

PRAISE FOR PAUL FARMER'S *PATHOLOGIES OF POWER*

“In his compelling book, Farmer captures the central dilemma of our times—the increasing disparities of health and well-being within and among societies. While all member countries of the United Nations denounce the gross violations of human rights perpetrated by those who torture, murder, or imprison without due process, the insidious violations of human rights due to structural violence involving the denial of economic opportunity, decent housing, or access to health care and education are commonly ignored. *Pathologies of Power* makes a powerful case that our very humanity is threatened by our collective failure to end these abuses.”

ROBERT S. LAWRENCE, President of Physicians for Human Rights and Professor of Preventive Medicine, Johns Hopkins University

“*Pathologies of Power* is a passionate critique of conventional biomedical ethics by one of the world’s leading physician-anthropologists and public intellectuals. Farmer’s on-the-ground analysis of the relentless march of the AIDS epidemic and multidrug-resistant tuberculosis among the imprisoned and the sick-poor of the world illuminates the pathologies of a world economy that has lost its soul.”

NANCY SCHEPER-HUGHES, author of *Death without Weeping: The Violence of Everyday Life in Brazil*

“Wedding medicine and anthropology, painstaking clinical and field observation with rigorous conceptual elaboration, Farmer gives us that most rare of books: one that opens both our minds and hearts. *Pathologies of Power* uses the prism of public health to illuminate the structural forces that decide the ‘right to survive’ on the global stage. From Haiti to Russia to the United States, Farmer reveals the drama of the social production of mass sickness, suffering, and death without dramatizing, and then grapples with the tough moral issues without moralizing. He shows how market rule results in vertiginous violations of basic social and economic rights that in turn translate into escalating pathologies that ravage the poor. This book stands as a model of engaged scholarship and an urgent call for social scientists to forsake their cushy disregard for human rights at home and abroad.”

LOÏC WACQUANT, author of *Prisons of Poverty*

PATHOLOGIES OF POWER

HEALTH, HUMAN RIGHTS, AND THE NEW WAR ON THE POOR

PAUL FARMER

WITH A FOREWORD BY AMARTYA SEN

UNIVERSITY OF CALIFORNIA PRESS
Berkeley · Los Angeles · London

University of California Press
Berkeley and Los Angeles, California

University of California Press, Ltd.
London, England

© 2003 by the Regents of the University of California

Material included in Chapters 1 to 7 and 9 has been adapted from earlier work by the author, which appeared in the following publications: "On Suffering and Structural Violence: A View from Below," *Daedalus* 125, no. 1 (1996): 261–83; "On Guantánamo," in *The Uses of Haiti*, by P. E. Farmer (Monroe, Maine: Common Courage Press, 1994); "A Visit to Chiapas," *America* 178, no. 10 (1998): 14–18; "TB Superbugs: The Coming Plague on All Our Houses," *Natural History* 108, no. 3 (1999): 46–53; "Medicine and Social Justice," *America* 173, no. 2 (1995): 13–17; "Listening for Prophetic Voices in Medicine," *America* 177, no. 1 (1997): 83–85; "Cruel and Unusual: Drug-Resistant Tuberculosis as Punishment," in *Sentenced to Die? The Problem of TB in Prisons in East and Central Europe and Central Asia*, edited by V. Stern and R. Jones (London: International Centre for Prison Studies, King's College, 1999); "Pathologies of Power: Rethinking Health and Human Rights," *American Journal of Public Health* 89, no. 10 (1999): 1486–96.

For use of the quotations in the epigraphs in this book, grateful acknowledgment is made to the authors and publishers, as listed on pages 379–81 and deemed part of this copyright page.

Library of Congress Cataloging-in-Publication Data

Farmer, Paul

Pathologies of power : health, human rights, and the new war on the poor / Paul Farmer ; with a foreword by Amartya Sen.

p. cm. — (California series in public anthropology ; 4)

Includes bibliographical references and index.

ISBN 0-520-23550-9 (Cloth : alk. paper)

1. Social stratification. 2. Equality. 3. Poor—Medical care. 4. Discrimination in medical care. 5. Right to health care. 6. Human rights.

I. Title. II. Series.

HM821.F37 2003

305—dc21 2002013311

Manufactured in the United States of America

12 11 10 09 08 07 06 05 04 03

10 9 8 7 6 5 4 3 2 1

The paper used in this publication meets the minimum requirements of ANSI/NISO Z39 0.48-1992 (R 1997) (*Permanence of Paper*).

CONTENTS

Foreword by Amartya Sen	xi
Acknowledgments	xix
Introduction	I
PART I. BEARING WITNESS	23
1. On Suffering and Structural Violence <i>Social and Economic Rights in the Global Era</i>	29
2. Pestilence and Restraint <i>Guantánamo, AIDS, and the Logic of Quarantine</i>	51
3. Lessons from Chiapas	91
4. A Plague on All Our Houses? <i>Resurgent Tuberculosis inside Russia's Prisons</i>	115
PART II. ONE PHYSICIAN'S PERSPECTIVE ON HUMAN RIGHTS	135
5. Health, Healing, and Social Justice <i>Insights from Liberation Theology</i>	139
6. Listening for Prophetic Voices <i>A Critique of Market-Based Medicine</i>	160
7. Cruel and Unusual <i>Drug-Resistant Tuberculosis as Punishment</i>	179
8. New Malaise <i>Medical Ethics and Social Rights in the Global Era</i>	196

9. Rethinking Health and Human Rights	213
<i>Time for a Paradigm Shift</i>	
Afterword	247
Notes	257
Bibliography	333
Credits	379
Index	383

FOREWORD

AMARTYA SEN

“Every man who lives is born to die,” wrote John Dryden, some three hundred years ago. That recognition is tragic enough, but the reality is sadder still. We try to pack in a few worthwhile things between birth and death, and quite often succeed. It is, however, hard to achieve anything significant if, as in sub-Saharan Africa, the median age at death is less than five years.¹ That, I should explain, was the number in Africa in the early 1990s, *before* the AIDS epidemic hit hard, making the chances worse and worse. It is difficult to get reliable statistics, but the evidence is that the odds are continuing to fall from the already dismal numbers. Having made it beyond those early years, it may be difficult for us to imagine how restricted a life so many of our fellow human beings lead, what little living they manage to do. There is, of course, the wonder of birth (impossible to recollect), some mother’s milk (sometimes not), the affection of relatives (often thoroughly disrupted), perhaps some schooling (mostly not), a bit of play (amid pestilence and panic), and then things end (with or without a rumble). The world goes on as if nothing much has happened.

The situation does, of course, vary from region to region, and from one group to another. But unnecessary suffering, debilitation, and death from preventable or controllable illness characterize every country and every society, to varying extents. As we would expect, the poor countries in Africa or Asia or Latin America provide crudely obvious illustrations of severe deprivation, but the phenomenon is present even in the richest

countries. Indeed, the deprived groups in the “First World” live, in many ways, in the “Third.” For example, African Americans in some of the most prosperous U.S. cities (such as New York, Washington, or San Francisco) have a lower life expectancy at birth than do most people in immensely poorer China or even India. Indeed, location alone may not enhance one’s overall longevity.

EXPLANATION AND REMEDY

How can we come to terms with the extensive presence of such adversity—the most basic privation from which human beings can suffer? Do we see it simply as a human predicament—an inescapable result of the frailty of our existence? That would be correct had these sufferings been really inescapable, but they are far from that. Preventable diseases can indeed be prevented, curable ailments can certainly be cured, and controllable maladies call out for control. Rather than lamenting the adversity of nature, we have to look for a better comprehension of the social causes of horror and also of our tolerance of societal abominations. However, despite many illuminating studies of particular aspects of these general problems, investigators tend to shy away from posing the questions in their full generality. To confront the big picture seems like an overpowering challenge.

Paul Farmer, however, is not easily overpowered. He is a great doctor with massive experience of working against the hardest of diseases in the most adverse of circumstances, and, at the same time, he is a proficient and insightful anthropologist with far-reaching discernment and understanding. Farmer’s knowledge of maladies such as AIDS and drug-resistant tuberculosis, which he fights on behalf of his indigent patients, is hard to match. This he combines with his remarkable expertise on culture and society, acquired not just by learning from a distance but also from actually living and working in different parts of the deprived world. In addition, Paul Farmer is a public health interventionist with a dogged determination to work toward changing iniquitous institutions and mismatched arrangements. As the co-director of Harvard’s Program in Infectious Disease and Social Change (working with Dr. Jim Yong Kim, another remarkable public health expert), Farmer has led several major initiatives in changing the direction of health care and intervention (for example, in tackling drug-resistant TB).

But what is particularly relevant in appreciating the contribution of this powerful book is that Paul Farmer is a visionary analyst who can

look beyond the details of fragmentary explanations to seek an integrated understanding of a complex reality. In his earlier publications, including *AIDS and Accusation* (1992), *The Uses of Haiti* (1994), and *Infections and Inequalities: The Modern Plagues* (1999), he has already done much to illuminate important features of global deprivations. Now, in this remarkable book, which is hard to put down, comes the big picture, firmly linked with informationally rich illustrations of individual examples.

Farmer points to what he calls “structural violence,” which influences “the nature and distribution of extreme suffering.” The book is, as he explains, “a physician-anthropologist’s effort to reveal the ways in which the most basic right—the right to survive—is trampled in an age of great affluence.” He argues: “Human rights violations are not accidents; they are not random in distribution or effect. Rights violations are, rather, symptoms of deeper pathologies of power and are linked intimately to the social conditions that so often determine who will suffer abuse and who will be shielded from harm.” Those “social conditions” and their discriminatory effects are the subject matter of this general investigation and the specific case studies that establish the overall picture of powerlessness and deprivation.

CONCEPTS AND METHODS

Some will undoubtedly ask whether this is not too general, too grand, and perhaps even too ambitious an inquiry. Also, are the questions absolutely clear? How exactly is “power” defined? Does Farmer delineate the “social conditions” precisely? Does he provide an exact definition of “structural violence”? In fact, that is not the way Paul Farmer proceeds, and it is important to understand the methodology that distinguishes this wonderful study.

A phenomenon can be either characterized by a terse definition or described with examples. It is the latter procedure that Farmer follows. That procedure is, of course, quite standard when we learn certain basic words (such as “red” or “smooth”), as Ludwig Wittgenstein (arguably the greatest philosopher of our times) has famously discussed:

An important part of the training will consist in the teacher’s pointing to the objects, directing . . . attention to them, and at the same time uttering a word; for instance the word “slab” as he points to that shape. . . . This ostensive teaching of words can be said to establish an association between the word and the thing.²

Though not so primitive as “red” or “smooth” or a “slab,” terms like “power” or “violence” can also, often enough, be helpfully communicated through examples.

This is not to deny that we can try to explain these complex terms in other ways as well, in particular by proposing a precise definition through the use of other words. That indeed is the usual procedure, widely used, in the social sciences. And yet, as we know from experience, this is sometimes highly misleading, since the capacious content of a social concept or its diverse manifestations may often be lost or diminished through the maneuver of trying to define it in sharply delineated terms. The expressions “power,” “structure,” and “violence” are not eccentric inventions of Paul Farmer; they have figured extensively in the literature on social inequality.³ But attempts at defining them exactly by other words have typically been inadequate and unclear (and sometimes they have also generated the kind of “sociological jargon” that can sound arrestingly weird). For this reason, among others, the alternative procedure, by exemplification, has many advantages in epistemology and practical reason in parts of the social sciences. The epigrammatic definition, which many social scientists seek, often cannot escape being misleadingly exact; it can be precise but precisely inaccurate. A rich phenomenon with inherent ambiguities calls for a characterization that preserves those shady edges, rather than being drowned in the pretense that there is a formulaic and sharp delineation waiting to be unearthed that will exactly separate out all the sheep from all the goats.

Farmer does not fall for the temptation of a make-believe exactness. While keeping his eyes firmly on the general picture as he sees it, he goes from one case study to another to explain what “structural violence” is like (or how disparity of “power” may operate). We see the evident similarities as well as the rich variations of form and expression. By learning from Farmer’s book as a whole, we get an overall understanding that draws together the diverse details spread across these harrowing accounts.

ACÉPHIE’S POWERLESSNESS

For example, in discussing deprivations in Haiti, Farmer observes that “political and economic forces have structured risk for AIDS, tuberculosis, and, indeed, most other infectious and parasitic diseases” and adds that “social forces at work there have also structured risk for most forms of extreme suffering, from hunger to torture and rape.” He discusses in

each case exactly how this structuring of risk, in distinct forms, blights the lives of many, without touching the affluence of others. He moves from Haiti to Mexico, then to Russia, then to Peru, then to the United States, and right across the world, looking for—and insightfully identifying—institutional structures that push some into the abyss, while others do just fine. The carefully chosen details in each case help us to understand Farmer’s notion of “structural violence” through a process that is not altogether dissimilar to the teaching of the idea of a “slab.”

Indeed, power inequalities can work in many distinct ways. Take the case of Acéphie, the comely woman born in the small village of Kay through which runs Rivière Artibonite, Haiti’s largest river. She is lucky to be born into a prosperous peasant family, but her luck does not last for long. When the valley is flooded to make room for a reservoir, the villagers are forced up into the stony hills on the sides of the new lake. Their voice does not receive a hearing. The displaced people—the “water refugees”—seek whatever jobs they can get (no longer able to grow the rice, bananas, millet, corn, or sugarcane they grew so abundantly earlier), and Acéphie’s family ceases to make ends meet. Nevertheless, Acéphie—like other young women in families of water refugees—carries the family’s agricultural produce (miserable as it is) to the local market. The soldiers, stationed on the way, watch the procession of girls who walk to the market and often flirt with them. The girls feel lucky to get such attention, since soldiers are powerful and respected men.

When Captain Jacques Honorat woos the tall and fine-featured Acéphie, with her enormous dark eyes, reciprocation eventually follows (even though Acéphie knows that Honorat is married and has several other partners). The sexual relation does not last long, but it is enough to disrupt Acéphie’s life, while Captain Honorat dies of unexplained fevers. After trying to qualify herself as a domestic servant in the neighboring town of Mirebalais, the twenty-two-year-old Acéphie moves to Port-au-Prince and finds a servant’s job, at a tiny wage. She also begins seeing Blanco Nerette, who comes from a similar background (his parents were also water refugees) and now chauffeurs a small bus, and they plan to marry. However, when Acéphie becomes pregnant, Blanco does not welcome the news at all. Their relationship founders. Also, thanks to her pregnancy, Acéphie loses her job. The battle for economic survival turns intense and is now joined by disease. Acéphie dies of AIDS—loved still by her own family but uncared for and unhelped by society. She leaves behind a daughter, also infected with the virus. That is the beginning of another story, but not a long one.

The inequalities of power that Acéphie faced in her brief life involved *bureaucracy* (beginning with displacements to make room for the new reservoir without adequate rearrangement), *class* (reflected in Acéphie's relations with her employer and with Captain Honorat), *gender* (related to her standing vis-à-vis the males she encountered—from the soldiers to Blanco), and of course the *stratified society* (with the absence of public facilities for medical attention and care for the poor). Acéphie did not encounter any physical violence, but Farmer is persuasive in seeing her as a victim of structural violence.

POVERTY, INEQUALITY, AND POWER

The asymmetry of power can indeed generate a kind of quiet brutality. We know, of course, that power corrupts and absolute power corrupts absolutely. But inequalities of power in general prevent the sharing of different opportunities. They can devastate the lives of those who are far removed from the levers of control. Even their own lives are dominated by decisions taken by others. In one chapter after another, Paul Farmer illustrates the diversity and reach—and also the calamitous consequences—of structural violence. The basic theme and the theses become firmly established through these disparate but ultimately blended accounts. The whole draws on the parts, but firmly transcends them, in the integrated understanding that Farmer advances.

That understanding also suggests lines of thinking about ways of remedying the deprivations and the disparities. For example, if inequality of power, in different forms, is central to deprivation and destitution, then little sense can be made of the frequently aired and increasingly popular slogan, “I am against poverty, but I am really not bothered by inequality.” That attempt at a putative dichotomy can be disputed from different perspectives, for example, through an appreciation of the powerful effects of social and economic inequality on the unfreedoms that the subjugated experience.⁴ The proposal to distance inequality from poverty is severely challenged by Farmer's many-sided documentation of the impact of inequality of power on the lives that the subjugated can live. This diagnosis does not, of course, yield any instant solution of the problems; but it does indicate the difficult—and often ignored—social and economic issues that must be firmly faced to eliminate preventable morbidity and escapable mortality.

We live in an age of science, technology, and economic affluence when, as Farmer points out, we can, for the first time in history, deal effectively

with the diseases that ravage humanity. And yet the reach of science and of globalization has stopped short of bringing reasonable opportunity for survival within the grasp of the deprived masses in our affluent world. This is where the pathologies of power take their toll. As Farmer argues, “Anyone who wishes to be considered humane has ample cause to consider what it means to be sick and poor in the era of globalization and scientific advancement.”

Depressing as Farmer’s case studies are, their overall message is constructive and optimistic. The solutions are by no means easy, but they are not beyond the reach of our informed and resolute effort. This volume is a major contribution to the understanding that is needed for a determined encounter. We must avoid being like the man, to quote Dryden again, who “trudged along unknowing what he sought, / And whistled as he went for want of thought.” Paul Farmer teaches us how to stop whistling and start thinking. We have reason to be grateful.

ACKNOWLEDGMENTS

Because these chapters are grounded in the experience of specific communities, I have many debts to people on three continents and on a couple of very special islands. In Haiti, I am, as ever, grateful to Didi Bertrand, Fritz and Yolande Lafontant, Flora Chipps, and Loune Viaud as well as to the people of Cange and to the large number of victims of human rights abuses who came to me seeking my help as a physician. Several of my patients requested specifically that their stories be told; I hope they will forgive the lag time. Of course, it takes a village to care for patients, and so I would like to thank some of my colleagues—friends, really—in Haiti: Fernet Léandre, Jean-Hughes Jérôme, Cynthia Orélus, Jessye Bertrand, Marie-Sidonise Claude, Wesler Lambert, Maxi Raymonville, Maxcène Oréus, Jean Germeille Ferrer, and other clinicians at the Clinique Bon Sauveur. In Port-au-Prince, I am indebted to William Smarth, Antoine Adrien, Michèle Pierre-Louis, Mildred Trouillot Aristide, and to all those working for social and economic rights in Haiti. Thanks also to Hervé Razafimbahiny and Brian Concannon (who, in addition to working on major projects, are never too busy to help get innocent people out of jail), as well as Michelle Karshan and the rest of the small human rights community in Haiti. They know that the path is paved with thorns.

In Cuba, I thank my great friend Jorge Pérez Ávila, who will forgive me, I hope, for taking his patients out drinking (they were only *mojitos*). I am also grateful to Gustavo Kourí, Jorge González Pérez, Guadalupe Guzmán, and the community of those living in Santiago de las Vegas. In

addition, I add special thanks to Jesús Valle, Eduardo Campo, Fernando Mederos, and others good enough to spend so much time recounting their own experiences.

In Guatemala, I am especially obliged to Blanca Jiménez, Jesús Gaspar Jerónimo, Juan Alberto Jiménez, and Santiago Pablo Diego. In spite of their terrible losses during a war financed in part by my country of origin, they have offered me nothing but hospitality and kindness. In Mexico, deep appreciation goes to Julio Quiñones Hernández; Leonel González Ortiz; Dagmar Castillo; Jorge Gabriel García Salyano, and all of the staff of EAPSEC; Demóstenes Martín Pérez Urbina; Father Eliberto; and Pablo and Patricia Farías. Gratitude and admiration to the valiant people of many different communities in the autonomous zones, who, given current conditions, wisely prefer to go unnamed. The Fray Bartolomé de Las Casas Human Rights Center is an invaluable source of important documentation, and I am grateful for its hospitality.

In Russia, I thank Oksana Pomonarenko, Alexander Goldfarb, Ekaterina Goncharova, Alexander Pasechnikov, and many others at both Partners In Health–Russia and the Public Health Research Institute (PHRI). Thanks also to Sergei Borisov, Mikhael Perelman, and other colleagues involved in the care of patients with tuberculosis. Valery Sergeev, regional director of the Moscow office of Penal Reform International, has been a patient source of unbiased information. Within the Ministry of Justice, I am grateful to Alexandr Kononets, Yuri I. Kalinin, Vladimir Yu. Yalunin, and Minister Yuri Chayka. It has been striking to me that I had readier access to prisons in Russia than I did in my own country. All my trips to the Russian Federation were related, in one way or another, to the Open Society Institute; and I thank my many interlocutors in New York and in Moscow, including George Soros, Mia Nitchun, Srdjan Matič, Nina Schwalbe, Nancy Mahon, Miriam Porter, and Ekaterina Yurievna. Most of all, I thank Aryeh Neier, a visionary in several realms, not the least of them human rights.

In Peru, I thank Jaime Bayona and the entire “DOTS-Plus” team, especially the *promotores* and nurses; Rocío Sapag; the parish of Cristo Luz del Mundo; Brother Lenny Rego of Centro Óscar Romero; Benedicta Serrano; Gustavo Gutiérrez and the staff of the Instituto Bartolomé de Las Casas; Maria van der Linde and the staff of DEPAS; Emma Rubín de Celis; and Francisco Chamberlain. The impact of Peru and Peruvians is not evident in this book, which contains few case materials from Peru. This is misleading, however, since much of what I have written in these pages has been shaped by my association with Socios En Salud and other groups there.

In Boston, my primary appointment is in Harvard Medical School's Department of Social Medicine, with which I have been affiliated for my entire adult life. It's been an exceptionally fruitful association, at least from my point of view. Arthur Kleinman encouraged this work on human rights when many department chairs would have ruled it out of order; the same could be said for Dean Joe Martin, who has exhorted faculty members to become more interested in such matters. That the Department of Social Medicine affords me such a hospitable home is no doubt a result of its leadership: prior to Arthur came Leon Eisenberg, and before him Julius Richmond; they continue to exude goodness within the walls of the department—and their influence extends, happily, far beyond those walls. Byron and Mary Jo Good and Allan Brandt are continuing the tradition, which I regard as very much in keeping with the spirit of Rudolph Virchow. Within the Department of Social Medicine, I am particularly grateful to the staff of the Program in Infectious Disease and Social Change, especially our students, several of whom shared some of the experiences described here. I hope I may be forgiven for singling out David Walton, Kedar Mate, Raul Ruiz, Marshall Fordyce, Evan Lyon, Giuseppe Raviola, Sierra Washington, and Mehret Mandefrou.

At the Brigham and Women's Hospital, my other Boston home, I thank Marshall Wolf and Victor Dzau as well as Jamie Maguire, Elliott Kieff, Paul Sax, Johanna Daily, Sigal Yawetz, and other members of the Department of Medicine and its Infectious Disease Division.

Partners In Health (including its Institute for Health and Social Justice) is more a concept than a place and is not based in any one city. But I again turn to Boston in thanking my partners there: Aaron Shakow, for all-round scholarly assistance with this and other projects; Annie Hyson, for help with Chiapas documentation; Jennifer Singler, for her interest in liberation theology (and for serving as my left arm, connected to her heart, after Joia Mukherjee broke the former); Chris Douglas, for materials used in the chapter on ethics; Lydia Mann-Bondat, for her interest in health and human rights; and, finally, Laura Tarter and Nicole Gastineau, for their able assistance on research and documentation and also for their cheerful assistance in completing the innumerable tasks that arise in bringing a book to press. Joyce Millen, Siripanth Nippita, and Carole Mitnick have kept the Institute going in one form or another for several years, in the process keeping us accountable and up to date. I'm especially grateful to Carole for her close reading of the material on tuberculosis in prisons, and also for her company during inspections of prisons. I look forward to working ever more closely with Joia Mukher-

jee, Mary Kay Smith-Fawzi, Serena Koenig, Cynthia Rose, Melissa Gillooly, Ed Nardell, and Arachu Castro (whose help was invaluable in editing Chapters 2 and 3) as we seek to extend the notion of social and economic rights to more of the destitute sick.

Co-inhabiting several worlds—the Brigham, Partners In Health, Harvard Medical School—are a few friends worth their weight in precious gemstones. Heidi Behforouz, Sonya Shin, Jennifer Furin, Keith Joseph, and Carole Smarth are the best that one could ask for in clinical colleagues. By treating patients with dignity, compassion, and great competence, they promote human rights on a daily basis. Howard Hiatt, the godfather of Partners In Health and a discerning consumer of human rights discourse, has often been the sounding board against which I have developed some of these ideas. Most of all, I thank Mercedes Becerra, without whom, as they say, this book would not exist.

Less easy to classify are free-floating friends and colleagues who have helped me in one way or another, usually to see something that I would have otherwise missed. This group includes Jean Gabriel *films*; Tracy Kidder; Kris Heggenhougen; Joy Marshall; Ken Fox; Nancy Dorsinville; Mark Pavlick; Nalini Visvanathan; Erica James; Noam and Carol Chomsky; Jeff Sachs; Gene Bukhman; Jody Heymann; Vivien Stern; Hernán Reyes; Nancy Scheper-Hughes; Mirjam J.E. van Ewijk and Paul Grifhorst; Paul Rabinow; Philippe Bourgois; David Simmons; Charlie Everett; Gilles Peress; Nick Vogenthaler; Bill Schultz; Len Rubenstein; Ama Karikari; Lino Pertile and Anna Bensted; Emilio Travieso; Amartya Sen; Bryan Stevenson; Bob Bilheimer; Leslie Fleming; Lorena Barberia; Johannes Sommerfeld; Didier Fassin; Alaka Wali; Henry Steiner and other members of the University Committee on Human Rights; Richard Smith; Don Berwick; Annie Dillard; Jack Coulihan; Moupali Das; Carolyn Keiper; Karen Bos; Janice Leung; Deogratias Niyizonkiza; an anonymous reviewer for the University of California Press, from whom I learned a great deal; and, most of all, Barbara Rylko-Bauer, who was good enough to turn her editor's eye—and her poet's heart—to this book. It's no exaggeration to add that Barbara has shaped both content and form of *Pathologies of Power*. Indeed, I'm convinced I would not have finished the book without Barbara's encouragement, counsel, and assistance.

My deepest debt in the project of putting into words a number of distressing experiences is without question Haun Saussy, my most critical reader. For bibliographic materials and all-round inspiration, I thank Virginia Farmer (my first instructor in human rights, who in living by the Golden Rule passed it on to her brood). Catherine Bertrand Farmer

has also provided invaluable help with editing, documentation, and translating documents from five languages. Without her knowledge of Tzotzil and Tzeltal, some of my materials from Mexico would have been useless. Gratitude also to her team of even younger assistants, Gabriel and Pablo Bayona Sapag (whose familiarity with Quechua helped more than they know), and Thomas Jei Kim (whose critical rereading of the notion of “Asian values” has been indispensable).

It is impossible to write a book about health and human rights without invoking the memory of Jonathan Mann, whose spirited responses to—and critiques of—the ideas presented here are sorely missed. Pierre Bourdieu shaped my understanding of social theory, and I am saddened that he will not see this book in print.

Such a long list of thank-yous might suggest that this should be a text without errors, and, indeed, I do hope that it is free of factual inaccuracies. Yet I am not a specialist in the conventional sense. I write about Haiti with a certain assurance, since I have lived and worked here for all of my adult life and know its rural reaches as an anthropologist and as a doctor who cares for the destitute sick. But the same cannot be said for my work in Peru or my visits to Cuba, Russia, or Mexico. I have looked at these places through the eyes of a physician-anthropologist who knows Haiti best. I believe this perspective is useful, because it brings into relief the importance, in each setting, of social and economic rights. This is no doubt because Haiti’s infamous poverty stands as both rebuke and interrogation—and, if we are lucky, as revelation—in virtually any setting.

Finally, I have a long and fruitful history of work with the University of California Press. Stan Holwitz introduced me to the world of writing books and seeing them published; Rob Borofsky and his series, *Public Anthropology*, encouraged me to finish this one; Naomi Schneider is as gracious and supportive an editor as one could hope to meet; Mary Renaud works magic with her editorial scalpel.

This book is dedicated to my chief co-conspirators, Ophelia, Loune, Jim, and Tom. Without them, perhaps I would be reduced to being either a frustrated physician, lacking the tools necessary for social justice work, or a bitter seminar-room warrior, lacking the experience of service to the poor. My gratitude to them, and to all of the Partners In Health family, knows no bounds. But I cannot close these acknowledgments without recalling the example offered by Jean-Marie Vincent, Chouchou Louis, Amos Jeannot, and Armando Mazariegos. One could say that their deaths—by murder, all of them—have been instructive and

somehow redemptive, since their sacrifice has inspired others to ask hard questions about human rights. But I have found these deaths to be haunting, irrevocable, and for me and many others they have inspired largely pain; this book does little to ease that pain. In the end, then, I cannot really view their loss as redeemed.

INTRODUCTION

Fleas dream of buying themselves a dog, and nobodies dream of escaping poverty: that one magical day good luck will suddenly rain down on them—will rain down in buckets. But good luck doesn't rain down yesterday, today, tomorrow, or ever. Good luck doesn't even fall in a fine drizzle, no matter how hard the nobodies summon it, even if their left hand is tickling, or if they begin the new day with their right foot, or start the new year with a change of brooms.

The nobodies: nobody's children, owners of nothing. The nobodies: the no ones, the nobodied, running like rabbits, dying through life, screwed every which way.

Who are not, but could be.

Who don't speak languages, but dialects.

Who don't have religions, but superstitions.

Who don't create art, but handicrafts.

Who don't have culture, but folklore.

Who are not human beings, but human resources.

Who do not have faces, but arms.

Who do not have names, but numbers.

Who do not appear in the history of the world, but in the police blotter of the local paper.

The nobodies, who are not worth the bullet that kills them.

Eduardo Galeano, "The Nobodies"

The people in a number of the stories are of the kind that many writers have recently got in the habit of referring to as "the little people." I regard this phrase as patronizing and repulsive. There are no little people in this book. They are as big as you are, whoever you are.

Joseph Mitchell, *McSorley's Wonderful Saloon*

In the summer of 1999, in the company of friends and co-workers, I crossed the border between Mexico and Guatemala. The frontier was heavily militarized on the Mexican side. We were searched there, as we had been searched elsewhere in Chiapas: with up to seventy thousand

troops stationed in the region, the Mexican government can readily do a good deal of rummaging.¹

We walked across the frontier uneventfully and there, close to the appointed hour, met our friend. Call her Julia. A broad smile broke over her face, a beautiful and reflective one; long black hair fell over her back, and she wore the traditional attire (a braided multicolored sash and frock) of her people, the Mam. The smile belied the great suffering Julia had seen. Her husband, a health worker, had been “disappeared” by Guatemalan security forces on the Mexican side of the border and had never been heard from again. Her nineteen-year-old brother, a rebel soldier, had been killed in combat, his body displayed as a grisly trophy for the Guatemalan army. She herself had lived a long decade of mourning and exile in Mexico. But now her smile spoke of new and restorative projects.

All of us—friends from the States, from Mexico, and from Guatemala—were bound together, most of us for over a decade, by our work in health care. Julia was also an international visitor, in a sense: like so many from the region, she had lived for years in refugee camps in Mexico, where she and others had worked to improve the health first of fellow refugees and, later, of the poor of Chiapas.² Now that she had returned to her home in highland Guatemala, we were to meet her surviving family and to discuss a community health project with Julia and her *compañeros* from the refugee camps.

Soon after we reached the outskirts of the town of Huehuetenango, we parked our pickup truck near a small cement house, pale blue. We found Julia’s family engrossed in a movie, perhaps of Mexican or European provenance, about Guatemalan refugees. We signaled our interest in watching along. I didn’t catch the name of the film, but it was clear that it treated the worst years of the killing—the years during which Julia lost her husband. In the course of almost four decades of armed violence, some two hundred thousand died in Guatemala, the majority of them civilians killed by the army.³ The bit of the movie we caught brought foreign involvement into relief. Judging from the accent, one of the actors was meant to represent a *gringo*.

After half an hour or so, Julia’s father stopped the movie—it was a videotape—and put on an impromptu concert for us. He and two of his sons stood together and played the marimba (a percussion instrument that looks like a giant xylophone). They later showed us pictures of Julia’s martyred brother and proudly underlined his name on the “honor roll of heroic guerrillas.” It was chill and damp in the house, which was

warmed only by bare lightbulbs, but we all felt a great warmth, as if being welcomed back after a long and unforeseen separation.

The next morning, we were to meet Julia and the leadership of the re-nascent health project. But first we were invited to attend part of a workshop. It was being held in a parish school at the end of a muddy road that led up one of the small mountains looming over Huehuetenango. The topic of the workshop: gender relations. The pupils were natives, the instructors two young women from the capital city. The instructors were slender and wore jeans; they looked a lot like those of us who'd come from Boston. And since they spoke the language of U.S. universities, or its echoes in foundations and international bureaucracies, they sounded a lot like us, too.

More specifically, the women from Guatemala City were conducting a "gender-sensitivity workshop." They had asked each of those present—about twenty locals, mostly young women, although Julia's father was there, too—to draw a scene from childhood. The adult pupils sat crammed into children's desks, supplied with crayons. One of the facilitators would hold aloft a drawing and ask the artist, and occasionally the audience, questions about it. The theme of the questions was gender relations.

It was difficult to know how all this was being received—the participants were impassive and spoke only when the women from Guatemala City addressed them. Some, it was clear, did not speak Spanish well; at least one young woman needed a translator. Furthermore, the prominence of dramatic biographical events—deaths, most notably, but also violence that had little to do with gender relations within the indigenous communities—kept pushing the discussion off the course charted by the facilitators. One young woman explained that the death of her mother in childbirth meant that at the age of ten she had by necessity assumed a great deal of responsibility for the care of her younger siblings:

Facilitator (expectantly): "So your father treated you differently because you were a girl?"

Respondent (matter-of-factly): "No, not really. He loved us all the same."

A stilted silence followed. I felt uncomfortable, and so, I could tell, did my co-workers. (Ophelia's cheeks were flaming.) It was not the silence that rankled. It seemed to us that the exercise was demeaning—the participants, having survived genocide and displacement, were now

being treated like children. They were being asked to respond to an agenda imported from capital cities, from do-gooder organizations like ours, from U.S. universities with the “right” answers to their every question. No harm done, perhaps, and the topic was important—but how helpful was this exercise, with its aim of changing the mentality of the locals, who were, after all, the victims of the previous decades of violence? A change in mentality was needed, certainly, but it was needed in the hearts and minds of those with power—and they were not here but in Guatemala City and Washington, D.C.

Julia signaled that it was time to leave the workshop and meet with the health committee. I was relieved. As we walked across a courtyard into a low, dark cooking area with a dirt floor, I whispered to Ophelia that I hoped we were not going to receive a proposal for “workshops designed to change the mentality of the victims.” We had not come all the way to Guatemala to seek to reform the minds or the culture of the victims.

I should not have worried. The scarred but passionate veterans of the health committee were not about to field inane proposals. The next hour was bracing. The air, thick with smoke from the fires bubbling under two nearby cauldrons, was electric; and the discussion had a rare clarity, as Julia and the small group of survivors laid out their plans. They wanted to continue the work they’d begun before the war: promoting community health through training, education, and service. And the project they wanted our help with was a *mental* health project for which they had despaired of securing funding.

They wanted to exhume the dead. They wanted to locate and disinter those buried in mass graves by the army. Why? Because the victims had been “buried with their eyes wide open.” And neither they nor their kin would know peace until they were buried properly. “So that their eyes may close,” explained Miguel, who, along with Julia, spoke as their leader.

My own eyes were stinging, but not from the smoke. Again, a silence fell over us, this time a silence of complicity and solidarity. Ophelia spoke first, saying that we who would never know their suffering would try to do our part, and also that we would bear witness in the hope that such crimes could not be committed so readily in the future.⁴

In the sunny courtyard, the noise of Spanish mixed with local tongues drifted into hearing: the gender workshop was over. Our private meeting gave way to a meal of tortillas, tough beef, and beans. As I got up to fill my bowl, a poster caught my eye. It bore the imprimatur of the Catholic Church. Its message, though consonant with Catholic social

teachings, would have struck Bostonian parishioners as out of place: “Down with neoliberalism,” it said in rainbow colors, “Up with humanity!” Next to it hung a small portrait of the recently martyred Bishop Juan José Gerardi. Two days before he was bludgeoned to death in 1998—by officers in the army, according to our hosts—the bishop had released a massive report indicting the army as responsible for 85 percent of the deaths and disappearances during the conflict. Releasing the report was risky, he noted in the last speech he was ever to make, but it was the only way to begin any meaningful process of healing:

In our country, the truth has been twisted and silenced. God is inflexibly opposed to evil in any form. The root of the downfall and the misfortune of humanity comes from the deliberate opposition to truth, which is the fundamental reality of God and of human beings. This reality has been intentionally distorted in our country throughout thirty-six years of war against the people.⁵

The images and events we experienced during these twenty-four hours—rummaging Mexican soldiers, a martyred teenager and a martyred bishop, the workshop of well-meaning elites from the capital, a mental health project involving exhumation, a cry against neoliberalism—encapsulate as well as anything can the heart of what I hope to write about in these pages. But how are these images and themes related to health and human rights? Take the term “neoliberalism,” which, like the related word “liberal,” admits to many meanings, some of them contradictory. Neoliberalism generally refers to the ideology that advocates the dominance of a competition-driven market model. Within this doctrine, individuals in a society are viewed, if viewed at all, as autonomous, rational producers and consumers whose decisions are motivated primarily by economic or material concerns. But this ideology has little to say about the social and economic inequalities that distort real economies.

In Latin America, neoliberal policies and ideologies have generally called for the subjugation of political and social life to a set of processes termed “market forces.”⁶ As a physician who has worked for much of my adult life among the poor of Haiti and the United States, I know that the laws of supply and demand will rarely serve the interests of my patients.⁷ And so they and others in their position—globally, this would be hundreds of millions—have fought to construe as a basic human right access to health care, education, and other social services. Indeed, many would argue that most of Latin America’s conflicts have been fought over neoliberalism; in the region today, far too many human rights abuses are

committed in the name of protecting and promoting some variant of “market” ideology.⁸

This interpretation is at odds, I know, with U.S. notions of liberalism. Aren’t “liberals” the great defenders of human rights? friends there ask, exasperated. They are defenders of my rights and yours, I respond, but people like us are in a distinct minority, as Immanuel Wallerstein reminds us:

Liberals have always claimed that the liberal state—reformist, legalist, and somewhat libertarian—was the only state that could guarantee freedom. And for the relatively small group whose freedom it safeguarded this was perhaps true. But unfortunately that group always remained a minority perpetually en route to becoming everyone.⁹

The liberal political agenda has rarely included the powerless, the destitute, the truly disadvantaged. It has never concerned itself with those popularly classified as the “undeserving” poor: drug addicts, sex workers, illegal “aliens,” welfare recipients, or the homeless, to name a few. It is even less concerned with populations beyond national borders. And yet the poor in the countries with which I am most familiar are struggling, and often failing, to survive:

To put it in systematic terms poverty in the First World is understood in terms of a relative distance from certain standards of human well-being that have been realized in the past but that are now seen less and less frequently. The frame of reference continues to be positive—a degree of well-being attained once upon a time and still attainable. In Latin America, however, the most obvious and spontaneous frame of reference for the concept of poverty is not something positive, but something negative in the extreme: death. In our countries, concrete poverty is misery verging on death. The poor are those whose greatest task is to try to survive.¹⁰

This book is a physician-anthropologist’s effort to reveal the ways in which the most basic right—the right to survive—is trampled in an age of great affluence, and it argues that the matter should be considered the most pressing one of our times. The drama, the tragedy, of the destitute sick concerns not only physicians and scholars who work among the poor but all who profess even a passing interest in human rights. It’s not much of a stretch to argue that anyone who wishes to be considered humane has ample cause to consider what it means to be sick and poor in the era of globalization and scientific advancement.

Pathologies of Power uses case studies to examine the struggle for social and economic rights as they are related to health. Since a physician

must have access to medicines and supplies in order to work on behalf of the victims of human rights violations thus defined, you would think that physicians would be deeply involved in pressing for social and economic rights. And since anthropologists often work in settings of violence and privation, you would think that anthropologists might have contributed heavily to our understanding of the dynamics of human rights violations. To date, however, human rights scholarship has been largely the province of lawyers and juridical experts; reports and documentation have been more likely to come from church groups and non-governmental organizations than from academics. With a few notable exceptions (many of them cited in these pages), physicians and anthropologists have had far too little to say about human rights. But as a physician to the poor, I have seen what has happened, and what continues to happen, to those whose rights and freedoms—particularly freedom from want—are not safeguarded. As an anthropologist, I can discern the outlines of many of the ideologies used to conceal or even justify assaults on human dignity.

This training also helps to reveal that such assaults are not haphazard. The stage is set for more of the same, even though we are reassured by the powerful that the age of barbarism is behind us. It is disingenuous, surely, to affect surprise each time we learn of the complex and international processes that lead to another Haiti, another Chiapas, another Rwanda.¹¹ One is reminded of the old joke: What is the definition of a liberal? Someone who believes all the bad things that happen in the world stem from accidents.¹² Human rights violations are not accidents; they are not random in distribution or effect. Rights violations are, rather, symptoms of deeper pathologies of power and are linked intimately to the social conditions that so often determine who will suffer abuse and who will be shielded from harm. If assaults on dignity are anything but random in distribution or course, whose interests are served by the suggestion that they are haphazard?

.

We live in a time in which violence is right before our very eyes. The word is applied to extremely varied contexts, but each is marked by open violence—by violent acts, fury, hatred, massacres, cruelty, collective atrocities—but also by the cloaked violences of economic domination, of capital-labor relations, of the great North-South divide, to say nothing of all of the “every-

day” violences perpetrated against the weak: women, children, all those excluded by the social system.

Françoise Héritier, *De la violence*

The term “human rights abuse” has been used to describe many offenses. There are, of course, the conventionally defined violations outlined in the various treaties and charters to which the guilty parties—nation-states, by and large—are so often signatories. But I will also discuss other forms of violence I have observed.

For well over a decade, I have grappled, as have many others, with conditions that could only be described as violent—at least to those who must endure them. Since the misery in question need not involve bullets, knives, or implements of torture, this misery has often eluded those seeking to identify violence and its victims. Decades ago, and at about the same time, liberation theologians and scholars such as Johan Galtung began writing of “structural violence.”¹³ In this book, as elsewhere, I use this term as a broad rubric that includes a host of offenses against human dignity: extreme and relative poverty, social inequalities ranging from racism to gender inequality, and the more spectacular forms of violence that are uncontestedly human rights abuses, some of them punishment for efforts to escape structural violence, as the Jesuit Jon Sobrino notes:

Statistics no longer frighten us. But pictures of the starving children of Biafra, of Haiti, or of India, with thousands sleeping in the streets, ought to. And this entirely apart from the horrors that befall the poor when they struggle to deliver themselves from their poverty: the tortures, the beheadings, the mothers who somehow manage to reach a refuge, but carrying a dead child—a child who could not be nursed in flight and could not be buried after it had died. The catalogue of terrors is endless.¹⁴

Amartya Sen has referred to such destructive forces as “unfreedoms.” Sen helps us to move beyond “liberal” notions of nominal political freedoms—most victims of structural violence have such freedoms on paper—without falling into the trap of economic reductionism: “Development requires the removal of major sources of unfreedom: poverty as well as tyranny, poor economic opportunities as well as systematic social deprivation, neglect of public facilities as well as intolerance or overactivity of repressive states. Despite unprecedented increases in overall opulence, the contemporary world denies elementary freedoms to vast numbers—perhaps even the majority—of people.”¹⁵

Referring to violations of social and economic rights as well as civil and political ones (for it is my claim that the former abuses permit the latter), I ask questions about death by starvation or AIDS in central Haiti; about death from tuberculosis within Russian prisons; about the causes and consequences of coups d'état and low-intensity warfare in Chiapas, Haiti, and Guatemala; and about the practice of medicine in settings of great structural violence. In each of these situations, acts of violence are perpetrated, usually by the strong against the weak, in complex social fields. In each of these situations, a set of historically given and, often enough, economically driven conditions—again, here termed “structural violence”—guarantee that violent acts will ensue. In each of these situations, actions could have been—still can be—taken to protect the vulnerable. But the actions in question include more than legal protection of civil and political rights. For surely we have learned that the right to vote, for example, has not protected the poor from dying premature deaths, caused as often as not by readily treatable pathogens. The “nobodies” discussed by Eduardo Galeano are the victims of structural violence, and a physician working in post-Duvalier Haiti—or post-apartheid South Africa—would necessarily want to know why structural violence takes more and younger lives than ever before.

In short, civil rights cannot really be defended if social and economic rights are not. But in fact there is heated opposition to any enlargement of the rights concept. Some of it comes from the expected quarters. Jeane Kirkpatrick, one of the architects of Ronald Reagan's Central American policies, which helped finance the Guatemalan army's genocidal spree, termed the Universal Declaration of Human Rights “a letter to Santa Claus,”¹⁶ in large part because the Declaration pressed for social and economic rights.¹⁷ But even those who protect, rather than abuse, human rights seem to feel discomfort about social and economic rights. Pressing for social and economic rights, even those outlined in the Universal Declaration, is seen as “asking for too much.” Thus even staunch supporters of civil and political rights may regard economic and social rights as better suited to a letter to Santa Claus, since they argue that more can be accomplished by defining our mission in a “pragmatically” narrow manner.¹⁸

Pragmatism assuredly has its role even in utopian struggles: to attempt too much is often to achieve too little. But the hesitation of many in the human rights community to cross the line from a rights activism of pure principles to one involving transfers of money, food, and medicine betrays a failure, I think, to address the urgent needs of the people we are

trying to defend. The proponents of harsh market ideologies have never been afraid to put money—and sometimes bullets—behind *their* minimal and ever-shrinking conception of rights and freedoms. But one alarming feature of structural violence is that bullets are increasingly unnecessary when defenders of social and economic rights are silenced by technocrats who regard themselves as “neutral.” In an acid commentary entitled “Professional Life/3,” Galeano lays bare the lineaments of this new and effective form of terrorism:

The big bankers of the world, who practice the terrorism of money, are more powerful than kings and field marshals, even more than the Pope of Rome himself. They never dirty their hands. They kill no one: they limit themselves to applauding the show.

Their officials, international technocrats, rule our countries: they are neither presidents nor ministers, they have not been elected, but they decide the level of salaries and public expenditure, investments and divestments, prices, taxes, interest rates, subsidies, when the sun rises and how frequently it rains.

However, they don't concern themselves with the prisons or torture chambers or concentration camps or extermination centers, although these house the inevitable consequences of their acts.

The technocrats claim the privilege of irresponsibility: “*We're neutral*,” they say.¹⁹

Galeano links the “terrorism of money” to technocrats who describe themselves as neutral. I suspect this commentary has a certain resonance for anyone who moves easily between a rich university and a poor village, between a world-class teaching hospital and a dirt-floored dispensary, between the gleaming towers of international agency headquarters and the sprawling slums of a Latin American city. Human rights cannot be easily defended in a time of widespread, indeed growing, terrorism of the sort Galeano describes. Although it may seem impolitic to underline the inadequacy of existing measures, it is necessary, at some point, to acknowledge what the poor have been saying all along: that their rights cannot be protected while the “present economic and social structures foist” injustice and exploitation “upon the vast majority of our people under the guise of law.”²⁰ These laws, even those designed to protect human rights, don't feel neutral at all.

While appreciating the need for high-minded charters, conventions, and legislation, it is also important to ask why it is so difficult to demonstrate the efficacy of these measures. This critique is offered in a constructive manner. If laws and charters are inadequate—and they clearly

fail to perform under any but the most favorable conditions—what additional measures might be taken? From the point of view of a physician, it seems obvious that tackling poverty and inequality is central to any good-faith effort to protect the rights of the poor. The terrorism of money thus far evades and is abetted by existing legislation. It may well prove to be the biggest threat to recent gains in both health and human rights.

.

The headlong stream is termed violent
 But the river bed hemming it in is
 Termed violent by no one.

The storm that bends the birch trees
 Is held to be violent
 But how about the storm
 That bends the backs of the roadworkers?

Bertolt Brecht, "On Violence"

This is also a book about the dynamics of rights violations. The struggle to develop a human rights paradigm is one thing; a searching analysis of the mechanisms and conditions that generate these violations is quite another. Without understanding power and connections, how do we understand why rights are abused, and when and where such events are likely to occur? Often enough, identifying victims and aggressors is the easy part—and leads to no real understanding. It's not that things are "not so black and white," as academics and pundits are wont to say, usually dismissively. They are plenty black and white. But they are also gray, and every shade of gray, so that strange and often veiled alliances form a bridge between aggressors and victims.

Take, for example, the case of Rwanda. In a study titled *Aiding Violence*, Peter Uvin argues that development and humanitarian aid to Rwanda in the years *prior* to the genocide helped to set the stage for what was to occur: "the process of development and the international aid given to promote it interacted with the forces of exclusion, inequality, pauperization, racism, and oppression that laid the groundwork for the 1994 genocide."²¹ Of course, the development enterprise, like the human rights community, has defined its mission narrowly. The technocratic approach to development aid has mandated that some issues are brought to the fore while others are ignored. As Uvin, commenting on his own and others' blindness, notes:

Like almost all other players in the development community, I did not have any idea of the destruction that was to come. The pauperization was omnipresent, the racist discourse loud; fear was visible in people's eyes, and a militarization was evident, but that was none of my business, for I was there for another Rwanda, the development model.²²

How, one wonders incredulously, could anyone working on behalf of the Rwandan poor have failed to anticipate the oncoming cataclysm? But such blinkered analyses are common in most settings in which massive human rights violations are about to occur. As Uvin suggests, these visual-field defects stem in part from the disciplinary division of labor so important in our times. The social fields in which human rights are violated are complex beyond the understanding of any one view or discipline. These contexts are also laden with symbolic complexities, and actions taken within them are often undergirded by baroque ideological justifications—in short, this is the stuff of conventional anthropological interest. But if I have persuaded you that human rights discourse might be examined profitably by an anthropologist, it is important to add that anthropologists have also neglected to examine structural violence and the abuses it inevitably breeds. In a now classic essay, Orin Starn deplors the failure of his fellow Andeanists to consider the terrible suffering all around them, even though a guerrilla war was soon to wrack Peru for a decade:

Ethnographers usually did little more than mention the terrible infant mortality, minuscule incomes, low life expectancy, inadequate diets, and abysmal health care that remained so routine. To be sure, peasant life was full of joys, expertise, and pleasures. But the figures that led other observers to label Ayacucho a region of “Fourth World” poverty would come as a surprise to someone who knew the area only through the ethnography of Isbell, Skar, or Zuidema. They gave us detailed pictures of ceremonial exchanges, Saint's Day rituals, weddings, baptisms, and work parties. Another kind of scene, just as common in the Andes, almost never appeared: a girl with an abscess and no doctor, the woman bleeding to death in childbirth, a couple in their dark adobe house crying over an infant's sudden death.²³

As one might expect, Starn's essay provoked fairly heated riposte. Umbrage was taken. In meetings and subsequent articles, anthropologists protested that they had written of such conditions.²⁴ But almost a decade later, Linda Green, in her compelling study of Mayan widows in the western highlands of Guatemala, still complains of “anthropology's diverted gaze”—diverted, of course, from structural violence:

Systematic inquiry into human rights violations remained elusive. Despite an alarming rise in the most blatant forms of transgressions, repression, and state terrorism, the topic has not captured the anthropological imagination until recently. Overwhelming empirical evidence demonstrates that state-sponsored violence has been standard operating procedure in numerous contemporary societies where anthropologists have conducted fieldwork for the past three decades.²⁵

Green's study, unlike many of its predecessors, explores the "macrologics of power" without sacrificing ethnographic depth.²⁶ To study Mayan widows without exploring the mechanisms that transformed them from wives to widows would be to miss the opportunity to reveal the inner workings of structural violence (and to bury the dead with their eyes wide open). This machinery is transnational as much as it is local. It has a history. And yet I have sat through conferences in which the fate of Mayan orphans is discussed at great length with no mention of what happened to their parents. Indeed, a focus on atomistic cultural specificities is usually the order of the day. This is what anthropologists are expected to do. So it is with "anthropological" commentary on human rights. I use quotation marks because, as often as not, such commentary is made by non-anthropologists who draw on the concept of cultural relativism, a concept that many consider—incorrectly, in my view—anthropology's chief contribution to human rights debates.²⁷

Allow me to give another example of how the concept of culture may be abused, and how power and transnational connections may be overlooked in contemporary examinations of human rights abuses. It arises from Haiti, the case I know best. By adopting the conventional Haitian manner of asking a riddle or pointed question—the riddler asks *Krik?*, the audience unleashes the riddle by exclaiming *Krak!*—let us examine some facts from the 1991 coup d'état that resulted in the most massive human rights violations in recent Haitian memory.

Krik? Who said this? "The foreign powers who dominate Haiti have for more than a century refused to acknowledge the integrity of Haitian culture and our right as the world's first independent black nation to steer our own ship of state."

Krak! "General" Raoul Cédras, in a 1991 radio address delivered in French shortly after he overthrew Haiti's first democratically elected president.²⁸

What, one might ask, does such a high-minded statement (coming from such a source) reveal about power and transnational connections? First, it offers us a chance to recall that the modern Haitian army led by Cédras had been created by an act of the U.S. Congress during our nineteen-year military occupation of that country earlier in the twentieth century. Second, it reminds us that Cédras was himself the beneficiary of training, including workshops on human rights, at military institutions within the United States.

Third, we can note that his comments, delivered in a language that 90 percent of the Haitian population cannot speak, were crafted with an international audience in mind. This audience is ostensibly concerned with human rights and also with such matters as “cultural integrity” and “racial pride.” To the extent that anyone was swayed by such comments—and the record shows that some were—the thousands of Haitians who had been killed outright in the weeks prior to Cédras’s address could be impugned as traitors and stooges. As long as Cédras dominated the airwaves, they were silenced beyond the grave. To use the Guatemalan metaphor yet again: they had been buried with their eyes wide open.

To heap irony upon irony, and again playing to an international audience, the authors of the coup d’état chose as their first prime minister a certain Jean-Jacques Honorat—“a leading human rights figure,” said the *Boston Globe*.²⁹ Known in Haiti as a stooge of power, Honorat did not disappoint. He claimed that the Haitian army had done the nation a great service in doing away with the dangerous riffraff who were calling for a more just distribution of Haiti’s resources and in dispatching their loony leader, Father Jean-Bertrand Aristide. Honorat—who was indeed a member of the “human rights community,” which says a great deal about said community—painted Aristide as the primary violator of human rights in Haiti, an allegation that, though baseless, found ready echoes in the corridors of power and in the U.S. press.³⁰

The initial response of the human rights community to the Cédras-led coup was faltering, at best. With powerful friends and lobbyists abroad, the Haitian army could succeed in convincing some that the overthrown president had been Haiti’s chief human rights violator. And sectors of the foreign press—notably, U.S. television and print media—echoed, without much further inquiry, the claims of the army. Thus many within the human rights community subsequently sought an impossible balance-point between two adversaries: the demonstrably violent Haitian army and the allegedly violent and unstable deposed

president-in-exile. Such studied “neutrality” led some to believe that truth and justice lay somewhere between the victims and the aggressors, rather than on the side of the real victims. The problem was that no data ever existed to suggest that the deposed president had violated human rights, whereas a growing pile of evidence, and of bodies, demonstrated clearly that the military had.

We can make similar observations in considering the case of Chiapas, where the rebellion has pitted the rural poor against the Mexican government. Was this “ethnic revitalization”—most of the Zapatista rebels were indigenous people—or a broader movement for social and economic rights? Many statements from the rebels would seem to indicate the latter. On January 18, 1994, Zapatista leaders responded to the Mexican government’s offer of conditional pardon with the following retort: “Who must ask for pardon and who can grant it?”

Why do we have to be pardoned? What are we going to be pardoned for? Of not dying of hunger? Of not being silent in our misery? Of not humbly accepting our historic role of being the despised and the outcast? . . . Of having demonstrated to the rest of the country and the entire world that human dignity still lives, even among some of the world’s poorest peoples?³¹

Many argue that it is no coincidence that Mexico’s first uprising in decades began on the day that NAFTA—the North American Free Trade Agreement—was signed. It was also no surprise that poor health figured strongly among the complaints of the peasants in rebellion. In a declaration at the outset of the revolt, the Zapatistas noted that, “in Chiapas, 14,500 people die a year, the highest death rate in the country. What causes most of these deaths? Curable diseases: respiratory infections, gastroenteritis, parasites, malaria, scabies, breakbone fever, tuberculosis, conjunctivitis, typhus, cholera, and measles.”³² The declaration further noted that all of this misery was expanding right under the noses of tourists and others who visited the region: “While there are seven hotel rooms for every 1,000 tourists, there are 0.3 hospital beds for every 1,000 Chiapans.”³³

But scholarly observers tended to frame the rebellion as an ethnic uprising. Indeed, “anthro lite” seemed to abound among those who cheered for ethnic pride while ignoring, or being confounded by, the rebels’ calls for social and economic rights *for the poor*, regardless of ethnicity. One can find lots of treatises about “ancient Maya secrets” and other arcane lore, but few about maternal mortality, high rates of tuberculosis, or the

government's ongoing failure to deliver on promised land reform. No more than the aid workers in Rwanda and the Andeanists in South America, the anthropologists in Chiapas were not there to study structural violence. After one of the conflict's bloodiest civilian massacres, in December 1997, the lead editorial of the *Gaceta del Tecolote Maya*, a monthly publication for Mexican anthropologists, asked simply "¿Antropología para qué?"³⁴ Anthropology to what end?

What about the observations of powerful governments? In this arena, we have long known that it is best to examine not what they say—in declarations, for example—but what they do. This book focuses primarily on Latin America, for it is here that we can most easily discern the effects of our own country's stance on human rights. Such an exercise is less common than one might imagine, in large part because close scrutiny of human rights abuses in Latin America brings to light embarrassing connections: "For the U.S.A., the Western hemisphere is the obvious testing ground, particularly the Central America–Caribbean region, where Washington has faced few external challenges for almost a century. It is of some interest that the exercise is rarely undertaken, and when it is, it is castigated as extremist or worse."³⁵ Why should one be castigated as an extremist for pointing out the obvious connections between U.S. foreign policy—which, unlike the weather, is subject to human control—and human rights abuses? Perhaps because we do not want to know that U.S. aid "has tended to flow disproportionately," as Lars Schoultz notes, "to Latin American governments which torture their citizens."³⁶

This rings especially true in Haiti, to which aid flowed freely during almost all years of the Duvalier dictatorships and during much of the violent military rule that followed the collapse of the dictatorship in 1986. Now, however, during the rule of a democratically elected government, the United States has orchestrated an international aid embargo against the Haitian government, freezing an estimated \$500 million in promised and greatly need assistance.

The "neoliberal era"—if that is the term we want—has been a time of looking away, a time of averting our gaze from the causes and effects of structural violence. Whatever term we use to describe our times, we cannot avoid looking at power and connections if we hope to understand, and thus prevent, human rights abuses. And when we look at and listen to those whose rights are being trampled, we see how political rights are intertwined with social and economic rights, or, rather, how the absence of social and economic power empties political rights of their

substance. In each of the places discussed at any length in this book—whether Chiapas or a U.S. military base in Cuba or a prison in western Siberia—the same sort of erasure is readily documented. Some of this erasure is a result, certainly, of the distortions introduced by a disciplinary focus. No one discipline could ever hope to capture the complexity, social and biological, of the assaults on health and human rights that I hope to document. But much of the erasure has a far more pernicious origin: hiding this suffering, or denying its real origins, serves the interests of the powerful. The degree to which literate experts, from anthropologists to international health specialists, choose to collude with such chicanery should be the focus of brisk and public debate. The persistence of such suffering, rooted in structural violence, concerns all of us, as the poet Wisława Szymborska has observed. “There is nothing more animal-like,” she writes, “than a clear conscience.”³⁷

.

We have maintained a silence closely resembling
stupidity.

Revolutionary Proclamation of the
Junta Tuitiva, La Paz, July 16, 1809

In some countries, dissidents are driven into exile; in others, they are driven to television talk shows. In the poor communities discussed here, those who challenge established privilege may be driven to the edge of a pit they themselves have been forced to dig and there dispatched with a bullet at close range. The central thesis of this book is that human rights abuses are best understood (that is, most accurately and comprehensively grasped) from the point of view of the poor. This too is a relatively novel exercise in the human rights community. In no arena is it more needed than in that of health and human rights.

The field of health and human rights has grown quickly, but its boundaries have yet to be traced. More than fifty years after the Universal Declaration of Human Rights, consensus regarding the most promising directions for the future is lacking; moreover, outcome-oriented assessments lead us to question approaches that rely solely on recourse to formal civil and political rights. Similarly unpromising are approaches that rely solely on appeals to governments. Careful study reveals that state power has been responsible for most human rights violations and that violations are usually embedded in contexts rife with structural violence—again, social and economic inequities that

determine who will be at risk for assaults and who will be shielded from them.

But the dynamic is changing in much of the world: as international financial institutions and transnational corporations now dwarf the dimensions of most states, the former institutions—and the small number of powerful states that control them—come to hold unfettered sway over the lives of millions. International human rights organizations, accustomed to looking for villains in the upper reaches of bureaucracies of banana republics, also need to turn their gaze back toward the great centers of world power in which they reside.³⁸ Only through careful analysis of growing *transnational* inequalities will we understand the complex social processes that structure not only growing disparities of risk but also what stands between us and a future in which social and economic rights are guaranteed by states or other polities. This is especially poignant when one considers the concept of the right of the world's poor to modern medical care, because in the “neocolonial” era, the rich countries are even less likely to accept responsibility for better stewardship, as James Galbraith notes:

It is not increasing trade *as such* that we should fear. Nor is technology the culprit. To focus on “globalization” as such misstates the issue. The problem is a process of integration carried out since at least 1980 under circumstances of unsustainable finance, in which wealth has flowed upwards from the poor countries to the rich, and mainly to the upper financial strata of the richest countries.

In the course of these events, progress toward tolerable levels of inequality and sustainable development virtually stopped. Neocolonial patterns of center-periphery dependence, and of debt peonage, were reestablished, but without the slightest assumption of responsibility by the rich countries for the fate of the poor.³⁹

This book attempts to advance an agenda for research and action grounded in the struggle for social and economic rights, an agenda suited to public health and medicine and whose central contributions to future progress in human rights are linked to the equitable distribution of the fruits of scientific advancement. Such an approach is in keeping with the Universal Declaration but runs counter to several of the reigning ideologies of public health, including those favoring efficiency over equity.⁴⁰

Indeed, many of the concepts currently in vogue in public health—from “cost-effectiveness” to “sustainability” and “replicability”—are likely to be perverted unless social justice remains central to public health

and medicine. A human rights approach to health economics and health policy helps to bring into relief the ill effects of the efficacy-equity trade-off: that is, only if unnecessary sickness and premature death don't matter can inequalitarian systems ever be considered efficacious.

Pathologies of Power suggests that a broad biosocial approach, when anchored in careful examination of specific cases, permits a critical reassessment of conventional views on human rights. To make this case, I link detailed case histories of individuals to broader analyses of health and human rights. The book charts the experience of several “communities on the edge”—HIV-positive Haitians detained on a U.S. military base, villagers in Haiti and Chiapas during military crackdowns, Russian prisoners with untreated or ineffectively treated tuberculosis—in order to explore the strengths and limitations of conventional approaches to human rights.

As noted, human rights discussions have to date been excessively legal and theoretical in focus. They seek to define rights, mandate punishment by appropriate authorities for the violators, enforce international treaties, and so on. A focus on health alters human rights discussions in important and underexplored ways: the right to health is perhaps the least contested social right, and a large community of health providers—from physicians to community health workers—affords a still-untapped vein of enthusiasm and commitment. Furthermore, this focus serves to remind us that those who are sick and poor bear the brunt of human rights violations. In making this argument, I draw freely on the critiques that a doctor to the poor is well placed to make.

Pathologies of Power is divided into two parts. The first four chapters rely heavily on my own experience in Latin America and Russia. That is, I have been an eyewitness to the events and processes described. Because all eyewitness accounts are both partial and “dated,” I have dated Chapters 2, 3, and 4 and also the postscripts that follow them. The second half of the book also draws on this experience, but it aims to lay out the framework of a critique of “liberal” views on human rights, since such views rarely serve the interests of the poor.

Chapter 1 presents the basic themes of the book, as delineated in this introduction, by arguing that the social determinants of health outcomes are also, often enough, the social determinants of the distribution of assaults on human dignity. “On Suffering and Structural Violence” asks how large-scale social forces become embodied as sickness, suffering, and degradation in rural Haiti, where the same forces that structure risk for human rights abuses are also those shaping epidemics of tuberculosis and

AIDS. Conventional readings of human rights violations fail to draw on current understandings of the social determinants of a wide variety of ills, lending a random appearance to what is, in fact, a highly predictable set of outcomes.⁴¹ Cultural relativism can further muddy these waters when it is linked to moral relativism and shoddy social analysis—as often occurs with the “identity politics” regnant in the United States. Because human rights violations are usually symptoms and signs of deeper pathologies of power, anthropology, sociology, history, political economy, and other “resocializing” disciplines have important roles to play if we are to understand how best to protect human rights. *Pathologies of Power* draws on social theory—and even liberation theology—to reintroduce the concept of structural violence and to link it to the acute violence of war crimes and systemic assaults against human rights.

I argue that equity is the central challenge for the future of medicine and public health. It is easy to document a growing “outcome gap” between rich and poor and show that it is caused in part by differential access to increasingly effective technologies. Drawing on the work of many, I underline the pathogenic role of inequity. That is, it is a striking fact that wealthy societies riven by social inequality have poorer health indices than societies in which comparable levels of wealth are more evenly distributed. At the same time, it is important to sound a warning about the habit of conflating the notion of society with that of nation-state. We already live in a global society. Thus, calls of a right to equity must necessarily contend with steep grades of inequality across as well as within international borders. The same holds for analyses of human rights abuses. Nationally framed analyses of human rights—such as those appearing in, for example, reports from human rights watchdog organizations—may obscure their fundamentally transnational nature.

Part I of the book then explores these themes through specific cases. Chapter 2, “Pestilence and Restraint,” details the experience of HIV-positive Haitian refugees fleeing a brutal military coup. Detained by the U.S. government on its base in Guantánamo, Cuba, the voices of these refugees went largely unheard. Meanwhile, elsewhere on the same island, the attention of the international media was drawn to another small group of people living with HIV: Cubans who found themselves in AIDS sanatoriums. Contrasting the experience of the two groups, and the attention each received, brings into sharp focus the forces shaping both the underlying policies and international responses to them.

Chapter 3, “Lessons from Chiapas,” reports on the situation in Mexico’s poorest state some four years after the Zapatista rebellion. Origin-

nally written in the days before the Acteal massacre of December 1997, this account explores what is at stake in the varied interpretations of the *campesinos'* ongoing struggle for dignity. The experience of one community in quest of health suggests that the Zapatistas and their non-combatant supporters may have something to teach the human rights community.

Chapter 4, "A Plague on All Our Houses?" exposes prison epidemics of tuberculosis in Russia, showing that structural violence is again central to determining who is most likely to be imprisoned, who is most likely to become infected and sick once detained, and who is most likely to receive delayed or inappropriate treatment. This largely overlooked epidemic of multidrug-resistant tuberculosis will soon be too large to be hidden. The only way to halt what amounts to tuberculosis-as-punishment is to provide prompt and effective treatment to all prisoners. Even amnesty will be inadequate, if prisoners are released to a dismantled public health system that cannot cure them.

Part II of the book returns to general questions but remains closely tied to specific instances and places. "Health, Healing, and Social Justice" (Chapter 5) explores the differences among three approaches to development work. In comparing charity, development, and social justice approaches, it is important to note that only the latter encourages privileged actors such as physicians and academics to adopt a moral stance that would seek to expose and prevent pathologies of power. Chapter 6, "Listening for Prophetic Voices," reports with alarm the combined effects of the expanding influence of a market ethos and a growing social inequality on the practice of medicine. With an "outcome gap" that widens whenever an effective intervention is not made available to those who need it most, it is clear that greater and faster medical progress can lead paradoxically to worse outcomes. Conventional medical ethics, mired as they are in the "quandary ethics of the individual," do not often speak to these issues, because of the fact that the bulk of their attention is focused on individual cases where massive resources are invested in delivering services unlikely to ever benefit most patients.

Chapter 7, "Cruel and Unusual," offers a more in-depth consideration of the prison-tuberculosis association. In addition to examining the obvious correlation between overcrowding and transmission of an airborne pathogen, this chapter asks how the constraint of agency through imprisonment is related not only to increased risk for sickness and death—which are not supposed to be part of the punishment package—but also to risk of the sort of erasure documented throughout this vol-

ume. In New York a decade ago and in Russia at this writing, social inequalities (including racism) and economic policies came together to produce epidemics of drug-resistant tuberculosis. Thus does drug-resistant tuberculosis come to constitute a human rights violation, a fact ignored by many in the human rights community.

These themes are explored more fully in Chapter 8, “New Malaise.” Although the quandaries of the sick in industrialized countries are important and should never be dismissed, the failure of ethics to grapple with the tragedy of the modern era’s *destitute* sick is nothing short of obscene. Obscene but not surprising. The same blind spots mentioned earlier are those that afflict today’s medical ethicists. Surely it is an ethical problem, for example, that in the coming year an estimated six million people will die of tuberculosis, malaria, and AIDS—three treatable diseases that reap their grim harvest almost exclusively among populations without access to modern medical care. These deaths are reflections of structural violence and should be a central concern for the human rights community.

The final chapter, “Rethinking Health and Human Rights,” reflects on the implications of the book’s central arguments for an emerging field of inquiry and action. The divorce of research and analysis from pragmatic efforts to remediate inequalities of access is a tactical and moral error—it may be an error that constitutes, in and of itself, a human rights abuse. A brief Afterword includes a personal postscript, a reflection on what it was like to bear witness to a decade of violence in Haiti and to hear outsiders—including some in the human rights community—offer erroneous interpretations of what was happening there.

In 1994, following the publication of a book in which I explored the roots of political violence in Haiti, the military government declared me *persona non grata*. This prevented me from fulfilling my obligation to patients in great need of medical services. It was an unpleasant exercise for other reasons: the book alienated some people whose opinions I value. All in all, it was an experience far less gratifying than direct service to the destitute sick; and I concluded that I would not write another book about human rights and structural violence. But the rest of the decade convinced me that such exercises, though unpopular, are important. When it is a matter of telling the truth and serving the victims, let unwelcome truths be told. Those of us privileged to witness and survive such events and conditions are under an imperative to unveil—and keep unveiling—these pathologies of power.

PART I

BEARING WITNESS

When it is genuine, when it is born of the need to speak, no one can stop the human voice. When denied a mouth, it speaks with the hands or the eyes, or the pores, or anything at all. Because every single one of us has something to say to the others, something that deserves to be celebrated or forgiven by others.

Eduardo Galeano, "Celebration of the Human Voice/2"

IN PRAISE OF SELF-DEPRECATATION

The buzzard has nothing to fault himself with.

Scruples are alien to the black panther.

Piranhas do not doubt the rightness of their actions.

The rattlesnake approves of himself without reservations.

The self-critical jackal does not exist.

The locust, alligator, trichina, horsefly

live as they live and are glad of it.

The killer-whale's heart weighs one hundred kilos

but in other respects it is light.

There is nothing more animal-like

than a clear conscience

on the third planet of the Sun.

Wisława Szymborska

THOUGHTS ON BEARING WITNESS

Dr. Plarr was a good listener. He had been trained to listen. Most of his middle-class patients were accustomed to spend at least ten minutes explaining a simple attack of flu. It was only in the *barrio* of the poor that he ever encountered suffering in silence, suffering which had no vocabulary to explain a degree of pain, its position or its nature. In those huts of mud or tin where the patient often lay without covering on the dirt floor he had to make his own interpretation from the shiver of the skin or a nervous shift of the eyes.

Graham Greene, *The Honorary Consul*

YOU DON'T HAVE TO BE a doctor to know that the degree of injury, of suffering, is unrelated to the volume of complaint. I have seen the sullen, quiet faces in waiting rooms in Peru, say, or in prison sickbays in Russia. I have seen these faces in the emergency rooms of the United States. I have seen the impassive faces of the silent women trudging across the public spaces of the towns of Chiapas. But their silence is of course imposed from above. Perhaps if Greene's Dr. Plarr had been an even better listener, he might have heard the true cacophony of the *barrio*. For underneath this silence lies the pent-up anger born of innumerable small indignities, and of great and irremediable ones. Underneath this silence lie the endless jeremiads of the suffering sick. Structural violence generates bitter recrimination, whether it is heard or not. And given that residents of the *barrio* and the cities and neighborhoods like it are those who endure most of the world's misery, they are precisely those most likely to have a "vocabulary to explain a degree of pain, its position or its nature."

One could almost say that there are two ways of knowing, and thus two ways of bearing witness. The first—to report the stoic suffering of the poor—is in every sense as genuine as another, more freighted form of knowing. That is, it is true that members of any subjugated group do not expect to be received warmly even when they are sick or tired or

wounded. They wouldn't expect Dr. Plarr to invite a long disquisition about their pain. They wouldn't expect the sort of courtesy extended so effortlessly to the privileged. The silence of the poor is conditioned. To describe it as stoic, as Greene's character does, is not to be wrong, but rather runs the risk of missing the great eloquence beneath the silence.

Sometimes it is the job of a physician to scratch at this surface silence, to trigger that painful eloquence. It is the self-appointed job, often, of the anthropologist to do so. But sometimes it is more respectful not to scratch at the surface silence; it is respectful to note it, as does Dr. Plarr, and to do one's job quietly. This is a second silence, then, and I have at times maintained it. Even in this book about human rights abuses, relevant events and details have been omitted. It had been my plan to write about them, and I began to do so in earlier drafts; I had all the necessary formal clearance. But in the end I did not always wish to break this second silence. These details, had they been included, would not have changed the basic theses and conclusions of this book.

I am therefore somewhat uneasy about calling the first half of this volume "Bearing Witness." Some of my anxiety has legitimate sources: the boundary between bearing witness and disrespectful (or self-interested) rooting is not always evident, even to those seeking to be discerning. And, to be honest, writing of the plight of the oppressed is not a particularly effective way of assisting them. As Philippe Bourgois notes, paraphrasing a warning issued by Laura Nader years ago: "Don't study the poor and powerless, because everything you say about them will be used against them."¹ I hope to have avoided lurid recountings that serve little other purpose than to show, as anthropologists love to do, that I was there.²

I've also hinted at another source of concern: any account is necessarily a partial one, and I have been a partial witness in every sense. It took me a relatively short time in Haiti to discover that I could never serve as a dispassionate reporter or chronicler of misery. I am openly on the side of the destitute sick and have never sought to represent myself as some sort of neutral party. (Indeed, I have argued that such "neutrality" most often serves, wittingly or unwittingly, as smokescreen or apoloogy for the structural violence described here.) Also, I have sometimes found, especially in recent years, that the second silence is not worth breaking. Pragmatic solidarity may strike some as a far more prosaic task than reporting. But the protests of the poor—in audible, remember, to many—serve as a stern reminder of the priorities of the oppressed.

I am less proud, however, of another source of trepidation: using terms such as “bearing witness” is considered *passé* in much postmodernist thinking.³ And I suppose that if one can use a term as easily to describe a testimonial given during a church service or an Alcoholics Anonymous meeting as to describe surviving and later denouncing a massacre, then there is reason enough to worry about its utility. Nonetheless I use “bearing witness” to describe the first half of this book because it consists of chapters that draw heavily on personal experience. These are things I have seen with my own eyes. They are partial accounts, but they are eye-witness accounts.

Initially, I devalued my reports from Chiapas or Cuba or Russia. I thought that the two ways of knowing were related to one’s familiarity with the culture and languages of a given time and place, and that therefore my lack of an ethnographer’s familiarity with these places made my accounts little more than tourist musings. Respect for cultural immersion as the only way to “insider” knowledge had been a lesson of my graduate studies in anthropology—remember that two years is regarded as the appropriate duration of fieldwork—but I now believe it to be something of a superstition. Although I claim to know only Haiti with an anthropologist’s depth, I have found that I can hope for both ways of knowing across boundaries of culture, language, gender, and class. It came as a surprise to me that, on my visits to health projects in Chiapas, I could quite quickly break through the superficial silence that Dr. Plarr encountered in the *barrio* of the poor. I was also surprised to discover that in a Russian prison, after a fairly rapid and mutual sizing up, I could again hear a resounding silence be broken by an even louder stream of complaint.

The two ways of knowing are not about understanding the details of the history of any given place, as important as these may be to getting the story right. The two ways of knowing, I have come to believe, are not about linguistic competence. To get beyond the first silence requires compassion and solidarity—other sentiments discredited in many academic circles, where they are often in short supply. They are in short supply in general, and this is why you can go to any one of these so-called *barrios* and meet people who have lived or worked or conducted research in them for decades without ever breaking through the superficial silence. Furthermore, much of what is written by experts about AIDS in Cuba, tuberculosis in Russia, or the origins of violence in Haiti and Chiapas has the added disadvantage of being untrue.

“Bearing witness,” like “solidarity” and “compassion,” is a term worth rehabilitating. It captures both ways of knowing, both forms of silence. Bearing witness is done on behalf of others, for their sake (even if those others are dead and forgotten). It needs to be done, but there is no point exaggerating the importance of the deed. I would like to insist that the term as used here acknowledges that, no matter how great the pain of bearing witness, it will never be as great as the pain of those who endure, whether in silence or with cries, the indignities described in these pages.

It is my hope, of course, that *Pathologies of Power* is regarded as a contribution to a critical anthropology of structural violence. Nancy Scheper-Hughes has described the anthropology of suffering as “a new kind of theodicy, a cultural inquiry into the ways that people attempt to explain the presence of pain, affliction, and evil in the world.”⁴ I tried to contribute to this analytic project when, as a graduate student, I explored local interpretations of the rank suffering that was the lot of the people with whom I lived (and with whom I live to this day). In central Haiti, accusations of sorcery were central to the way in which much suffering was explained. It was in Haiti, too, that I learned about a different kind of sorcery, much more malignant in its impact—surely, structural violence damages and destroys more lives in a day than does a century’s worth of sorcery—than the accusations I chronicled in my first book. And structural violence takes its toll in ways that seem to defy explanation. How else would we explain the intense focus on the actions and ideologies of its victims rather than those of its unseen perpetrators? Because this book is my own attempt to “explain the presence of pain, affliction, and evil,” it remains an exercise in theodicy. Since all inquiries are cultural, I do not presume that this one is not.