

Ian Harper. 2014. *Development and Public Health in the Himalaya: Reflections on Healing in Contemporary Nepal*. New York: Routledge.

Ian Harper, a physician turned medical anthropologist brings together a fascinating book on Nepal's pursuit at modernizing its health sector. The book is about, according to Harper, a "discursive well" (p. 3), the attempt by the development actors, including the Nepali state, at introducing and stabilizing the knowledge around, and practices of modern biomedicine. Such attempt at producing and reproducing biomedical order is done within the context where the traditional health and healing practices still hold considerable influence at the local level. This complex interplay of modern and traditional notions

and practices of health is the main subject of the book, which Harper weaves together through a selection of four distinct, yet interrelated case studies of health interventions. The case studies include, first, an analysis of emergence of a mission hospital in Palpa, an economically and geo-politically prominent district of western Nepal. The central subject of the book include three other case studies. First, an establishment of psychiatric services within the mission hospital; second, a highly acclaimed and globally backed national Vitamin A promotion program and; third, a tuberculosis treatment program. One of the ways in which this work is distinct from many others in the field of medical anthropology is the introductory chapter where Harper provides a solid theoretical framing of his research, which brings the subsequent case studies into a coherent whole. While the thick description and analysis on each of his subsequent case studies carry essence of grounded and inductive research, it is possible that in the absence of theoretical premise, the key message from each of the case study and the interconnectedness across the case studies may look puzzling. Harper's engagement with the theories at the outset, particularly the use of Michel Foucault's theories of governmentality and biopower, help address this issue, making each of the cases offer a comprehensive story on the complex interplay of knowledge and power.

One of the central themes that the book examines is the rapid influx of modern pharmaceutical products, its related agencies and actors in Nepali health sector. This pharmaceuticalization of health sector has been one of the defining features in the way Nepalis are defining illness and seeking medical help. Interestingly, this is happening in the context where traditional or non-biomedical healing and health-related practices are still very much alive. The growing appeal of modern medicine, according to Harper, hasn't occurred in vacuum but produced through careful circulation of imagery of progress and modernity that first entered Nepal six decades ago with the advent of 'development project.' The establishment of modern clinics, as well as explosion of various modes of establishment and regulation of modern health services, therefore have served in giving rise to the easy availability of pharmaceutical products. The access to such products is transforming communities' view on illness and health.

Having established the overall rationale and setting for his research in the first three chapters, in Chapter 4, Harper delves into how attempts to modernize health system have manifested through newer modes of state power. In the name of mobilization, for instance, attempts are made to

integrate traditional healers such as *Lāmās* into the formal health system. This represents a systematic effort by the state to nurture power and agency of citizens in order to advance and attain the pursuit of the state. Among other things, this chapter is particularly noteworthy for a collection of great quotes, which reinforces the author's methodological astuteness in the field of ethnography. The manner in which the local nuances of persistence, relevance and legitimacy enjoyed by local healers are brought to the fore, despite systematic efforts by the state to establish the supremacy of modern biomedicine, is commendable.

Since when did this object of establishing a biomedical order start to permeate Nepali society? Harper seeks to address this question in Chapter 5, in which he critically examines the emergence and evolution of a Mission Hospital in Palpa. Conducting an historical analysis of the hospital, he shows how foreign missionaries and doctors played a central role in the establishment of this hospital. These individuals are characterized as those representing the project of modernity in Nepal and responsible for charting a "discursive space" in rationalizing the significance of modern medicine.

Chapter 6 deals with the establishment of psychiatric services within the Mission Hospital. It provides insights into how locals who seek mental health treatment problematize their ailments and create expressions for the disease. The chapter further provides evidence on the growing pharmecutalization of health sector, particularly in the form of growing availability of anti-depressants. The chapter also discusses how mental health problems are linked to the larger socio-economic processes facing the country, ranging from migration and poverty and that related to education.

Chapter 7, which examines National Vitamin s, more vividly draws on and expands the Foucaultian theoretical traditions on the interplay of knowledge, power and discourse. The process by which Nepal is problematized as lacking in micronutrients and that the development of easy and accessible Vitamin A capsules, or "capsular promise" (p. 113) as panacea for this urgent problem is discussed in this chapter. The chapter also does justice in explaining how the interests of global and local assemblage of actors such as those representing scientific community, policy experts, monitoring and evaluation experts coalesce in establishing the relevance and continuity of the program. The chapter is highly engaging, with language that illustrates both the literary strength of the author as well his ability to bring the complex story to the spotlight. One quote here captures this dual strength of the author, "Hope in

times of ambiguity seems to be what is held up in capsular promise, despite the capsules themselves being part of that very ambiguity” (p. 113).

In Chapter 8, Harper brings his personal experiences to bear into the discussion about the promises and pitfalls of tuberculosis (TB) prevention program. Having worked as a physician in Nepal in the 1990s to curb the looming threat of tuberculosis, he offers insights into the politics of establishing the relevance of TB program in the face of increased competition from other health agenda and priorities. While the chapter on the Vitamin A program sheds light into the rationale for and the process by which the international development regime classifies certain programs as a success or a failure, this chapter provides insights into how the local context is central in not just our understanding of programmatic success or failure, but also the design and delivery of health interventions in the first place. As one example of such context influencing health outcomes, Harper discusses how the poor and vulnerable have to negotiate with the bureaucratic norms and procedures in order to remain enrolled in the TB treatment program. It is suggestive of the way in which the poor’s daily lived experiences are incompatible with the requirements and protocols of the TB treatment program.

In the concluding chapter, the author tries to reengage the audience with the process and implications of establishing a biomedical order. The pharmaceuticalisation of health system is one such consequence of the supremacy accorded to the biomedical approach to health. Overtime, the pharmaceuticalization has also shaped the ways in which locals define their ailments and also their quest for modern health treatment. While the policy makers and the state tend to resort to the easy way of blaming citizens for non-compliance of the health interventions, Harper draws attention to more complex problems such as easy availability of uncombined medicine, and issues rooted in society, namely, poverty, migration, etc. The author calls attention to the fact that reasons for non-adherence to the medical order often times lies outside the immediate purview of the health sector. The concluding chapter also contains self-reflections, experiences and dilemmas of the author. Particularly interesting is his reflections on the role as medical anthropologist in critically analyzing the power relations that characterize different health interventions, an area that he once worked on and promoted in his role as a physician.

The book makes an important contribution in advancing the study of global-local interface in design and delivery of development programs, and

also in our collective understanding of how context and power reinforce one another in designing and delivery of development programs. The book also is an important contribution in establishing the critical role of qualitative research in the field of global health. Where clinical trials are increasingly seen as ‘gold standard’ in assessment of global health programs, the effort of the author is timely and appropriate in making the case for qualitative research towards evidence-based planning and policy making. Another key strength of the book lies in its thick description of data. This however comes with a cost. While thick description may be a treat for a reader with serious interest in qualitative and ethnographic research, it is conceivable that a more casual reader could find the details mundane and less engaging. Having played a dual role as both practitioner and researcher, and with background in having served as a ‘cultural broker’ in translating research into practice, the author will hopefully find ways of making his findings more accessible to a diverse set of audience.

The timing of Harper’s research coincides with one of the most turbulent times in Nepal’s history. It is for this reason that the author in the introductory chapter hints at his attempts to situate his research within this changing socio-political events. There is no doubt that the book does a convincing job of demonstrating how some forms of globally mandated and propagated views and approaches to health get rationalized and legitimized in the local context. This reflects, as in the case of the Vitamin A program, the flow of discursive power from the global to the local. However, in making this argument, the author makes little reference to how the ongoing socio-political changes facing Nepal, including the emergence of new forms of social movements, the constellation of citizen-led actions, the calls for rights and social inclusion and that for addressing of power inequalities, may have bearing on the way global discourse may alter to the tune of local realities. In other words, it seems unclear from the book whether and to what extent the various forms of struggles for power in contemporary Nepali society have challenged, resisted and even hindered the production and stabilization of the discourses surrounding the biomedical ordering of Nepali society. Given the timing of Harper’s research, it would have been interesting to see this theme to have found a more prominent place in the book.

The book, overall, is sure to be an influential piece of work for Nepal, as it undergoes historic transformation in the way development is being imagined and pursued. The book also contains richly referenced text, which will prove

invaluable resource for those with interest in development in general and public health programs in particular.

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