

# FOREWORD

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*Medical Anthropology: Health, Inequality, and Social Justice* is a new series from Rutgers University Press designed to capture the diversity of contemporary medical anthropological research and writing. The beauty of ethnography is its capacity, through storytelling, to make sense of suffering as a social experience and to set it in context. Central to our focus in this series on health and social justice, therefore, is the way in which social structures and ideologies shape the likelihood and impact of infections and injuries, bodily ruptures and disease, chronic conditions and disability, treatment and care, social repair and death.

The brief for this series is broad. The books are concerned with health and illness, healing practices, and access to care, but the authors also illustrate the importance of context—geography, physical condition, service availability, and income. Health and illness are social facts; the circumstances of the maintenance and loss of health are always and everywhere shaped by structural, global, and local relations. Society, culture, economy, and political organization as much as ecology shape the variance of illness, disability, and disadvantage. But as medical anthropologists have long illustrated, the relationships between social context and health status are complex. In addressing these questions, the authors in this series showcase the theoretical sophistication, methodological rigor, and empirical richness of the field while expanding a map of illness and social and institutional life to illustrate the effects of material conditions and social meanings in troubling and surprising ways.

The books in the series move across social circumstances, health conditions, and geography and their intersections and interactions to demonstrate how individuals, communities, and states manage assaults on well-being. The books reflect medical anthropology as a constantly changing field of scholarship drawing on diverse research in residential and virtual communities, clinics, laboratories, emergency care, and public health settings and with service providers, individual healers, households, social bodies, human bodies, and biologies.

While medical anthropology once concentrated on systems of healing, particular diseases, and embodied experiences, today the field has expanded to include environmental disaster and war, science, technology and faith, gender-based violence, and forced migration. Curiosity about the body and its vicissitudes remains a pivot for our work, but our concerns are with the location of bodies in social life and with how social structures, temporal imperatives, and shifting exigencies shape life courses. This dynamic field reflects an ethics of the discipline to address these pressing issues of our time.

Globalization has contributed to and adds to the complexity of influences on health outcomes; it (re)produces social and economic relations that institutionalize poverty, unequal conditions of everyday life and work, and environments in which diseases increase or subside. Globalization patterns the movement and relations of peoples, technologies and knowledge, and programs and treatments; it shapes differences in health experiences and outcomes across space; it informs and amplifies inequalities at individual and country levels. Global forces and local inequalities compound and constantly impact individuals' physical and mental health and their households and communities. At the same time, as the subtitle of this series indicates, we are concerned with questions of social exclusion and inclusion, social justice and repair, again both globally and in local settings. The books challenge readers to reflect not only on sickness and suffering, deficit and despair, but also on resistance and restitution—on how people respond to injustices and evade the fault lines that might seem to predetermine life outcomes. While not all the books take this direction, the aim is to widen the frame within which we conceptualize embodiment and suffering.

Carina Heckert's book *Fault Lines of Care: Gender, HIV, and Global Health in Bolivia* is the first book in this series. The setting is the city of Santa Cruz, Bolivia; the key actors are poor women living with HIV; the backdrop is the agendas of global health agencies. Heckert is concerned with the uneven translation of global funding strategies. In Bolivia, enduring understandings and relations of sex and gender influence the possibility of HIV infection and access to treatment and shape the development and implementation of HIV care programs. Other local fault lines, including class and ethnicity, also complicate the rollout, accessibility, and acceptability of programs and so influence how people live with HIV.

Heckert offers us a compelling, nuanced, and provocative account of women—and men and children—subject to local HIV policies and programs. In writing this narrative, she interrogates the relationship between gender and the politics of both global health and life itself. HIV, we see, is everywhere entangled with gender. As Heckert illustrates—setting out a theme that will recur in later books in this series—infection, illness, treatment, and care are patterned by the complex interactions of individuals in communities and at state and global

levels. In illustrating how HIV tracks social fault lines, Heckert insists that we maintain our engagement with the infection and resist yielding to a discourse that HIV has run its course. But she also illustrates, as will others whose work will appear in this series, how any infection, disease, or decline in capacity is inflected by social structures—class, gender, and race—and by the unevenness of power within and beyond nations.



# FAULT LINES OF CARE

