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Veena Das, *Affliction*, Fordham University Press, 2015, 205 pp., \$26.00 US (pbk), ISBN 9780823261819.

In the most basic terms, anthropology studies experience. Anthropologists are interested in exploring the multiple ways that individuals experience the world given their unique positions in society and their cultural contexts. Through in-depth ethnographic research, anthropologists immerse themselves in the everyday lives of their participants taking note of the mundane alongside the profound.

However, experience is often discussed and written about as a given and frequently it is treated as a static thing that just exists as a natural part of life. We do not always complicate or interrogate the word when we use it in our research and writing. A thought-provoking passage in the first chapter of *Affliction* comes when Veena Das calls us to think about and research experience in a different way. She writes that experience “may [not] be treated as a ‘given’ in anthropological analysis. Experience is not a transparent category, for its essential feature of opacity makes the work of tracking it more difficult than many authors assume” (2). Experience is a convoluted and complex concept that is located at the center of various webs of meaning. Rather than treating experience as a “thing,” scholarship needs to recognize that experience “emerge[s] through the process of description” (3). This is evident in Das’s ethnography. She pays particular attention to the words, phrases, and sayings used by the urban poor living in Delhi as they grapple with illness and suffering. She takes note of how they move between “different thresholds of life” (2).

Instead of trying to make perfect sense of these movements and break them down, Das allows contradictions and contestations to come to the fore in her research and writing. Subsequently she uses them to argue, “the experience of illness creates incoherence” (17). How does someone come to understand what is physically happening to them or a loved one? How does someone deal with illness mentally and emotionally? From my reading of *Affliction*, I see the task of anthropologists (and ethnographers) as not to dismantle the experiences of illness and suffering and put them into simple terms, but rather through our attention to everyday detail, we are to explore how they are created and transformed through the messy nature of life. The very title of the book, *Affliction*, points to the times when a person is in a state of distress or despair, and is meant to be a “kind of haunting word” (1) that draws on the senses as you read the many illness experiences Das includes in the book.

When reading the book the audience will notice that Das does not just objectively describe a person’s experiences with illness or life conditions. She allows them to develop out of the individual’s words in addition to her field notes and observations. You will find

quotes at length throughout the ethnography from participants, which enable them to tell their own stories of illness and suffering rather than hearing just the author's interpretation, and from field notes written by Das and members of the research team in Delhi. For over a decade Das has worked with the Institute for Socio-Economic Research in Development and Democracy (ISERDD) and she has conducted her own research with the assistance of its members. Methodologically Das encourages us to rethink what should be at the center of ethnographic research. She immerses herself in the everyday lives of the urban poor in Delhi in order to capture "the small ways that the everyday can be turned slightly around and to ask how these small things can morph into catastrophic and crucial events" (12). Das has a keen eye for the ways her participants grapple with illness and suffering on an individual level and gives us an inside look into the everyday lives of the people she worked with in Delhi. Das has an interest in how "diseases...might corrode the everyday life of people living in low-income settings" (16), but at the same time, she has an interest in relationships and the ways that illness and ailments reverberate through social networks and communities: "I try to grasp their [the participants'] reality through surveys, through elaboration of singular cases, through the impact that illness has on both the body of the person suffering and on the relations that are implicated in determining the course and severity of an illness experience" (157). Her tracing of long chains of events and detailing of the impact of one person's actions (or inactions) on another is both impressive and impactful.

The middle chapters of the book delve deep into her ethnographic data and explore particular cases of illness. This section "shows how illness is dispersed over people, relationships, and technologies" (22) and builds on the concept of illness trajectory, which has been used by scholars and researchers in the social sciences and health related fields to describe how people experience the different stages of chronic illness. Das illustrates that like experience, illness is not a thing that is static or that unfolds monolithically across space and time. Rather she uses the case studies of tuberculosis (Chapter 2), mental illness (Chapter 3), and the strains that illness and the use of technology for treatment places on kin relations (Chapter 4) to show that illness is an ongoing process that takes different forms depending on the specific context in which it unfolds and who is involved in care and treatment. Disease and the illness experience, as Das demonstrates, emerge as individuals engage in relationships with people and the world around them. In later chapters, she also explores how various practitioners with different types of medical training, including a Muslim healer (Chapter 5), view their practice and the care they provide; she gives attention to the ways that the illness experience develops out of the patient-provider encounter.

Illness does not end with death, but can have lasting impacts on people close to the person who has passed away. In particular this is highlighted in the second chapter as Das details how Mukesh, a young boy, dealt with his mother's death after she suffered from tuberculosis for an extended period of time, leaving him to take on new responsibilities and to develop new knowledge after her passing. Das brings to light how history (both familial history and larger historical events) and current social and economic conditions are written into the illness experience; it is never truly neutral, but rather highly informed by the past and the present. Given that Das worked in low-income neighborhoods where many people had only occasional employment and many would be forced into debt when they had to seek treatment for serious illness, she analyzes what illness is and the treatment for it within "conditions of poverty" (41). She goes a step further to question how illness that takes place within poor conditions leads us (and our participants) to question what life means and is: "It would have been evident to the astute reader that my discussions about the experience of illness, the quest for getting at the reality of a disease, and the nature of medical knowledge

assumes that these questions reveal something about health and disease that is both embedded in social and economic conditions but also transcends these conditions; I touch on matters that pertain to the existential conditions of human life” (222). The book encourages us to consider how illness creates questions about the very meaning of our worldly existence.

In 2015, as I write this review, we are seeing one of the largest refugee crises happening in the world’s history as hundreds of thousands of people are fleeing war-torn and violence laden areas in the Middle East, Africa, South Asia, and other parts of the world—an event that questions our being and worldly existence. People are dying as they try to reach Europe by boat or on foot and the horrific images of dead bodies and people from places like Syria and Iraq fleeing police as they cross European borders. Unfolding before our eyes are the “complex lives and the burden of suffering” (134) that many of these refugees and migrants have come to bear as violence and poverty take over their communities. At the same time, we hear fear in some Europeans’ voices as the number of Muslims increase with the refugee crisis—making some people believe that terrorism and Islamic fundamentalism will soon be rampant on European soil.

The refugee crisis is unbelievably tragic. Das encourages us to look at suffering as multi-dimensional and as a process that is shaped by present conditions and by history (local and global). How does one keep faith and continue to move forward when faced with incredible adversity in everyday life? How can one proceed with life when continuing to suffer? Das’s accounts of illness in low-income neighborhoods in Delhi are important in the study of the Middle East and the Islamic world more broadly because it points to the ways that faith and action come together. In recent months this has been seen in some of the news reports as refugees and migrants thank Allah for bringing them to Europe or call on him to protect them during their journeys. In the beginning of her book Das writes of using the term *affliction*: “I want this term to lend itself to an environment and to sensibilities that might sometimes call on God but are not necessarily looking for a Christ-like figure to lift them out of the abyss that is made up of a kind of corrosion of everyday life” (4). Das encourages us to think about how people’s actions and ways of dealing with the “different thresholds of life” (2) may be shaped or guided by an Islamic sensibility or fall in line with Islamic ethics—even though they may not be outright deemed religious by the individual or community.

Affliction is written in an accessible manner. Its prose draws the reader into the book and the lives of Das’s participants. It is a book that would be of interest to those in fields like anthropology, history, public health, women and gender studies, and sociology in addition to applied researchers working on health related issues, policy, and human rights. Overall Das’s writing style is easy to follow and is almost poetic. The ways that she integrates historical and archival data, quantitative data, and ethnographic research into her work is notable and makes it of interest to a wide audience, not just those who are interested in health or India. I found her use of methods and theory from across disciplines to be timely and refreshing, as many of us also struggle to find a place to belong in the academy given the interdisciplinary nature of our work. This is a must read for scholars and researchers who work on matters related to health and illness and for those in the academy who see their research as being inherently applied and interdisciplinary in nature.

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