

with the positivist biomedical model. Together, both approaches, biomedical and intersectional, can provide a more robust critique of health disparities. Weber states that the intersectional approach emerged to promote an explicit social justice agenda “countering the dominant-culture institutions that reinforce and reproduce health and other social inequalities” (p. 45). Social justice is the backdrop for intersectional theory and there is no apology. Rather, it is argued that this approach can bridge the gap between the academy and social action.

This edited volume will be a valuable resource for professionals in health-related fields and for those interested in intersectional approaches to social issues. It could be used in upper-level undergraduate courses in medical anthropology or medical sociology as well as graduate courses in the social sciences and public health.

**Introducing Medical Anthropology: A Discipline in Action.** *Merrill Singer and Hans Baer.* Lanham, MD: AltaMira Press, 2007, v + 246 pp.

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This concise new volume by veteran textbook authors Merrill Singer and Hans Baer provides an engaging introduction to the discipline by focusing on what medical anthropologists do. The emphasis on practice guides both the purpose and style of the book in productive directions. Intended for undergraduates with no prior exposure to the field, the book aims to convince readers that “medical anthropology is not an ivory-tower discipline insulated from the off-campus realities of human illness, suffering, and death” (p. 9). They make a compelling case for why medical anthropology matters by presenting concrete examples of how practitioners actively address health problems in diverse settings throughout the world. Their tone is accordingly pragmatic rather than philosophical, fore-

grounding empirical research and applied contributions over abstract theory.

The authors begin their overview of the discipline by introducing readers to actual cases of medical anthropologists in action, an expository technique they utilize throughout the book. In answering the question “Why have a medical anthropology?” the introductory chapter also provides a brief history of the field’s emergence within the parent discipline of anthropology and situates the field in relation to other health-related disciplines. The next two chapters give readers a grounding in the foundational methods and core issues of the discipline, utilizing the case study approach to explore research design (ch. 2) and concepts (ch. 3), medical anthropologists employ to understand health-related activities and illness experience. The book then shifts to a systems-level analysis of disease and healing by situating medical beliefs and practices in their wider social contexts, first comparing various ethnomedical systems among nomadic foraging, pastoral, and chiefdom societies (ch. 4) and then discussing medical pluralism in complex societies (ch. 5). The final two chapters examine health problems from a critical perspective, focusing on the structural causes of health inequalities (ch. 6) and the negative health consequences of environmental degradation (ch. 7).

Although previous textbooks coauthored by Singer and Baer have emphasized a politicoeconomic approach to understanding health problems, here the two aim to present a more general overview of medical anthropology. They thus explore the cultural construction of illness and disease, reviewing meaning-centered concepts such as stigmatization, illness narratives, and embodiment. They also address biocultural approaches, outlining an evolutionary model of ethnomedical systems and assessing key features of the medical ecology model. As long-standing proponents of critical medical anthropology, however, Singer and Baer continue to place their emphasis on a world-systems perspective that links health and suffering to wider structures of

power and inequalities. Their critical analysis ultimately blames global capitalism for a wide range of health injustices, and the book concludes with a radical call to replace the current world order. Although the authors seek to galvanize readers into “pragmatic solidarity with a broad coalition of progressive people” to create a “healthy planet for both humanity and ecosystem” (p. 207), their sweeping prescription for change at the global structural level may ultimately dissuade new learners about their own and medical anthropologists’ abilities to make a significant difference. This contrasts with the bulk of the book, which documents the many productive ways in which anthropologists address health problems in diverse locales.

This book would be a good primary text in survey courses that seek to introduce students to a broad range of work in medical anthropology. Singer and Baer condense an impressive array of book-length monographs and journal articles into short case studies ranging from a few paragraphs to several pages. The authors showcase projects as diverse as preventing dengue transmission in Malaysian communities and increasing breast cancer screening among African American women in Arkansas, to investigating medical pluralism in rural Bolivia, studying the indigenous use of medicinal plants in a Madagascan village, and understanding the culture of surgeons in a Canadian hospital. The result is a slim and portable paperback volume that offers students and instructors a sampling of the eclectic variety of projects in which medical anthropologists engage.

No book is without limitations. The book’s usefulness as a primer for students who are new to the discipline is somewhat offset by its lack of learning aids such as chapter summaries and review questions. Instead of a comprehensive glossary or boldface terms, each chapter elaborates a few concepts in boxes separated from the main text (e.g., bioculturalism, community-based organizations, ethnography, and capitalism). Also, although the black-and-white photographs provide important

visual context for readers, the generic “artist depictions” scattered throughout the book reduce complex biosocial phenomena to overly simplistic line drawings that fail to do justice to captions such as “snorting cocaine,” “mother nursing infant,” and “diabetic injecting dose of insulin.”

The book’s emphasis on case studies might be a pedagogical challenge for instructors who want to provide a more systematic overview of specific topics and concepts in medical anthropology. Important concepts tend to get buried within or scattered among various case studies, when they would be more productively considered as overarching principles tying together various examples.

The book’s vivid case examples from around the world can enrich students’ appreciation for the diverse range of work encompassed by medical anthropology. But in skipping from one continent to the next, often within a single paragraph, the book runs the danger of reinforcing a problematic view of the world as a mosaic of bounded cultures. In their account of folk understandings of health and illness, for example, Singer and Baer describe how conceptions of good health differ among the James Bay Cree in subarctic Canada, the !Kung San of the Kalahari Desert, the Tongans of Polynesia, and the Han of China (p. 69). This breathtaking coverage inadvertently contributes to a reified understanding of culture as an immutable property of internally homogenous groups that map neatly onto distinct geographical locales.

Furthermore, the book misses important opportunities to explore the problematic uses of culture in clinical settings. The section on “culturally competent care” (pp. 162–165) portrays this as a positive development that helps produce better health outcomes for ethnic minority groups. Despite the brief acknowledgment that cultural issues must be addressed for all people, the substantive focus on the health disparities of ethnic minority groups relegates culture to the domain of the Other. As critical medical anthropologists, the authors do an excellent job of demonstrating that

social and medical systems are neither homogenous nor bounded but instead shaped internally and externally by power relations and socioeconomic inequalities. Yet I would have liked to see more sustained and reflexive engagement with the meanings and uses of culture, particularly in a textbook that may serve as students' first (or only) encounter with anthropology.

Despite these qualifications, the book's digest format and affordable price make it a welcome addition to introductory syllabi

in an age of escalating textbook prices and capricious online resources. By condensing dozens of research reports, community-based interventions, and policy initiatives into short case studies, Singer and Baer effectively introduce readers to the broad range of projects in which medical anthropologists participate. Their distinctive focus on practical action offers an engaging way to persuade students that studying medical anthropology is a meaningful endeavor.