

## BOOK | reviews

### ***Making disease, making citizens: The politics of hepatitis C***

by Suzanne Fraser and Kate Seear (2011)

Ashgate, Farnham, England

ISBN 978-1-40-940839-0, 168 pages

#### REVIEWER

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This book, the authors claim, is the first book-length study of the sociocultural aspects of hepatitis C. In some ways this is perhaps not surprising, as the disease was not identified and labelled until relatively recently (1989). Yet many people worldwide are affected by hepatitis C and the numbers of those infected are growing rapidly. The lack of academic interest may perhaps be explained as a result of the disease's association with injecting drug users, a stigmatised and marginalised minority group. People who inject drugs tend to be treated with disdain and contempt in countries like Australia, popularly viewed as deserving of their fate if they contract hepatitis C or perish from an overdose. Yet, as the authors point out, HIV/AIDS has received a veritable avalanche of scholarly interest in the humanities and social sciences since its first identification, although it similarly is a stigmatised condition associated with deviant practices, including injecting drug use. Indeed investigating why particular diseases or conditions become stigmatised and the underlying moral meanings supporting this process has long been a topic of interest for health sociologists. So why the academic neglect of hepatitis C? This question is never really answered in this book.

Suzanne Fraser and Kate Seear, both Australian sociologists, adopt a science and technology studies (STS) approach to analyse the ways in which hepatitis C has been given meaning. In doing so they draw upon texts as diverse as the medical and health promotional literature, self-help books for people who have been diagnosed with the condition and interviews with such individuals concerning their experiences of being diagnosed and treated. In terms of theory, they employ such well-known writers in STS as Bruno Latour, Annemarie Mol and John Law as well as Foucault and Foucauldians, particularly Nikolas Rose, to emphasise that biological phenomena such as hepatitis C are constructed rather than pre-existing 'facts', with dynamic and heterogeneous meanings.

As Fraser and Seear note, this approach goes beyond the social constructionist perspective on health and illness which has received much attention in health sociology over the past few decades, as it recognises the mutually constitutive and constantly contingent nature of phenomena such as bodies, diseases and technologies. A disease is never simply 'constructed' once and for all, its meanings stabilised and solidified. Rather, its meanings continue to change in response to changes in such phenomena as medical and public health knowledges, treatment strategies and technologies, political actions and imperatives, mass media representations, patient experiences and so on. This is why some writers in STS prefer such terms as 'enactment' (Mol) or 'crafting' (Law) to that of 'construction'. Also important for a STS approach, the materiality of phenomena such as hepatitis C is always acknowledged, albeit with the caveat that this materiality is never pre-existing to the social, cultural and political context in which it is understood, and indeed takes part in constituting this context.

Some of the concepts and terminology used in the book will be unfamiliar to many of this

journal's readership, as STS remains but a small corner of health sociology. STS scholars do love a good metaphor to illustrate their insights, and it can take a while to become accustomed to this discursive move. Examples taken up by Fraser and Seear include that of the 'walk' as a mode of analysing phenomena which avoids a linear and simplistic overview, emphasising wandering around a topic, spontaneously alighting upon some areas of interest to discuss rather than following a defined map or orderly progression. Another example is the authors' own taking up and transformation of the medical term 'quasi-species' to emphasise the productivity of multiplicity, error and contingency over certainty. In medicine 'quasispecies' as it is used to describe hepatitis C describes the fact that it is not caused by a single distinct species of virus but rather a population of viruses which are constantly mutating into new forms. Hepatitis C, therefore, is even for medicine an uncertain, volatile phenomenon that cannot easily be pinned down and defined once and for all. For Fraser and Seear, a 'feminist quasispecies epistemology' (quite a mouthful!) is used as a conceptual term to highlight the complex, multiple, emergent and ever-changing nature of knowledge and objects, where error and chaos is productive and inherently part of order rather than antithetical to it.

These are quite difficult concepts, and some of the discussions of STS's theoretical approaches will require concentration to follow the thread

of the argument on the part of those who have not read much of the literature in this area. There are times in the book when the discussion of key theoretical points and terminology becomes rather abstruse. Yet because Fraser and Seear do spend quite some time explaining the basic principles underpinning this approach, the book offers a good introduction to and then application of these theoretical approaches in the context of health sociology for those who are willing to put in the effort to follow their arguments. I particularly liked the way in which they analysed health promotional and self-help texts in the context of STS. These are forms of 'actant' which have rarely been incorporated into STS analyses of disease and medical technologies.

I found this book an extremely interesting and thought-provoking read and a refreshingly different take on the analysis of sociological data related to a specific health issue. Given the complexity of the concepts introduced in the book, I would see it as suitable for later-year students and postgraduates who already have a background in the sociology of health and illness or STS and for those health sociology academics who are interested in STS approaches. It would be a particularly useful book for postgrads embarking upon or considering adopting a STS approach to their own research as it illustrates so well the productive ways in which this perspective can be applied to health sociology topics.

**Consumer society: Critical issues and environmental consequences**

by Barry Smart (2010)

Sage, London, Thousand Oaks (distributed by Footprint Books)

ISBN 978-1-84787-050-6, 256 pages

**R E V I E W E R**

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What Barry Smart provides in this work is a concise overview of the critical issues surrounding the theme of consumer society in the social sciences. His writings are clear and to-the-point, and undergraduate students and established scholars alike will find this text to be a valuable resource for understanding what is so significant and contentious about consumerism and consumer culture in the Western world and beyond.

Part of this has to do with Smart's ability to dispel some widely held beliefs about consumption in a rather accessible fashion. For instance, Smart calls into question the view that there is

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