

Hansson Kristofer and Irwin Rachel (eds) (2020) Movement of knowledge: Medical humanities perspectives on medicine, science, and experience. Lund: Nordic Academic Press. 265 pages. ISBN: 9789188909367

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When medical knowledge is created, may it be in the laboratory, during discussions between healthcare professionals or in a public debate, it does not come to exist in isolation. Instead it impacts the everyday living and working practices of patients and healthcare professionals related to that specific knowledge. As knowledge moves between these actors, the different contexts it exists in also shape its implications. *Movement of knowledge: Medical humanities perspectives on medicine, science, and experience* showcases how medical knowledge changes depending on its context. The edited volume consists of 9 chapters in which different empirical case studies, mainly performed in Scandinavian countries, are presented. In the current transition towards precision medicine, information about the body becomes increasingly detailed. Therefore, the editors of this volume call for further development of theories and methodologies within the humanities to better understand the dynamic interplay between the creation of medical-technical knowledge and everyday practices. One example is the digitalization of healthcare, for instance through electronic medical record systems for physicians or lay-people who share experiential knowledge online, making information about health and illness more easily accessible for everyone.

By combining different theories and empirical work, this book gives insight into the ways theory can be applied to study healthcare practices in real-world situations. Among these theories is

the work of Sheila Jasanoff (2004), on co-production of knowledge which includes both scientific and social dimensions, for example in chapters 1 and 6. Annemarie Mol's (2002) theory of the body multiple in which she shows how medical knowledge can create multiple realities (e.g. chapter 7) and the work of Nikolas Rose (2007) on the reconstruction of medical knowledge by and for the public (e.g. chapter 5). This collection of real-world cases can be useful for scholars who want to become familiar with ethnographic research on how medical knowledge impacts the lived experience of patients, healthcare professionals and citizens.

The book's empirical case studies showcase that scientific knowledge, while often seen as objective, can have multiple meanings. The studies represent different circumstances, including various actors, spaces and times, under which medical knowledge can be created, communicated and transformed. For example, Rachel Irwin shows in chapter 2 how medical knowledge can be transformed into evidence for policy-making with her ethnographic fieldwork at the World Health Organisation. In chapter 6, authors Kristofer Hansson, Gabriella Nilsson and Irén Tiberg describe the implementation of a new care model for medical personnel, in which people with different roles, such as ethnographers and facilitators who observe and implement the process respectively, co-create new insights and use this to adjust the implemen-



tation process. Another example is chapter 7 by Kristofer Hansson, in which it becomes clear that supposedly objective values from blood tests for diabetes care hold multiple meanings and thereby influence both at home care practices, hospital organisation and doctor-patient relationships.

When medical knowledge became more publicly available through the Internet, it was expected that the citizen-patient would be better informed, experience more autonomy and therefore become empowered to take on a democratic stance in their own healthcare, creating more equality between patients and healthcare professionals (e.g. Felt, 2014). Nonetheless, Felt (2014: 190) describes that being a digitally informed patient redefines one's relationship with healthcare professionals but does not change the authority status of the doctor. Yet, chapter 9 of *Movement of knowledge* shows another insight. Here, Rui Liu and Susanne Lundin showcase that healthcare professionals are no longer gatekeepers for medicine, based on institutional expertise, since the internet allowed for increased patient autonomy, for example through ordering medicine online, even on less regulated markets if felt necessary. This result in doctors being perceived less as an authority figure but more as one source of information which holds similar value as other sources of information such as experiential knowledge from peers shared online.

What is absent in the book, is an overarching critical standpoint which brings all different case studies together. The introduction does describe how all chapters show different ways of knowledge interpretation and production and introduces the main theories used throughout the book. Yet, when the volume is finished the reader

remains searching for a coherence between the chapters and therefore, perhaps even for a main message from the book. Also, methodologies such as ethnographic research on hospital practices has been proven to be challenging in uncertain times, such as the recent COVID-19 pandemic during which hospitals were inaccessible and healthcare professionals were often overworked. The next challenge would be to extend the perspective offered in the book to other countries or societies, where other cultural values, beliefs and policies prevail. Lastly, the main limit of this volume is how the title, abstract and introduction all create the expectation that the chapters will show how medical knowledge moves across actors, spaces and time. Yet, the way it moves and transforms during that movement is less shown. Instead, the chapters showcase how knowledge can exist in different ways at various knowledge sites where diverse actors relate to the form the knowledge takes on at that site. On the bright side, the book does show in various chapters how medical knowledge sets in motion the lived experience of patients, researchers, healthcare professionals and policy makers. For STS scholars, this book adds a deeper insight into the living and working practices of citizens, patients and professionals and into the possibilities of investigating theories in real-world situations. In conclusion, *Movement of knowledge: Medical humanities perspectives on medicine, science, and experience* is an inspiring book which demonstrates that medical-technical knowledge is more than an objective and one-sided entity. It shows how medical information has different meanings depending on different places, times and actors for whom that specific information is relevant.

References

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