
Global Movements, Local Concerns is an important book that seeks to break new ground in the study of modern medicine and health in Southeast Asia. While it does not quite accomplish this, the effort is laudable in that the book opens new paths and overcomes potential pitfalls in a field that has been overly concerned with colonial and racial themes. In the introduction, the editors state that their volume is not about colonial medicine but rather about the national politics of health. The perspective that they suggest is not one centred on all-conquering Western biomedicine traversing the globe, but on its transformation, mediation and adaptation by local actors in Southeast Asia. The big theme is not rupture, but continuity, as seen in the emergence of hybrid forms of medicine and healthcare in the region.

This attempt to uncover complexity and local agency is timely, as ideas about hybridity and mediation have penetrated other fields in the humanities and social sciences. As contributor Liew Kai Khiun also notes, previous scholars of the history of medicine have too often tried to fit their accounts within a critique of European and American imperial hegemony. Liew’s chapter departs from this framework to examine the ways in which the Rockefeller Foundation tried to encourage local officials to undertake long-term initiatives against hookworm in Southeast Asia in the early twentieth century, while also underlining the ways in which local responses — ranging from enthusiasm to suspicion — shaped actual outcomes. This approach qualifies earlier accounts of colonial medicine and its imposition on to Southeast Asians.

Local intermediaries and agents are given due attention in the ten other chapters in the volume. One useful insight gleaned from the chapters by Raquel A.G. Reyes and Liesbeth Hesselink is that, if European and American doctors had denigrated local medicine during the era of nineteenth- and twentieth-century colonialism, Western-trained Filipino and Indonesian physicians were no less
contemptuous of local midwives and healers. This conclusion is perhaps unsurprising but nonetheless important: it suggests that researchers should move away from a preoccupation with colonial minds and action to study the ways in which Southeast Asians appropriated and translated new ideas and practices in the precolonial, colonial and postcolonial periods. Similarly, we learn from Ooi Keat Gin’s chapter that the anti-opium campaign in colonial Malaya, while inspired by its sister campaign in Britain, had its own local advocates, influences and dynamics.

One senses that, in seeking to move away from hegemony to hybridity and local mediation, the book may at times go a little too far. It is not enough to identify Southeast Asian states and doctors as agents; one needs to consider their use of health policy as a tool of royal or national power. C. Michele Thompson’s carefully researched chapter traces the role of Nguyen emperors in acquiring smallpox vaccine in early nineteenth-century Vietnam, facilitated by the efforts of French physicians in their employ. In another interesting chapter, Ayo Wahlberg discusses the appropriation of traditional medicine in Communist Vietnam as an instrument of national development. In both cases, it proves impossible to divorce the study of health policy from the social and political contexts in which it was implemented.

The book is thus important in extending the scope of analysis from colonizers to Southeast Asian rulers and doctors. As might be expected in an edited volume, this shift is uneven in a few chapters; contrast Michael G. Vann’s dissection of the colonial politics of race as revealed during cholera outbreaks in French-ruled Hanoi and Thomas B. Colvin’s discussion of the work of Spain’s *Real Expedición de la Vacuna* to introduce smallpox vaccination into the early nineteenth-century Philippines. The two chapters, each a good read in its own right, stand at opposite extremes in the history of medicine. One unravels the racial nature of colonial rule, while the other lauds the achievements of a “humanitarian” mission.

Transnational histories of medicine ought to retain the earlier concern with issues of power and domination, even as they explore in a more nuanced way the interactions between Westerners and
Southeast Asians. The chapter in this volume that most effectively reconciles the political and the transnational is Huang Yu-ling’s poignant study of how unfair trade agreements with the United States have made life-saving drugs less, not more, accessible to HIV patients in contemporary Thailand. This is an essay that connects Western and Thai actors in a compelling narrative, and also one that moves beyond the colonial period to investigate the balance of power between the global and local in the postcolonial era.

Transnational histories should also incorporate perspectives from social history. This is another area in which Global Movements, Local Concerns is rather lacking; the focus is above all on states, philanthropists and physicians. In fact, the chain of international interaction and mediation must ultimately end at the ground level. One hopes, then, that the book will encourage more transnational work on the history of medicine that will include the experiences and responses of Southeast Asians.

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Over the past five decades, anthropologists have keenly studied indigenous communities undergoing change and “development” in the forested uplands and lowlands of Southeast Asia. The book under review here examines the complexity of the issues relating to forest people living in the Indonesian province of East Kalimantan. Lars Kaskija draws on his fieldwork from 1990 to 1992 and from 1997 to 2000 to describe the lives of the Punan Malinau. The book is significant because little research has been undertaken by