Hansjörg Dilger, Abdoulaye Kane, and Stacey A. Langwick (eds) (2012), *Medicine, Mobility, and Power in Global Africa: Transnational Health and Healing*, Bloomington and Indianapolis: Indiana University Press, ISBN 978-0-253-22368-5, 358 pp.

The edited volume entitled Medicines, Mobility, and Power in Global Africa is an inspiring exploration of medicine's mobility in the form of twelve ethnographically rich contributions on African healing practices. The introduction by H. Dilger, A. Kane, and S. Langwick elaborates on the notion of mobility with the aim of developing an analytic framework to study various forms of medicines, such as traditional medicine, modern medicine, and religious healing in African contexts. According to the introduction, the term mobility also aims to capture the movements through which doctors, patients, healers, and technologies bring recovery and hope but also disillusion. As the authors of the introduction suggest, these aims make this volume a unique and promising contribution to the field of medical anthropology. Nonetheless, this innovative approach builds on the "old truism in African healing" that "mobility is power" (1), which, as the authors of the introduction insinuate, may at times have been forgotten in medical anthropological analyses. In this regard, the chapters show how studying medicine's mobility sheds light on the way mobile actors, healers, sick immigrants, religious leaders, but also globally circulating biomedical and social technologies, co-constitute the therapeutic and the social efficacy of medicine.

The reconstruction of power and power relations in medicine attributed to its mobility is also relevant for social anthropological debates on current political, economic and technological transformations on the African continent associated with the term globalisation. The neologism "Afri-global medicine", evoked by John M. Jansen in Chapter 4, but also the volume's subtitle "global Africa", both indicate that the authors share a critical perspective on the discoursive production of "Africa" as a geographical entity. African medicine can also be found in the US and Europe. More importantly the volume's discussion of the detrimental effects of neoliberal reforms on African medicine avoids a reproduction of representations of "Africa" as a vulnerable continent. On the contrary, the volume's inspiring approach is to combine an acknowledgement of the structural forces, which shape African health practices, with an analytic attention to the "things" that move in the spaces emerging out of the frictions and tensions of these large-scale processes called neoliberal globalisation (6). As the introduction argues, this analytical shift toward the study of mobility makes "multidirectional" movements visible and, as the editors Book Reviews 121

emphasise, attends to the historical "intertwinement" of trajectories of traditional and modern medicines (2).

The volume begins with Stacey Langwick's chapter on the emergence of traditional birth attendants as a "new type" of health worker, which is traced on different temporal and spatial scales of action - from local to international and even global arenas of health. Hansjörg Dilger focuses on the global connections established by "technologies of the self" in HIV/AIDS prevention and care programmes in Tanzania. Angelika Wolf explicates the emergence of "bio-bureaucracies" by discussing the local adaptation of mutual health insurance models in Senegal. John M. Janzen provides a vivid account of the volume's overall endeavour by juxtaposing three different cases studies - on Ebola epidemics, African medicinal plants, and trauma – together in one essay in order to illuminate the forms of mobility of what he terms "Afri-global medicine" (115). Kris Peterson asks how the interplay between the massive flow of foreign aid and antiretroviral medicines in HIV treatment programmes, intellectual property rights regulations, and structural adjustment programmes led to the "emptying out" of the local production of pharmaceuticals in Nigeria. These contributions describe the configurations that shape and are shaped by the mobility of medicine, which go beyond the boundaries of the nation state and the authority of single institutions. Viola Hörbst examines the adoption of assisted reproductive technologies, like in-vitro fertilisation, in Mali and Togo. Her chapter emphasises the role of "transnational social and professional fields" (175) in mediating these mobile technologies. Abdoulave Kane follows immigrant communities to trace the complex itineraries through which biomedicine and traditional medicines flow between Senegal and France. Adeline Masquelier's contribution offers an indepth analysis of the local and national politics around vaccination campaigns in Niger. Her case study of recent boycotts of polio vaccination campaigns in Niger, which were led by Muslim religious leaders, elaborates the many aspects of popular distrust with the state's capacity to "deliver even the most basic services", which may explain why suddenly "loudly advertised availability of free vaccines invites suspicion" (226). Adam Mohr's and Marja Tiilikainen's chapters both examine the mobility of healing practices. Mohr examines the transformations of Ghanaian migrants' male and female subjectivities by following the travel of religious healing practices from Ghana to the US. Tiilikainen describes the transnational dimensions of health by examining Somalis' returns from the diasporas to consult traditional healers at "home" in Somaliland. Tiilikainen emphasises that Somali diagnoses tie Somalis to their country of origin, which can have positive social consequences but also negative ones. Elisa■■■ 122 Book Reviews ■■■

beth Hsu's contribution looks at Chinese medical doctors in Kenya and examines the travel of "complementary and alternative medicines" as a South-South relation or East-South relation, which constitutes a rarely studied pattern of mobility in medicine. Hsu's contribution identifies and documents different temporal and spatial modes of mobility in the travel of complementary and alternative medicines from China to Kenya. Carla Carvalho examines the inverse travel of traditional healing practices from Guinea Bissau to Portugal, Spain, and France by exploring the integration of traditional therapists called *mouros* and *jambakus* in labour migration movements from African countries to Europe.

The chapters provide compelling evidence for studying mobility ethnographically by extending out from individual case studies on African medicine to broader issues of power in the rapidly transforming field of international health, which is now called global health, without losing sight of the situatedness of health practices and the historical specificities that shape the trajectories of medicine. Certainly, this volume does not contain all empirical phenomena that readers may also feel exemplify medicine's mobility, most notably the travel of knowledge in the growing field of transnational medical research on the African continent. This is not a weakness of the volume, but precisely the strength of being a source of inspiration. On a more theoretical level, however, the introduction's relatively short account of neoliberalisation may undermine its ability to embark on a more controversial discussion of the term "neoliberalisation" in scholarly analyses of contemporary processes of globalisation. For commentators like Aiwha Ong, the evocation of "mobility" is an essential characteristic of current neoliberal logics expressed by state and non-state actors.1 Instead of taking the notion of neoliberalisation for granted, the volume could have benefitted from a more critical interrogation of the uses of mobility in scholarly debates and in policy circles. Such a critical discussion of mobility, paying more detailed attention to the forms of inclusion and exclusion of African medicine enabled by the mobility of medicine in contemporary regimes of neoliberal governance, would have enriched the volume's convincing ambition of taking mobility as a point of departure for an ethnographic comparison of medicine in "global Africa".

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Ong, Aihwa (2007), Neoliberalism as a Mobile Technology, in: Transactions of the Institute of British Geographers, 32, 1, 3-8.