

## Book Reviews/Comptes rendus

PAUL FARMER, *Pathologies of Power: Health, Human Rights, and the New War on the Poor*. Berkeley, CA: University of California Press, 2005, 402 p. \$15.95(USD) paper.

Paul Farmer's work is simultaneously inspiring and alarming. Integrating notions commonly found in medicine, human rights discourse, and the social sciences in general, Farmer constructs a thorough and compelling analysis of sickness and suffering. In articulating global experiences of health, *Pathologies of Power* first draws on Farmer's personal experiences as both an anthropologist and physician in settings lacking medical and social supports. Farmer details his experiences in Haiti where AIDS patients he treats are incredibly poor and persecuted, and whose plights are ignored by those outside of the country. He describes a similar situation in Chiapas, Mexico, where a constant state of government and military unrest creates conditions of destitution and inadequate medicine, treatment facilities, shelter, and nutrition. Farmer also describes the reciprocal relationship between the suffering that permeates the Russian penitentiary system – a virtual breeding ground for communicable diseases (especially tuberculosis) – and the state's deteriorating economy.

Farmer asserts that the most important insight gained from these experiences is how the lives of individuals are dictated by elements of structural violence like social and political oppression, insufficient access to medical treatment, education, nutrition, etc. Each serves to create and perpetuate an environment of sickness and suffering. But what should be done about this? Farmer addresses this vital question in the text's second half via a critical analysis of current policy and practice, delineating possible solutions for alleviating what he calls "the new war on the poor." The book offers a criticism of existing economic and social conditions conducive to the sickness and suffering of the poor, citing past research in both medicine and social science. Farmer calls for the employment of social medicine by means of a multi-faceted course of action (observe, judge, and act) and presents suggestions for enacting this change: making health, healing, and the provision of services central to any advocate's agenda, establishing innovative research plans, expanding educational mandates, gaining independence from governments and bureaucracies, and securing more resources for the fight for health and human rights. These arguments are based on the notion of health care as a human right, which Farmer cites as the foundation for organizational policies and individual actions.

There is a flaw, however, with Farmer's critical evaluation that inaction is the result of self-interest, charity is often more for personal benefit than for those we claim to try to help, and that talking or writing about these issues is not enough. In calling for action on a larger scale, Farmer neglects that someone has to talk about these problems, i.e., write about and disseminate similar information. Instead, Farmer implies a need for action that parallels his own. Such an assertion is problematic in that social justice, to be a bit colloquial, comes in all shapes and sizes; not every individual trying to initiate social change will care to or be capable of going about it in the same ways. Although Farmer admirably admits a blatant positionality in the introduction of the text and does not try to disguise his perspective with righteousness or jargon, it is important to emphasize that his is only one way to intervene.

The evaluation constructed in *Pathologies of Power* takes a unique approach in presenting illness as a form of structural violence, bringing to the fore the opportunity for a discussion across disciplines. By actively integrating personal experience and empirical evidence, Farmer establishes the emotional and intellectual framework necessary for critical engagement and inspiration. The text paves the way for structural analyses of industrialized countries and the ways in which existing policies and practices may contribute to structural violence. It is not only geared toward those in the field, but is a good read for those outside of academia and medicine.

Despite the gravity of the argument, Farmer allows the reader to be drawn into his stories and feel the plight of the victims. Once this emotional attachment is developed, Farmer uses these examples as a point of reference in his evaluation of current policy and practice, facilitating a logical and comprehensible plea for social justice in health care. Overall, Farmer's innovative analysis successfully conveys the idea that health care is a human right and that all humans – no matter their social, economic, or geographic position – should be included.

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