



SECOND OPINION

Looking Ahead to Tarragona

ELIZABETH CARTWRIGHT (IDAHO STATE U)

We have had an excellent response so far in registration for our upcoming meeting in Spain. We have over 600 registrants from more than 60 countries. The program will include a robust offering of papers that will be presented in various formats and styles within our presentation streams. We also have a large number of posters and multimedia presentations that will be displayed in interactive venues.

Methods workshops will be held beginning June 11, continuing through June 14, to facilitate the participation of scholars attending the Medical Anthropology Young Scholars (MAYS) meeting that starts June 10. See the conference website for additional information on the workshop registration process.

"Encounters and Engagements" will host a series of workshops allowing medical anthropologists to share skills and exchange experiences. These will cover both qualitative and quantitative methods, as well as mixed methods approaches. They will represent the most current methodologies available to medical anthropologists and will highlight particularly innovative methodological approaches.

The ten workshops given in the methods track of the conference will include mixed methods studies, participatory video methods, the use of spatial methods and social media, network analysis and the analysis of large volumes of qualitative data. Several of the social scientists involved in these workshops have participated in the National Science Foundation Short Courses on Research Methods classes both as instructors and as participants.

There is still time to submit your films! We are looking for anthropologists to submit completed films (maximum 60 minutes long) for an exhibit to be held during the conference. All anthropologists wishing to submit films need to complete the application form on the conference website by April 30 and upload their films to Vimeo for review by our scientific committee.

Finally, thanks to everyone who applied for a Wenner-Gren Global Travel Award. We had a large number of very qualified applicants and the award committee is thrilled to recognize the recipients in this newsletter (read "Travel Award Winners"). See you in Tarragona in June!

Travel Award Winners

Congratulations to the winners of SMA's student travel scholarships! Eight students have been awarded \$800 each to support their travel to and participation in the upcoming SMA/EASA conference. Submissions were judged on significance, relevance, innovation and clarity.

The winners are: Christopher Alley, Sherria Ayuandini, Misty Clover, Sachin Ghimire, Michelle Nebergall, Jack Tocco, Annaliese Watson and Nancy Worthington. Lizette Brenes received honorable mention.

Congratulations as well to the recipients of the Wenner-Gren Global Travel Award, also for the upcoming conference in Spain. The winners include: Waleska Aureliano (Brazil), Viola Cassetti (Argentina), Kapil Dahal (Nepal), Maria Epele (Argentina), Betina Freidin (Argentina), Prachatip Kata (Thailand), Bill Kinsey (Zimbabwe), Susan Levine (South Africa), Millicent Liani (Kenya), Peter Mangesho (Tanzania), Benson Mulemi (Kenya), Emilomo Ogbe (Lagos), Luperio Onofre (Peru), Rosa Marie Osorio (Mexico), Abu Baker Abdel Rahman (Sudan), Susana Ramirez Hita (Chile), Joana Roque de Pinho (Portugal), Samuel Owusu (Ghana), Vendelin Tarmo Simon (Tanzania), Yi-Su Chen (Taiwan), Harish Narainda (India) and Michael Tan (Philippines).

The travel award committees offer a heartfelt congratulations to these deserving scholars!



George Foster Practicing Medical Anthropology Award

The Society for Medical Anthropology announces that nominations for the George Foster Practicing Medical Anthropology Award are now being accepted. This award, first given in 2005, recognizes those who have made significant contributions to applying theory and methods in medical anthropology, particularly in diverse contexts, to multidisciplinary audiences, and with some impact on policy.

Nominations for the award should include: a letter of nomination, an additional supporting letter, a biographical statement by the nominee, and the candidate's current CV. There are three criteria for the award: (1) contributions to applying theory and methods in "diverse contexts," meaning that the individual has worked on a number of problems in different settings, communities and/or populations; (2) accessibility/relevance of work to multidisciplinary audiences; (3) impact on policy.

Committee considerations in reviewing nominations include (in no particular order):

Cumulative body of work

Publications may not be the best evidence of excellence in practice. Types of written work products regarded as worthy of attention range from peer-reviewed publications and books to reports and other grey literature. We also look to evidence of publications directed to audiences beyond anthropologists. We do not stick to the kinds of considerations that a university-wide tenure committee might reward.

Impact on the field of medical anthropology

On the one hand, this award is for persons who speak to practice and policy; a deserving candidate might not be regularly involved in annual SMA events or otherwise be visible to academics.

On the other hand, a top candidate should show evidence of impact on the discipline in some important way. This could take the form, for instance, of an impact on theory, methodology, visibility of anthropology in the public or policy realm, having designed or influenced curricula, or having trained or been a mentor to students.

Policy emphasis

We interpret "policy" very broadly, including, for example, policy relevant to organizations, communities, programs, NGOs and nations.

Send inquiries and nominations to Foster Award Committee Chair Robbie Baer (baer@usf.edu) by August 15, 2013. Please note that the award committee may keep nominations for the George Foster Practicing Medical Anthropology Award for three years for ongoing consideration.

Graduate Student Paper Prize in the Anthropology of CAM/IM

The Complementary and Alternative Medicine (CAM) and Integrative Medicine (IM) Special Interest Group of the Society for Medical Anthropology requests submissions for a new Graduate Student Paper Prize in the Anthropology of CAM or IM.

The group was organized in 2006 to encourage to anthropological study of CAM and IM as emergent socio-medical phenomena having global ramifications in the 21st century. Our members recognize CAM/IM as a contemporary example of medical pluralism, influenced by processes of globalization and hybridization, scientization and commodification.

A committee of CAM/IM SIG members will judge qualifying submissions. The author of the winning paper will receive a cash award of \$100 and her or his name will be announced in *Anthropology News* and at the SMA

business meeting at the AAA Annual Meeting in November. Submissions from all anthropological subdisciplines are encouraged.

Qualifying Criteria

- Primary or first author must be a graduate student at time of submission
- Preferably based on original fieldwork and data, but can be theoretical
- Must have been written in the past two year (24 months)
- May be unpublished or submitted for publication at the time of submission
- Maximum of 8,000 words, not including references

Judgement Criteria

- Link to the CAM/IM SIG statement of purpose (above)
- Originality of fieldwork and data
- Richness of substantive or evidentiary materials

- Clarity of anthropological methods
- Effective use of theory and/or data
- Organization, quality of writing and coherence of argument

Submission Process

- Please do not include your name or any identifying information in the paper itself
- Provide a separate cover sheet that includes your name, mailing address, email address and school affiliation
- Papers must be double-spaced and in PDF format (please include page numbers)
- References should be formatted in the *American Anthropologist* style
- Please submit an electronic copy by email to Sonya Pritzker at spritzker@mednet.ucla.edu.

Submissions must be received by 5:00 p.m. EDT on July 1, 2013 for full consideration. Questions may be directed to Sonya Pritzker by email at pritzker@mednet.ucla.edu. We look forward to your submissions!

STM Graduate Student Paper Prize

The Science, Technology and Medicine (STM) Interest Group of the SMA is pleased to welcome submissions for the STM Graduate Student Paper Prize. This prize is awarded annually for a paper that offers an innovative approach to issues in science, technology or medicine. These issues include:

1. How scientific research, technological transformation and professional medicine inform public health policy and popular culture and affect the intimate realms of bodily experience;
2. The ways that laboratory and experimental medicine (both public and private sector) are influenced by economic and political institutions and patient mobilization;
3. The specificities of the development, regulation, marketing and distribution of pharmaceuticals and biologics;
4. How local experiences of illness and health are refracted through established modes of discrimination (such as class, race and gender) and unequal access to new medical technologies; and

5. The extent to which pragmatic and embodied responses to medical science and technology shape concepts of personhood and degrees of political membership.

Submission rules

The word count should be 6,000-8,000. All authors must be enrolled as graduate students at the time of submission. The paper can be under review at the time of submission, but it cannot be in press or published.

Award

The winner of the prize will be announced at the 2013 AAA Annual Meeting in Chicago, IL. The winner will receive an award certificate, detailed suggestions from the committee of judges on ways to prepare the article for publication, and a cash prize of \$100.

Submission procedure

Email submissions to Amy Moran-Thomas (amoran@princeton.edu) by June 1, 2013. For more information on the STM interest group see www.medanthro.net/interest-groups/stm.

Submit Your Medical Anthropology Syllabi Today

The Society for Medical Anthropology invites faculty to add new or updated syllabi to the SMA syllabus directory, an important resource for our community.

To browse current syllabi, see www.medanthro.net/academic-resources/syllabi. There are presently 54 topic categories listed, ranging from adolescent health and aging, to bioethics and epidemiology.

To share a new syllabus, see www.medanthro.net/contact-us/upload-syllabus to access SMA's syllabus upload tool and details on the information that your file should include.

While the SMA webmaster is working to update the format and searchability of our syllabus directory, we ask members to take a few moments to upload new examples, so that we can develop a robust collection as a resource for junior and senior scholars alike.

WHR Rivers Paper Prize Competition

The SMA announces the 2013 competition for the Rivers Undergraduate Student Paper Prize. The Rivers Prize will be given for the outstanding paper in medical anthropology written by an undergraduate student. The names of the winners (and of their mentoring professors, if appropriate) will be announced at the SMA annual business meeting during the annual AAA meeting. Encourage your students to apply.

Papers must have been written while a student, in this or the preceding academic year only. The prize carries a \$250 cash award and the journal *Medical Anthropology Quarterly* (MAQ) will have the right of first refusal on winning manuscripts. Winners serve on the judging committee in the following year's competition.

Send nominations materials to: Juliet McMullin (julietm@ucr.edu), Rivers Prize Committee Chair, University of California, Riverside, Department of Anthropology, 900 University Avenue, Riverside CA 92521. She will then send your paper and the cover letter to the relevant sub-committee members.

All submissions must be electronic. Papers should not exceed 20 double-spaced pages, not including bibliography. To support blind review, no identifying information or acknowledgments should be contained in the manuscript. Only the paper's title should appear prior to the text on page one. The cover letter should contain (1) the paper title; (2) which competition it is being entered into (Hughes or Rivers); (3) details about the author, including in-

formation on student status and relevant advisor's name, if any; and (4) an email address for correspondence. Please also include your postal mailing address and phone number. The submission deadline is July 1, 2013.

Notification of competition results will be made in the fall. It is the entrant's responsibility to keep the prize coordinator updated as to any change in his or her email contact information. If you are the winner and cannot be contacted, you will forfeit the prize.



W.H.R. Rivers (by Henry Maull, The Royal Society)

CFP: Applied Anthropology Seminars

The School for Advanced Research (SAR) sponsors a two-day seminar every other year to provide anthropologists and scholars from related disciplines with the opportunity to address critical human problems and social issues through the application of anthropological insights and methods.

The goal of the seminar is twofold: (1) to organize a plenary session at the annual meeting of the Society for Applied Anthropology and (2) to prepare papers for an edited volume to be submitted to SAR Press for publication in its Advanced Seminar Series.

The School provides travel support as well as room and board for up to ten participants, who meet at SAR's campus in Santa Fe, New Mexico. Each participant is expected to contribute a paper, which will be discussed during the two-day session in preparation for the SfAA plenary session and manuscript to be submitted to SAR Press.

Participants will be responsible for expenses incurred in attending the plenary session at the SfAA meetings. Following the seminar, the chair is required to submit a two- to three-page summary for dissemination through the School's website and annual review. The chair is also expected to serve as volume editor for the manuscript.

Call for Proposals

SAR seeks proposals for a seminar to be conducted in fall 2014, in preparation for an SfAA plenary session in spring 2015. Applications should include:

- Cover sheet (see sarweb.org/media/files/applied_anthropology_seminar_application.pdf);
- Proposal, not to exceed six double-spaced pages;
- References cited in the proposal, not to exceed one single-spaced page;
- CV, for the applicant(s) only, not to exceed four single-spaced pages.

The proposal should explain:

- The topic of the seminar and key is-

ssues to be addressed;

- How the topic is of broad importance to applied anthropology;
- Why a seminar is necessary to address the topic and why it is needed now;
- Who the participants (ten maximum) might be, what each person would contribute, and the likelihood that each person would participate;
- The expected results of the seminar, including participation in the SfAA plenary session and preparation of a manuscript to be submitted for publication to SAR Press.

Submission Process

Please email the application in pdf or Word (97-2003) format by September 15 to seminar@sarsf.org. For in-

quiries, please contact the director of scholar programs at (505) 954-7201 or seminar@sarsf.org. See complete details about this program at sarweb.org/applied_anthropology_seminars.



School for Advanced Research (SAR) Campus, Santa Fe, New Mexico, 2007 (by Jsordaz)

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So, What Did You Say Medical Anthropology Is?

DOUGLAS A. FELDMAN (THE COLLEGE AT BROCKPORT, SUNY)

I'd like to tell you about a story that happened to me a few days ago.

I was at a bar, in Rochester, New York, where I live, and I met a person who asked me what do I do for a living. And I said, "I'm a medical anthropologist." Well, I really didn't think he knew what an anthropologist is, yet alone a medical anthropologist. So I said, very definitively, "A medical anthropologist is concerned with health, people and their cultures." He looked at me blankly, and then asked: "So, what did you say medical anthropology is?" I then said medical anthropologists are working in non-governmental and community-based organizations; federal, state and city governments; corporations; international organizations; health organizations of various kinds; as well as colleges and universities. "OK," he said. "But what do they actually do?"

I then said, "Let me give you some examples of what medical anthropologists are doing and writing about." I picked up

unequal opportunities."

Lenore Manderson's *Technologies of Sexuality, Identity, and Sexual Health* (2011) examines how technologies such as contraception shape beliefs and practices of sexuality. She especially emphasizes the role of globalization, and how products and ideas "travel." The book includes several interesting case studies about migrants.

Carolyn Sargent and her co-authors examine reproductive health on an international scale in *Reproduction, Globalization, and the State* (2011). They offer new perspectives on how transnational migration and global flows affect the reproductive lives of men and women in many societies throughout the world. Sargent's chapter on the childbearing beliefs and practices of West African women in France emphasizes the roles of racism and Islam.

Marcia Inhorn's work, *The New Arab Man* (2012), examines how infertility affects Middle Eastern couples from var-

In *Testing Women, Testing the Fetus* (1999), Rayna Rapp investigates how American women from different backgrounds understand prenatal testing and the accompanying choices. Her book is based on 15 years of research focusing on the ways in which women of different social, economic and religious groups experience genetic testing and how they interpret the information they receive as a result. An important issue discussed is how women negotiate the choice to be tested, or not to be tested.

More traditional practices still co-exist with these modern technological methods of shaping reproduction and sexuality. In *The Female Circumcision Controversy* (2001), Ellen Gruenbaum points out that Western opposition to genital cutting often provokes a backlash from people in the countries where the practice is common. She explores both outsider and insider perspectives on female genital cutting, concentrating particularly on the complex attitudes of the

people who practice it and on local efforts to end it. Gruenbaum finds that the criticisms of outsiders often fail to appreciate the custom's complex meanings.

HIV/AIDS research is another area of medical anthropology investigating how people make choices about sexual behavior. In my own research with several colleagues in Zambia in a chapter of my edited

book *AIDS, Culture, and Africa* (Feldman, et al. 2008), I found that Zambian high school students severely stigmatize people with HIV/AIDS even though the epidemic is rampant in their city, Lusaka, affecting their aunts, uncles, cousins, neighbors, and often their own parents. However, this strong moralistic condemnation by these students of those engaging in extra-marital and pre-

One important development in the anthropology of reproduction over the past twenty years has been an increasing focus on the use of technology to achieve goals such as pregnancy, healthy babies and limited family size. But the use of these technologies always includes choices made on the basis of values, beliefs and unequal opportunities.

my drink, a rum and diet coke, turned to him, and said:

"One important development in the anthropology of reproduction over the past twenty years has been an increasing focus on the use of technology to achieve goals such as pregnancy, healthy babies and limited family size. But the use of these technologies always includes choices made on the basis of values, beliefs and

ied backgrounds, and how their methods of coping challenge stereotypes. Romantic love and marriage based on companionship are emphasized in her book. Her findings show that infertile men are living what they consider moral lives with, and sometimes without, religious guidance. They are having loving marriages before and after becoming parents. And they are using new reproductive technologies.

marital sex resulting in HIV infection does not decrease their own high-risk behavior at all.

Utilizing case studies from several countries, Jennifer Hirsch and the other authors of *The Secret* (2009) investigate how women in diverse settings are frequently exposed to HIV through their husbands' extramarital affairs. An important factor is the conflict between traditional ways and the practices of romantic non-marital relationships.

Tiantian Zheng and the other authors of her edited volume, *Sex Trafficking, Human Rights and Social Justice* (2010), examine the agency of migrant women. She looks at the causes of migration and human trafficking, as well as the results of policy regarding these issues. Case studies from several locations are used to investigate these concerns. Zheng emphasizes the need to focus on social justice and the human rights of migrant communities.

Mark Padilla's *Caribbean Pleasure Industry* (2007) examines Dominican men who sell sex to gay tourists, and their role in the global political economy in which tourism is a powerful industry. He also points out that bisexual behavior and tourism are important, but often ignored, factors in the AIDS epidemic. He argues that complex local definitions of sexuality need to be examined, rather than assuming the existence of a rigid straight/gay distinction.

Paul Farmer and the co-authors of *Women, Poverty, and AIDS* (2007) transcend biomedical models to examine how poverty, sexism, and racism have created an AIDS crisis among young women in low-income communities. This second edition is focused on the terrible epidemic sweeping sub-Saharan Africa and other parts of the developing and less developed world. Millions of lives could be saved if medications were even more widely available.

Other developments in critical medical anthropology have also illuminated pressing real-world problems, to which we can bring unique insights. Merrill Singer and Hans Baer explain in *Introducing Medical Anthropology* (2011) that

medical problems cannot be completely understood by treating them solely as biological in nature. They emphasize that global health inequalities are a major cause of worldwide suffering.

Problems of inequality appear all over the world. Zones of social abandonment are emerging everywhere in Brazil's big cities—places like Vita, where unwanted people are left to die. João Biehl's book *Vita* (2012) is an emotional story which centers on a young woman named Catarina, who is increasingly paralyzed and said to be mentally ill, living out her time there. Biehl leads a detective-like journey to understand Catarina; to unravel the strange words that are part of the "dictionary" she is compiling; and to trace the complex network of social relationships in which her abandonment took form.

Here in the United States, stark inequalities in healthcare provision and health outcomes are also common. Among some physicians, unequal health outcomes between patients of different ethnicities are often taken as evidence of genetic differences between these groups. However, the vast body of evidence indicates that these health disparities are a result of social inequality. Drawing on recent developments in other disciplines, Lance Gravlee presents a model, in his paper in the *American Journal of Physical Anthropology* (139[1]), explaining how what is seen as "racial" inequality becomes embodied in individual health.

In *Women's Health* (2007), Liz Cartwright and Pascale Allotey examine the challenges faced by women from marginalized communities in accessing healthcare in the United States, Australia, and New Zealand. Indigenous and refugee women are especially affected. The authors also suggest that anthropologists should do more to advocate for these women, while anthropologists should also continue to produce rigorous scientific work.

In *Diabetes Among the Pima* (2006), Carolyn Smith-Morris examines how the culture's values and beliefs shape people's experiences of living with a very high prevalence of diabetes, arguing that due to the high prevalence of gestational diabetes, the prenatal period could offer the best hope for curbing diabetes in this community. Smith-Morris investigates many core values informing the Pimas' experience of diabetes, such as motherhood and food practices.

In *The Healthy Ancestor* (2010), Juliet

The authors also suggest that anthropologists should do more to advocate for these women, while anthropologists should also continue to produce rigorous scientific work.

McMullin uses Hawaii as a case study to examine how the negative health outcomes of Native Hawaiians are frequently blamed on personal factors, rather than structural inequality. She also describes the revival of traditional Hawaiian practices, and how these can be used to promote better health.

In *Global Health* (2008), Mark Nichter summarizes over 25 years of social science research, and its impact on international health, as well as examining future directions of this field. He focuses on our cultural understanding of contagious diseases, how they are understood locally, and how various populations respond to public health interventions. He also examines the perceptions of health care workers whose points of view on illness often differ from local populations living in developing and less developed countries.

Sometimes, people abuse drugs as a response to inequality, lack of opportunity, and despair. Philippe Bourgois and Jeff Schonberg investigate the daily life of homeless San Francisco drug users in *Righteous Dopefiend* (2009). They catalog

how the men engage in various activities to provide enough income for drugs and basic necessities. Embodied suffering is examined through critical theory.

In her paper in “Culture, Medicine, and Psychiatry” (36[1]), Mara Buchbinder advances our theoretical understanding of the process of diagnosis. She does this through examining how doctors explain difficult clinical encounters with autistic children who also suffer from chronic pain by using “stickiness” as a metaphor. This allows the doctors to rationalize failed medical interventions.

The chapters in Camella Moore and Holly Mathews’ edited book, *The Psychology of Cultural Experience* (2001), use a variety of new theoretical approaches to explore the relationship of individual experience toward culture. This book demonstrates the importance of basing comparative studies on categories derived from detailed accounts of personal experience.

Using ethnographic methods focusing on sexual meanings as an alternative to surveys of sexual behavior, Richard Parker argues in *Bodies, Pleasures, and Passions* (2009) that sexual life can only be fully understood through an analysis of the cultural logics that shape experience. Drawing on the tradition of interpretive anthropology, he focuses on the many sexual scripts that have been articulated in Brazilian culture and examines the often contradictory ways in which these scripts shape the sexual experience of different individuals.

Medical anthropologists also continue to study non-biomedical healthcare systems in both Western and non-Western countries. The practice of Mexican American traditional healing is part of a culturally important health care system. *Curanderismo: Mexican American Folk Healing* (1997) describes the practice from an insider’s point of view, based on the authors’ apprenticeships with traditional healers. Bob Trotter, Juan Chavira and Luís León also examine why people sometimes seek treatment from traditional healers, rather than the biomedical system.

In *Preventing and Controlling Cancer in North America* (1999), Diane Weiner and her co-authors examine how different ethnic groups understand the disease, and its causes and treatments. Case studies include several Native American populations, as well as among African Americans.

In *Ethnomedicine* (2008), Pamela Erickson explains what various medical systems have in common, as well as analyzing why the biomedical model became dominant. She carefully examines differences in disease causation theories. She also suggests practical ways of including alternative medicine in a biomedical setting.

In *Chinese Medicine in Contemporary China* (2002), Volker Scheid questions whether Chinese medicine is a tradition or a science, and what factors have supported its practice for over the past 2,000 years. He asks why it has not “disappeared” like other ancient practices if it is a tradition; and why it seems so different from other sciences, if that is the correct category.

Biomedicine itself can be studied in various economic settings. Kaushik Rajan’s edited book, *Lively Capital* (2012), explores how capitalism and the life sciences interact to effect health outcomes. The authors remind us that these financial issues have the potential to alter life and death situations. They also examine how emotions and desires are involved in these situations.

In *Revolutionary Medicine* (2012), Sean Brotherton investigates how ordinary Cubans navigate their country’s public and informal health care systems after the collapse of the Soviet Union. Until then, socialist Cuba encouraged citizens to view access to health care as a human right, and the state’s responsibility to provide it as a moral imperative. Brotherton also examines how the decreasing availability and quality of care has impacted the choices made by patients.

Devva Kasnitz’s paper in *Disability Studies Quarterly* (21[3]) argues that anthropology is well-suited to the study of disability due to its otherness in main-

stream culture. Also, disability reflects how societies distribute power unequally. She points out that disability studies are also an attractive emerging field for ethnographers.

Russell Shuttleworth and Teela Sanders’ edited volume *Sex and Disability* (2010) uses a variety of perspectives to examine the cultural barriers that restrict the sexuality of disabled people. The authors argue that limited progress has been made in both theoretical and empirical studies since the 1990s, and they seek to redress this by providing new directions in scholarship. One of their important goals is to remove the taboo on discussing sexuality and disability.

Susan Gabel presents the work of major scholars of education in disability studies in *Disability Studies in Education* (2005). It is an interesting work, because this topic has emerged only recently as a field of scholarship. Personal narratives are used to illuminate complex points.

In *Thinking “Children”* (2009), Claire Cassidy begins by investigating the historical and present-day definitions of children. She then examines notions of personhood, self and identity. Her conclusion is that children are rational beings who deserve a more active role in society.

Andrea Wiley’s *Re-imagining Milk: Cultural and Biological Perspectives* (2011) shows us how to analyze a familiar food from a biocultural perspective. Wiley examines how milk is physically processed by various human populations; and what are some common American cultural beliefs about it today.

“So, these are just a few of the thousands of interests and studies that medical anthropologists throughout the world are currently involved in and doing,” I said to my new friend as I finished my drink. He looked at me with that same blank stare for a few seconds, and then looked down at his watch, and said he had to leave.

I don’t know if I got through to him about the depth and importance of our field. But I enjoyed telling him all about it. Thank you.

From the SMA President

DOUGLAS A. FELDMAN (THE COLLEGE AT BROCKPORT, SUNY)



The Tarragona, Spain conference—jointly sponsored by the SMA and the Medical Anthropology Network of the European Association of Social Anthropologists (EASA)—is developing quite nicely. It will bring together medical anthropologists from North America, Europe and all over the world. This is the first time that the SMA is meeting in Europe. It will be held June 12-14 and you can still register at www.medical-anthropology-urv.cat.

One key way in which the conference will be unique is that paper presenters will not be asked to read their papers. Instead, volunteer stream leaders will place the participants in related panels where they will be asked to talk about their papers, rather than read them. This process is becoming increasingly popular in Europe and it should make for an even more lively conference.

We are also organizing for the SMA/AAA meetings this November in Chicago. One of the highlights of

the meetings will be our first ever Past Presidents' Reception. This will honor the efforts of all our past presidents, whose diligent work has created the excellent organization that SMA has become. All SMA members are cordially invited to attend.

Unfortunately, neither SMA nor AAA has a complete list of all of our past presidents. So we have been trying to develop this list, in order to ensure that all living SMA past presidents could be personally invited. We are therefore asking our SMA membership to assist us in remembering the names and contact information for all our past presidents.

So far, we have most of the names and contact information for the more recent past presidents including (in chronological order of when they served): Dorothea Leighton, Margaret Clark, Charles Hughes, Susan Scrimshaw, Margaret Lock, Shirley Lindenbaum, Pertti Peltto, Carole Browner, Lucille Newman, Bill Dressler, Mark Nichter, Craig Janes, Marcia Inhorn, Carolyn Sargent and Jeannine Coreil. If you can assist with additional information, it would be greatly appreciated. Thank you.

See you in Spain! And in Chicago!

From the Editor

DINAH WINNICK (U MARYLAND, BALTIMORE COUNTY)



Excitement is building for the upcoming SMA/EASA meeting in Spain, now just weeks away.

SMA's social media presence debuted in advance of last November's

AAA meeting in San Francisco. Our new Facebook and Twitter accounts enabled us to share details about not-to-miss sessions, reflect on talks, recognize poster presenters, congratulate award winners, and connect with students and junior scholars who are shaping the future of medical anthropology. @SocMedAnthro on Twitter now has 1,380 followers and our Facebook page (facebook.com/medanthro.net) has nearly 400 likes, with content reaching thousands of readers.

Help us to maintain this momentum and continue to provide robust coverage of key SMA events by volunteering to update social media or take photographs at the upcoming SMA/EASA meeting in Tarragona, Spain, and the preceding Medical Anthropology Young Scholars (MAYS) meeting. If you are planning to attend either event and are interested in volunteering, please email me at dinah.winnick@gmail.com including a brief description of your familiarity with Facebook, Twitter and/or photography along with a few sentences on why you would like to volunteer and what you hope to gain from the experience.

The upcoming meeting is specifically designed to create opportunities for collaboration—across cultures, research areas and traditions of scholarship. This is managed by promoting conversation, but that conversation need not be limited to remarks made in Spain. Sharing the event with our online SMA community will help anyone who can't make it in person to remain engaged, and will keep our conversation going long after everyone has packed their bags for home.

Vote Now in the AAA Elections

The 2013 American Anthropological Association ballot is now open! To vote on leadership positions in both the general association and SMA, visit aanet.org/about/Elections. Log in through AnthroGateway and click on the Vote Now button to access the ballots in which you are eligible to vote.

Open AAA positions this year include president-elect, minority seat and practicing/professional seat on the Executive Board, and a range of seats on the Nominations Committee, Committee on Ethics, Committee on Gender Equity in Anthropology, Committee for Human Rights, Committee on Public Policy, Committee on Minority Issues in Anthropology, and Committee on World Anthropologies. SMA members are also eligible to vote for the positions of secretary, member-at-large #1, member-at-large #2 and student representative (all three-year terms) in our section.

Voting Deadline: May 31, 2013, 5:00 p.m. EDT