

Received: 13 December 2022 Accepted: 20 December 2022

DOI: <https://doi.org/10.33182/joe.v2i1.2932>



Book Review

Scott Slovic, Swarnalatha Rangarajan, and Vidya Sarveswaran (Eds). (2022). **The Bloomsbury Handbook to Medical-Environmental Humanities**. Bloomsbury Academic Press. ISBN: 978-1-3501-9730-5

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One of the first impressions upon opening the *Bloomsbury Handbook to the Medical-Environmental Humanities* is how wide-ranging the essays are in terms of geography, genre, environmental concern, medical topic, and methodology. Reading the table of contents is like gazing longingly at a confectioner's display case: which delectable to taste first? The rather long title of each essay, like a list of ingredients, gives the consumer a tantalizing idea of what is contained within. If the aspiration of the volume is to give as wide an overview as possible of the interdisciplinarity of the field, then the collection succeeds mightily.

The title includes several important concepts. First, the book announces itself as a "handbook," which suggests it is a manual or reference with instructions on a specific subject. The book succeeds in this aim, for it is an ambitious and wide-ranging endeavor that illuminates many fields and areas of inquiry.

The second important overarching concept dwells in the hyphen that links "medical" and "environmental." While most readers may have a solid sense of each term or field on its own, the power or symbiosis lies with the hyphen conjoining the two, and how both "medical" and "environmental" have, as the editors write, "convergences, intersections – and now entanglements" (6).

And, finally, the term "humanities" encompasses a rich array of fields, approaches, and methodologies. The volume impresses with essays from such disciplines as literature, anthropology, history, and sociology. Its geographic range is also wide, with essays representing narrative medicine and public health from Brazil, Turkey, Australia, China, Nigeria, Canada, the US.

All essays share as their central focus the understanding that human health and planetary health are inextricably bound together. Humanities-based medical-environmental studies is a growing field as many scholars, researchers, and students demand social change and a solution to the precarity to global wellbeing. It is exciting to see ecocriticism and medical humanities energize each other so seamlessly in this volume. As the editors write in the Introduction, "A key function of the medical and environmental humanities is to engage with harmful, unjust

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situations in the health and ecological spheres” (7). The editors admirably situate the essays in the larger scholarly context of disability studies, material ecocriticism, affect studies, Traditional Environmental Knowledge (TEK), transcorporality, psychological ecocriticism, environmental philosophy, econarratology, “ecopathodocumentary,” “ethnoecomedicine,” eco-recovery memoir, multiple chemical sensitivity, metabolic poetics, and more.

Several essays rightly address epidemics and the Covid-19 pandemic, as well as climate change. Both are human-made, human-exacerbated, can be remediated by human decision making, and both are widely politicized. Chia-Ju Change investigates “mimetic pathology,” which is “the intensification of certain contagious behaviors, wherein everyone begins to imitate on another, either in competing for the same object of desire, or finding the same target to condemn” (223). Referencing French literary critic and anthropologist Rene Girard’s influential theories of mimesis, the essay discusses the prevalence of scapegoating, whether it’s by blaming those infected with a virus or China for supposedly seeding the virus. Francoise Besson continues this line of inquiry with a chapter on Tony Hillerman and his novelistic interest in the how humans, particularly members of the Navajo nation, and nature can both be infected by disease.

Tathagata Som points out that, “Although climate change remains one of the greatest health risks all over the world, as an issue, it has not been adequately addressed in critical medical humanities. In its turn, the medical humanities is yet to make effective interventions in the discourses of mourning and grief from climate change and environmental degradation” (84), and then turns to a discussion of Canadian poet Alice Major’s poem “Welcome to the Anthropocene.”

Enriching the focus on climate change and extraction, Henry Obi Ajumeze’s essay focuses on petroculturalism and violence in the Niger Delta, which is “generative of predatory practices – such as oil spillage, gas flaring, pipeline explosions, and other forms of poisonous chemical substances that flow in the delta waters – that instantiate a ruinous future for the indigenous communities” (212). Ajumeze explores toxicity and its damages to human, nonhuman, and planetary health in the poetry collection *We Thought It Was Oil, but It Was Blood* (2002) by Nnimmo Bassey.

Samantha Walton, among others, discusses the role of nature in human health. She maintains that “Human and natural health are not in opposition, but neither do they effortlessly overlap. A more complex and critical understanding of the place of nature in care is needed if we aim to advance environmental medical humanities and assure that they both attend to the real causes of human and ecological suffering” (98). Sofia Varino expands by discussing environmental illness caused by autoimmunological responses to things like mold, dust, and pollen, all in terms of autobiographies of writes affected by multiple chemical sensitivities. She asks a very compelling question about those who seem disabled by their environmental allergies: “what if bodies disabled and debilitated by MCS were not considered defective but rather remarkably effective, and it was the volatility of various industrially produced and circulated substances that was seen as excessive and pathogenic?” (120).

Bodies stand in precarity not just because of environmental allergens but also because of food insecurity. To discuss food justice, food as medicine, and agroecological medical practices, Kathryn Yalan Change investigates two farms, one in Taiwan and one on the east coast of the USA, that are both run by physician-farmers. Susanne Lettow continues this link between



health and disease, recognizing that both are central concerns of ecofeminism. Her chapter discusses three strands of ecofeminist theory as a way into finding connections between medical and environmental learning and knowledge, and planetary health.

One of the more surprising essays is Jorge Marcone's on microbiota, and the founding of the Microbiota Vault Initiative. I have seen the Global Seed Vault in Svalbard in the Arctic Circle and was fascinated to learn about a similar initiative to catalog and store microbes that come from the colon (they are not human cells and differ from soil microbiota). According to Marcone, "we are witnessing a decrease in infectious diseases but an increase in immunological diseases. Allergies, asthma, and other autoimmune diseases are associated with the loss of diversity in the human microbiota" (201). Microbial diversity is threatened by urbanization, industrialization, and environmental degradation, such that "the worry is that we are now changing our microbiomes at an accelerated pace, disrupting age-old contracts in matters of generations" (202). He advocates that human microbiota research should be prioritized in WEIRD (Western, Educated, Industrialized, Rich, and Democratic) societies (204); much insight can come from humanities-based cross-discipline collaboration with Traditional Environmental Knowledge.

In sum, this volume proves an invaluable addition to the study of narrative medicine and public health, and the links between the clinical and the ecocultural. With a fascinating array of cultures and approaches, the essays offer a full-belly intervention into the field.