagues tend to be women and people of colour. For us, moving laterally means centring *this* experience and operating under the assumption that everyone is facing emotional, psychological, social, logistical, and intellectual challenges to scholarly production, both at present and for the foreseeable future. This is not something to be overcome, but something to consider and to *keep* considering whenever an ‘after’ or a ‘forward’ eventually become thinkable.

The issue

While calling your attention to the ways in which *MAT* might appear different in volumes to come, we are pleased to present fantastic scholarship in the pages that follow. We are proud to bring to press an album of Research Articles, Position Pieces, and Field Notes that provide vital insights into how to make sense of the constant flux of experiences with and epistemologies of health and illness that give shape to our world. Anja M. B. Jensen and Mette N. Svendsen prod the limits of distinctions between humans and animals in the making of medicine by attending to questions of intimacy and science in experimental transplant research performed on pigs in Denmark. Zhiying Ma shows how families in China are left to navigate the dual challenges of caring for and controlling loved ones who have been diagnosed with psychiatric disorders. In dramatically different contexts, these articles highlight the interweaving of intimacy and knowledge, showing how the suturing of the two modes creates space for both experimentation and control.

MAT's Position Pieces section, edited by Martha Lincoln, Tom Widger, Jan Brunson, and Dwaipayan Banerjee, offers contributions that foreground authors' positions as loci of reflexivity and argumentation. In this volume, we feature Le Hoang Ngoc Yen's discussion of the persistent stigma against leprosy in Vietnam, Susan Wardell's exploration of the impact of climate change on mental health, Runa Lazzarino's reflections on the frictions of aftercare for human trafficking survivors, Nicholas J. Long's timely critique of 'social distancing' as a term that fails to address the new forms of sociality emerging from within lockdown, and Iona Francesca Walker's consideration of the aptness of military metaphors in understanding contagion. Two pieces in particular foreground methodological challenges in the folds of medical and anthropological theory: Erica Borgstrom, Simon Cohn, and Annelieke Driessen ask how to study 'non-interventions'—that is, when staff choose not to do something—in British palliative care, and Patricia Kingori and Rachel Douglas-Jones examine how to catch fake practices and goods in global health provision.

Additionally, our Photo Essay section, edited by Elizabeth Cartwright, offers an intriguing collection of images and questions by Michèle Cros, who asks, ‘How to make bat portraits?’ Cros presents eight portraits and narrates the challenge of capturing bats’ likenesses in Burkina Faso during times of pandemic. Field Notes, a section edited by Rosie Sims and Lotte Buch Segal, provides readers with dispatches from the field. In this issue, we get glimpses of Nick Surawy Stepney’s field research in Uttar Pradesh and the ways in which his experiences have encouraged him to consider the political choices of language learning; Paula Martin’s reckoning with bureaucracy as a site in which to research American young people’s experiences with gender-affirming surgery; and Blessings N. Kaunda-Khangamwa’s ruminations on how to shift from being a volunteer to a researcher in a Malawian clinic for adolescents living with HIV.

Our collective thinking about the uneven temporality of life in the age of coronavirus has been pushed forward by the included special section, ‘After Illness, Under Diagnosis’, guest-edited by Lenore Manderson. In her introduction, Manderson evokes and queries the uneven and nonlinear unfolding of illness. She generatively collates work across ethnographic sites to plumb the tensions between a biomedical model of diagnosis and disease and the lived experience of illness and its slippages. Diagnosis, in these cases, offers patients—women in Amman, Jordan, who use prenatal technologies to identify Down syndrome in foetuses (Christine Sargent), and diabetics endeavouring to prevent retinopathy in California (Carolyn Smith-Morris)—a chance at certainty within a particular biomedical frame. However, as Ellen Rubinstein and Rae Sakakibara show in their work with hikikomori in Japan, avoiding psychiatric nosologies and diagnostics affords space for a different categorisation of social suffering—one that, like Laura Heinemann’s exploration of the ongoingness of diagnosis following bariatric and transplant surgeries, arguably better attends to the slowness and recursivity of lives lived at a distance from biomedical epistemologies. As Narelle Warren and Courtney Addison show in their analysis of precision medicine, the certainty lent by diagnosis is often undercut by the ongoing and incomplete nature of cures. Likewise, Emily Hammad Mrig’s work with American women living with breast cancer details how genetic testing for potentialities complicates the nexuses of diagnostic moments and the certainty of knowledge; both pieces illuminate illness as experienced laterally to the biomedical certainty implied by diagnostic processes.

We hope that you enjoy reading.

The *MAT* Editorial Collective

September 2020

References

- Biehl, João. 2010. 'CATKINE . . . Asylum, Laboratory, Pharmacy, Pharmacist, I and the Cure'. Jenkins, Janis H., ed. *Pharmaceutical Self: The Global Shaping of Experience in an Age of Psychopharmacology*. Santa Fe, NM: School for Advanced Research Press. 67–96.
- Chua, Jocelyn Lim. 2018. 'Fog of War: Psychopharmaceutical "Side Effects" and the United States Military'. *Medical Anthropology* 37 (1): 17–31.
- Davis, Elizabeth Anne. 2018. 'Global Side Effects: Counter-Clinics in Mental Health Care'. *Medical Anthropology* 37 (1): 1–16.
- Etkin, Nina L. 1992. 'Side Effects: Cultural Constructions and Reinterpretations of Western Pharmaceuticals'. *Medical Anthropology Quarterly* 6 (2): 99–113.
- Gad, Christoffer, and Casper Bruun Jensen. 2016. 'Lateral Concepts'. *Engaging Science, Technology, and Society* 2: 3–12.
- Maurer, Bill. 2005. *Mutual Life, Limited: Islamic Banking, Alternative Currencies, Lateral Reason*. Princeton, NJ: Princeton University Press.