

ETHNOGRAPHIC EXAMPLES

ONG (1998) AND SCHEPER-HUGES (2000)

- Ong 1988

- Multinational corporations in Malaysia

- Gender symbolism

- Social boundaries

- Morality

- Divergent views on spirit possession in factories

- Connections among affliction, cultural experience, hegemony in processes of social change
- Spirit attacks on young women
- Vengeful spirits, demonic screaming, rage on the shop floor

- Management responses:
 - Isolating possessed workers
 - Valium
 - Sent home

- Local singapore doctor notes a local medicine man can do more than sedatives
- Malays consider spirit possession an illness that afflicts the jiwa (soul)
- Anthropologists studying spirit possession linked the phenomena to culturally specific forms of conflict management that disguise and resolve social tensions within indigenous societies

- Policymakers and professionals see it as an intrusion of archaic beliefs into modern settings
- Argues spirit possession in multinational factories a 'complex negotiation of reality' by emergent female industrial workforce
- Young female adults and members of a burgeoning proletariat

- 1960s most Malays in Peninsular Malaysia live in rural kampung (villages) engaged with cash cropping and fishing
- 1969 spontaneous outbreaks of racial rioting: deep seated resentment over the distribution of power and wealth in this multiethnic society
- Malay dominated government introduced a New Economic Policy intended to restructure political economy

- From 1970s agricultural and industrialization programmes
- Rural men and women entering urban schools and manufacturing plants set up by multinational corps
- Before current wave of industrialization spirit possession mainly manifested in married women

- Selective labour produced in a single decade a malay female industrial labour force of over 47000
- Chew (1978): 'How to handle hysterical factory workers'
- Discusses psychological 'aberration'
 - Interrupting production
 - Creating hazards careless behaviour

- With urbanization and industrialization spirit possession taking place in young women
- Placed in modern organisations
- 1970s free trade zones established to encourage investments by Japanese, American and European corporations
- In seeking to cut costs young unmarried women were targeted

- Classified mass 'hysteria' incidents according to 'frightened' or 'seizure'
- In 1978 framed as a disease
- That should be handled like bacteriological diseases
- Biomedical approach called for sedatives

- Argued preference for belief in spirits and education as key factors
- Medical science used to to describe illnesses independent of their local meanings and values
- Argues 'A monologue of reason about madness'
Foucault 1965 was introduced into Malaysian society

- Shift in attention from the afflicted to their chaotic effects on modern institutions
- Conducted ethnographic fieldwork in a village
- Found post 1960s spirit beliefs not publicly admissible
- But found villagers believed all beings have spiritual essence - semangat

- Spirits - hantu
- Disembodied spirits capable of violating boundaries between material and supernatural world
- Spirits represent transgressions of moral boundaries
- Concentric social spaces homestead, village, jungle

- Reduced moral responsibilities as move from family to relatives to strangers
- Argues spirit attacks happened to women in transition - greatest threat to social norms
- Douglas taboos operate to control threats to social boundaries

- '8,000 hours of production were lost because someone saw a ghost' - the American director or the factory
- Lewis (1971) - thinly disguised protest against the dominant sex

- For Malays, swamps, jungles and bodies of water typically occupied by spirits
- Modern buildings often do not take into consideration Malay concern about moral spaces/displaced spirits
- Western style toilets become problematic for example, fear of spirits inhabiting the water tank
- Having to ask to go to the toilet etc use of sanitary towels, menstruation
- Spaces checked by males supervisors

- Foucault: people subjected to micro-techniques of power induced to regulate themselves
- Argues Malay women not only experienced alienation from their products but also psychic alienation
- Their 'intrusion' into economic spaces outside of home and village was experienced as moral disorder

- Some workers called for increased discipline, others for the application of Islamic classes on factory premises to regulate interactions between men and women
- Women are units of cheap labour repackaged under the 'nimble fingers' label

- Workers had to work 8 hour shifts 6 times a week, 2 x 10 minute breaks and 1x 30 minutes for lunch
- Microscope work
- Solvents, acids, fumes, toxic products for cleaning
- 'Pains in the chest' interpreted as emotional distress

FABRICATION OF MICRO CHIPS

- Lead poisoning, kidney failure, breast cancer
- Nausea, sickness, dizziness, skin irritation
- Rapid deterioration of eyesight

- 'Worker-patient' seen as culturally deficient
 - 'Flawed' character and culture
- Sick role reconceptualised as internally produced and by outmoded thought
- Corporate adoption of spirit idiom stigmatized spirit victims and ruling out the possibility of their conditions being taken seriously

- Gramsci (1971): defined hegemony as a form of ideological domination based on the consent of the dominated a consent which is secured through the diffusion of the worldview of the dominant class

SCHEPER-HUGHES (2000)

- Surgeons, patients, organ donors, recipients, brokers, intermediaries - some with criminal connections
- 'Following new paths of capital and technology'
- Global economy

- Global traffic in human organs
- Maps 20th century global trade in bodies, body parts, desires, and invented scarcities
- Organ transplant takes place in transnational space

- Artificial needs, scarcities, and new commodities - actual fresh organs!
- The movement of these 'new commodities' in neoliberalism
- Anth concerns: global dominations and local resistances
- Reordering of relations between individual bodies and the state
- Between gifts and commodities
- Between medicine and magic in postmodernity

- Need for new international ethical standards for human transplant surgery
- Abuses against bodies of socially disadvantaged members of society
- Potential human rights abuses regarding procurement and distribution of organs to supply growing markets

- e.g. Use of organs from executed prisoners in China for commercial transactions
- The traffic in organs in India
- Trading kidneys from living donors
- Argues no long term study into the social effects of kidney sales on the sellers, their families, or their communities

- What lies behind the transplant rhetoric of... altruism, scarcities, and needs?
- Looks at transformations of the body and the state under conditions of neoliberal economic globalism
- Deficiencies of the global capitalist economy (Soros 1998a, b)
 - Erosion of social values and social cohesion
 - Increasing dominance of anti social market values

- Markets are indiscriminate and reduce everything including humans to their labour and their reproductivity to the status of commodities
- Describes the movement of fresh body organs and sick bodies as a kind of 'kula ring' of bodies and body parts
- Transfer of organ transplant technology to countries in the east

- Experimental procedures have now become commonplace surgeries throughout the world
- Kidney transplantation, today, virtually universal
- Survival rates increased, although vary by country, region, type and quality of organ
- In parts of the 'third world' where morbidity rates from infection and hepatitis are higher there is a preference for a living donor whose health status can be documented before

- The flow of organs follows the modern routes of capital
- From South to North, from Third to First
- From poor to rich
- Intersection of class, gender and race
- Some places do not permit organ donation

- “Until the practice was condemned by the World Medical Association in 1994 patients from several Asian countries traveled to Taiwan to purchase organs from executed prisoners”.

- “Meanwhile, patients from Israel, which has its own well-developed but underused transplantation centers (see Fishman 1998, Kalifon 1995), travel elsewhere—to Eastern Europe, where living kidney donors can be found, and to South Africa, where the amenities in private transplantation clinics can resemble those of four-star hotels. Meanwhile, Turkey is emerging as a new and active site of illegal traffic in transplant organs, with both living donors and recipients arriving from other countries for operations. In all these transactions, organs brokers are the essential actors”

- “Common sense notions of embodiment, relations of body parts to the whole, and the treatment and disposal of the dying are consequently being reinvented throughout the world”.
- Cohen, working in India, where kidneys are sold to arrange marriages for ‘extra’ daughters

- “Today, Cohen says, some of these same people now speak matter-of-factly about when it might be necessary to sell a “spare” organ. Cohen argues that it is not that every towns person actually knows someone who has been tempted to sell a vital part of the self but that the idea of the “commodified” kidney has permeated the social imaginary: “The kidney [stands] . . . as the marker of one’s economic horizon, one’s ultimate collateral” (n.d.).”

- “In this instance, Cohen notes, “women flow in one direction and kidneys in the other.” And the appearance of a new biomedical technology has reinforced a traditional practice, the dowry, that had been waning. With the emergence of new sources of capital, the dowry system is expanding, along with kidney sales, into areas where it had not traditionally been practiced”.

- Shifting perspectives on the body, how culturally the body has moved from (in some cases) sacred and whole to a reservoir of duplicates

- “Though fathers and brothers talk about selling kidneys to rescue dowry-less daughters or sisters, in fact most kidney sellers are women trying to rescue a husband, whether a bad one who has prejudiced the family by his drinking and unemployment or a good one who has gotten trapped in the debt cycle. Underlying it is the logic of gender reciprocity: the husband “gives” his body in often servile and/or back-breaking labor, and the wife “gives” her body in a mutually life-saving medical procedure.” (2000, 195)

- “At the 1996 Berkeley conference on traffic in human organs, Wu said, In 1992 I interviewed a doctor who routinely participated in removing kidneys from condemned prisoners. In one case, she said, breaking down in the telling, that she had even participated in a surgery in which two kidneys were removed from a living, anesthetized prisoner late at night. The following morning the prisoner was executed by a bullet to the head. In this chilling scenario brain death followed rather than preceded the harvesting of the prisoner’s vital organs”

- “The Bellagio Task Force report (Rothman et al. (1997:2741) concluded that the “sale of body parts is already so widespread that it is not self-evident why solid organs should be excluded [from commercialization]. In many countries, blood, sperm and ova are sold. . . . On what grounds may blood or bone be traded on the open market, but not cadaveric kidneys?”

- “A market price on body parts—even a fair one—exploits the desperation of the poor, turning their suffering into an opportunity”.
- “When concepts such as individual agency and autonomy are invoked in defending the right to sell a spare organ, anthropologists might suggest that certain living things are not legitimate candidates for commodification. The removal of nonrenewable organs leads to irreparable personal injury, and it is an act in which, given their ethical standards, medical practitioners should not be asked to participate”.

- “While bioethicists begin their inquiries with the unexamined premise of the body (and its organs) as the unique property of the individual, anthropologists must intrude with our cautionary cultural relativism.”
- “Several key words in organ transplantation require radical deconstruction, among them “scarcity,” “need,” “donation,” “gift,” “bond,” “life,” “death,” “supply,” and “demand.” Organ scarcity, for example, is invoked like a mantra in reference to the long waiting lists of candidates for various transplant surgeries (see Randall 1991)”.

- “The demand for human organs—and for wealthy transplant patients to purchase them—is driven by the medical discourse on scarcity”.
- “The medical discourse on scarcity has produced what Lock (1996, 1997) has called “rapacious demands.” Awaya (1994) goes even farther, referring to transplant surgery a form of “neo-cannibalism.” “We are now eyeing each other’s bodies greedily,” he says, “as a source of detachable spare parts with which to extend our lives.”

- “The discourse on scarcity conceals the overproduction of excess and wasted organs that daily end up in hospital dumpsters in parts of the world where the necessary transplant infrastructure is limited. The ill will and competitiveness of hospital workers and medical professionals also contributes to waste of organs.”

- “Nearby, in his office at an academic hospital center, Dr. B, a young heart transplant surgeon, told me about a human organs broker in southern California who promises his clients delivery of “fresh organs” anywhere in the world within 30 days of placing an electronic mail order”.

- “Even today such practices continue. Abbokinase, a widely used clot-dissolving drug, uses materials derived from kidneys taken from deceased newborns in a hospital in Cali, Colombia, without any evidence of parental consent, informed or otherwise (Wolfe 1999)”. (2000, 199)

- “A white South African transplant coordinator attached to a large private hospital criticized the policy that allowed many wealthy foreigners—especially “ex-colonials” from Botswana and Namibia—to come to South Africa for organs and transplant surgery. “I can’t stop them from coming to this hospital,” she said, “but I tell them that South African organs belong to South African citizens and that before I see a white person from Namibia getting their hands on a heart or a kidney that belongs to a little black South African child, I myself will see to it that the organ gets tossed into a bucket.” (2000, 1999)

- “Under what social conditions can organ harvesting and distribution for transplant surgery be fair, equitable, just, and ethical? Organ transplantation depends on a social contract and social trust, the grounds for which must be explicit. Minimally, this requires national laws and international guidelines outlining and protecting the rights of organ donors, living and dead, as well as organ recipients. Additionally, organ transplantation requires a reasonably fair and equitable health care system”.

- “While for transplant specialists an organ is just a “thing,” a commodity better used than wasted, to a great many people an organ is something else—a lively, animate, and spiritualized part of the self which most would still like to take with them when they die”.