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Anthropology Book Forum

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Taking Control of Your Health: Communicating Neoliberalism's Pseudoscientific Claims to Health

Review by David Fazzino

Neoliberal Health Organizing: Communication, Meaning, and Politics

by Mohan J. Dutta

Left Coast Press, 2015

In a very readable and accessible format Dutta, Provost's Chair Professor and Head of the Department of Communications and New Media at the National University of Singapore, analyzes the various components of neoliberal strategies in defining and delivering health care to a variety of publics. He draws from his own experiences and recent literature to provide an indictment of neoliberal health organizing and neoliberalism, more generally, as a pseudo-science. Dutta (p. 87) notes that, "neoliberalism is founded on a spirit of anti-evidence and information inequality while at the same time it uses this language of evidence, accountability, and transparency to consolidate power in the hands of transnational capital. Claims of economic growth facilitated by neoliberal policies are not borne out." Although written from a communications rather than an anthropological perspective, anthropologists will nonetheless recognize many of the themes from critical medical anthropology and the anthropology of development literature. *Neoliberal Health Organizing* is suitable for use in advance undergraduate anthropology courses and provides an excellent overview/review of many of the issues I addressed this past semester in a medical anthropology course. It shows that current theorizing in critical medical anthropology, as summarized in Singer and Baer (2012), aligns closely with the work of other fields and hence demonstrates the value of drawing from other disciplines and working in multi-disciplinary teams to provide critical analysis of, and appropriate responses to, the ever-extending reach of neoliberalism.

The book has eight chapters, the majority of which directly address the current state of affairs with the dominance of neoliberal hegemony and the resultant disparities. Dutta begins Chapter 1, “Neoliberalism and Health,” by taking neoliberal discourses of “freedom” and “choice” to task for its attempt to rest responsibility for health on individuals as consumers of health. The health as commodity approach is yet another attempt to minimize responsibility for “externalities” of growth and production while maximizing profits by creating new desires via advertising, public relations campaigns, and medicalization of “other” bodies. Dutta works to draw out the interconnections of those working to promote dis-ease with the self in various industries, governments, and in academia. In the realm of communication he introduces the terms he uses throughout his text: *communicative inversions*, “the deployment of communication to circulate interpretations that are reversals of the material manifestations.” (p. 12); *communicative inequality* “the unequal access to sites of discourse, discursive processes, and discursive articulations.” (p. 12); and *structures* as “frameworks of organizing material resources that both enable as well as constrain access to these resources. Structures of health constitute resources such as hospitals, education, food, employment, work, and so on, that reflect the ambit of global health inequalities.” (p. 15).

Dutta approaches health in holistic fashion by considering the impact of neoliberal ideologies of privatization, individualism, and commodification encoded in policies which further disenfranchise people who are already marginalized, in a variety of arenas including: land tenure, displacement, worker’s rights, food systems, gender, violence, and education. Hence health is not merely about the delivery of healthcare for Dutta, but the sociocultural, economic and political environments within which communities and individuals are situated.

Dutta concentrates on specific aspects of his arguments in chapter 2-7. Chapter 2, “Development Communication and Imperialism,” examines the interconnections between development and imperialism. Dutta argues that proponents of development define development in opposition to the undeveloped or those that are lacking (technology and rationality). For Dutta, the existence of the development project, including its various projects (including those of the body) to increase the rationality and global economic participation of undeveloped countries and persons may make the claim to benevolence and good will, but through an imperial logic it reifies evolutionary and racist hierarchies wherein those who are to be developed are not rational enough to be involved in the development process. This ideology justifies unequal participation in the development process as a matter of the supposed innate capacities of “experts” and “locals” who possess a static culture that

inhibits development (see p. 52). Dutta explains how these development ideologies play out in the increasingly privatized projects of population control and agricultural development wherein “empowerment” and “participation” refer to how well community members can be mobilized to assist in the implementation of a plan of action crafted by experts.

Chapter 3, “Foundations as Neoliberal Health Interventions,” discusses the role of foundations, such as the Bill and Melinda Gates Foundation and the Clinton Foundation, in encouraging privatization and “shaping the global policy agendas” through what Dutta refers to as “philanthrocapitalism” or the “powerful role of capitalism in ending extreme poverty” (p. 93). Chapter 4, “Transnational Capital and Health,” looks at the role of the State in efforts which enable privatization, including various State-private sector relationships including state support for neoliberalism through law and policy and explicit public-private partnerships. Chapter 5, “NGOs, Health Communication and Democracy,” discusses the role of NGOs as sites of local dissemination of global health communication. Here, Dutta furthers his arguments of co-optation of civil society in order to advance neoliberal agendas by undercutting resistance through tropes of “community participation” and “democracy,” giving specific examples of the USA’s democracy promotion in Chile, the World Food Program’s framing of hunger as a brand to be confronted with technological solutions, and Avahan HIV/AIDS campaign in India focusing on individual decision-making. The vision of democracy and democratic participation espoused in these settings is “deeply intertwined with the commoditization of individual subjectivity, where the acknowledgment of the citizen is tied to his/her ability to participate in the market as a consumer and to his/her position as a property-bearing subject” (p. 155, see also Lipsitz 2006). Larger structural and causal considerations of environmental contamination and health impacts remain absent from “community” concerns as articulated by NGOs associated with extractive industries which offer development projects in the realm of environmental sustainability, health, and educational programming. Dutta concludes the chapter by noting that communities and NGOs might also serve as sites of resistance to neoliberal visions, potentially holding NGOs to greater levels of accountability at the local level.

Chapter 6, “Health as Security: Crisis, Surveillance, and Management,” presents the neoliberal vision of health as a series of global security threats and the subsequent militaristic responses, including governance and violence, which prioritize security of the neoliberal order, including resources flows via extractive industries, over health as a human right. Dutta notes that the violence of war renders moot all of the promoted individual exercise and dietary shifts, in so doing he highlights the

communicative inversions that take place in justifying war as a necessary intervention in maintaining global security and well-being. Chapter 7, “Communication Technologies and Health,” reiterates much of Dutta’s earlier arguments through focusing on technological determinism in the context of development of the “primitive” towards adoption of (health) technologies that would mark one as “modern.”

In his concluding chapter, “Epilogue: Neoliberal Health and Alternatives,” Dutta offers alternatives of neoliberal approaches to health, suggesting that global communication technologies and processes may be utilized by a variety of actors, including those publics who are otherwise marginalized in dominant health care delivery systems. Of particular interest he takes on the concept of culture and its utilization in neoliberal health organizing, wherein culture is viewed as something which is bounded, can be discerned at a distance, and must be thought around using the multi-cultural expertise of experts in faraway conference rooms. Culture is a barrier to be overcome in neoliberal health organizing and those that assumedly possess culture cannot be trusted to effectively participate in neoliberal health organizing, rather local knowledge and peoples are neglected, dismissed as irrelevant, or obstacles to expert knowledge. Hence the value of coming to know communities through effective channels of communication is co-opted and it used as a conduit to communicate expert, technological, and scientific knowledge in order to “educate” localized others.

Dutta uses a vignette in the concluding chapter where he highlights the creation and maintenance of international expertise from afar, aside from this we get little on how his positioning in neoliberal health organizing moved from one of facilitation to critique. This would have potentially elucidated the complex interrelationships between business, government, industry, local elite, and NGOs further, adding depth to his analysis. Nonetheless, *Neoliberal Health Organizing* provides a solid point of departure for critically examining the ways that health is conceptualized and acted upon through a neoliberal lens resulting in the commodification of health. Thorough Dutta’s analysis we see the questionable ethical and moral ramifications of *communicative inversions* in the context of *structures* within which neoliberal healthcare is delivered, but also the potential of enacting alternatives in the world. As such Dutta’s work should be considered by those who feel moral indignation in the face of slights of neoliberalism and a sense of responsibility to act on these. This would include anthropologists teaching undergraduates who seek to situate the anthropological approach in relation to a communications perspective of conveying alternatives to neoliberalism. In this context, pairing Dutta’s *Neoliberal Health Organizing: Communication, Meaning, and Politics* with the literature of

critical medical anthropology and the anthropology of development would demonstrate to students a broader, multi-disciplinary, critique of neoliberalism, and examples of how there are, in fact, alternatives, including alternative conventions of critique.

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